



APPLICANT NAME: [Click here to enter text.](#)

Application for Hosting Certificate:

NOTES TO APPLICANTS

1. The principal purpose of seeking the information required by this application form is to provide the Commission with core basic factual details, thereby enabling it to:
 - make preliminary investigations in order to ascertain the full scope of its investigations;
 - identify where further information will need to be requested and/or required; and
 - identify the nature of the proposed eGambling activities and any associated business entities and key individuals.

2. The information provided must be accurate and truthful. It is a criminal offence to obtain a certificate by false statement, declaration or information. If any details set out on this application form change prior to the determination of this application, you must notify the Commission in writing as soon as reasonably practicable. [NB section 24(1) of the Alderney eGambling Ordinance, 2009 creates an offence of making a false declaration or statement or giving false information for the purposes of satisfying a requirement under the Alderney eGambling Regulations, 2009.]

3. Every question should be answered in full, using additional sheets or attachments as necessary. Where a section or question is not applicable, please use “N/A” or “NIL”.

4. Wherever possible, use BLOCK CAPITALS.

5. All dates should be in the form day / month / year.

6. An application must be accompanied by the required investigation deposit if this has not already been remitted.

SECTION 1: APPLICANT'S DETAILS

(1) Name of applicant [Click here to enter text.](#)

(2) Company number [Click here to enter text.](#)

Registered office [Click here to enter text.](#)

[Click here to enter text.](#)

(3) Correspondence address [Click here to enter text.](#)

[Click here to enter text.](#)

Nominated principal contact person [Click here to enter text.](#)

Tel: [Click here to enter text.](#)

Email: [Click here to enter text.](#)

Fax: [Click here to enter text.](#)

SECTION 2: CORPORATE INFORMATION

(4) Type of company *eg, public/private, limited by share/guarantee etc*

[Click here to enter text.](#)

Please supply a copy of the certificate of incorporation

(5) Previous company name(s) [Click here to enter text.](#)

(6) Please describe the company's main activities

[Click here to enter text.](#)

(7) Shareholders

Please list known shareholders holding 3% or more of issued share capital)

| <u>Name</u> | <u>% of issued capital</u> |
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(8) Finances

Please attach recent audited accounts for your company, parent company or group (as appropriate).

(9) Group corporate structure

Please attach a diagram showing

- the complete group structure including any parent company, subsidiary or associated company.*
- the ultimate beneficial owner(s) of the applicant*
- the activities of each entity in the group*

For each entity in the group, state where registered and ownership

Click here to enter text.

(10) Group investors

Please list all known shareholders holding 3% or more of the applicant's parent company

| <u>Name</u> | <u>% of issued capital / entity</u> |
|---------------------------|-------------------------------------|
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(11) Officers and management

Please list directors, company secretary and senior managers of the applicant and, where applicable, of other group entities who will control or exercise influence over the applicant's business and/or operational functions

Please supply brief biographies or cvs for each named individual.

Please attach a company organisation chart showing reporting structures

| <u>Name</u> | <u>Position</u> | <u>Relationship to Applicant</u> |
|---------------------------|---------------------------|----------------------------------|
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SECTION 3: HOSTING PREMISES

(12) Address(es) of premises for which approval is being sought:

[Click here to enter text.](#)

(13) Details of premises - specify hosting room name(s)/reference number(s)

Please describe the premises and individual hosting rooms for which approval is sought, giving attention to the following elements:

- a) certification to relevant local regulations and ISO/TIA standards
- b) quantity of racks and rack configuration (e.g. 47U capacity 800 x 600)
- c) power per rack (e.g. 30amp x 2) and total inbound power capacity (KW/MW) to data-centre, and whether power diversely routed into the premises
- d) UPS and generator back-up power systems and redundancy
- e) air conditioning systems, air-flow, raised flooring, overhead cabling, lighting
- f) redundancy and diversity of internet feeds and telecommunications providers
- g) access control systems, security procedures, and CCTV recording capacity
- h) fire and environmental protection systems, including information on whether these meet standards such as VESDA, FM200, water leak detection.
- i) any disaster recovery procedures, proximity of local threats, alternate premises
- j) staffing, including recruitment & vetting policies, training, out of hours cover etc

Please attach a technical diagram of the premises for which approval is sought, showing:

- k) rack layout, and an interior building and external site plan drawing
- l) map of vicinity at least 1km square showing proximity of potential threats
- m) air conditioning, generator, switchgear/control panels and UPS systems
- n) secure areas, entrances(s) and exit(s), CCTV cameras and emergency lighting

(14) Regulatory status

Does your organisation or an associated business entity hold a gaming related licence anywhere else in the world? If so, please supply copies of any such licence(s).

(15) Litigation

a) Has your organisation or an associated business entity been fined or censured by any regulatory body in the last 10 years? Yes No

If yes, please supply details

b) Has your organisation or an associated business entity been involved in substantial litigation in the last 10 years? Yes No

If yes, please supply details

(16) Further information:

Please add any further information which you consider relevant to assist the Commission in determining your application.

[Click here to enter text.](#)

DECLARATION

I have been duly authorised by the applicant to make this application on its behalf (see certified true copy of minute attached).

I declare that the information contained in this application is true and accurate to the best of my knowledge, information and belief and that, if any of the information contained in or appended to this application is discovered to be false, I may be liable to prosecution.

Signature: _____

Name (*print*): [Click here to enter text.](#)

Date: [Click here to enter a date.](#)

* * * * *

The original completed application form and any attachments should be bound as a single document and, together with ONE unbound copy of the same, should be forwarded to:

Director
Alderney Gambling Control Commission
St Anne's House
Queen Elizabeth II Street
ALDERNEY
GY9 3TB
via United Kingdom.