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Directive 11/2016

Declaration by a Responsible Person for Licensed Premises

According to section 11(b) of the Betting Law of 2012, N. 106(I)/2012 ("Law") the National Betting Authority ("Authority") has the power to draw up and issue regulations and Directives in order to ensure the best possible implementation of the Law. Directive No. 11/2016 is drawn up on the basis of the provisions of section 36(2) of the Law concerning the application for obtaining a license for premises, according to which, in the event that the Class A license recipient or the authorised representative employ staff, they are obliged to appoint one or more physical persons who shall be responsible to ensure that the provisions of the present Law are complied with inside the premises and must notify the Authority accordingly.

- 2. As a consequence, the Authority clarifies that the Class A recipient or the authorised representative are obliged to submit to the Authority the Declaration of the Responsible Physical Person in the Licensed Premises Form N.B.A.4, accompanied by the necessary documents.
- 3. The relevant form N.B.A.4 is hereby enclosed and it is also posted on the website of the Authority (http://nba.gov.cy/).

Ibanna Fiakkou XHMATON

EONIKH

President

*in case of discrepancy between English and Greek versions, the Greek version supersedes N.B.A. 4

Declaration by Responsible Physical Person in Licensed Premises

Based on article 36(2) of The Betting Law 2012 106 (I)/2012

- Statutory declaration by an authorised representative/ company representative Class A Recipient.
- The statutory declaration must be completed by the responsible person who is employed by the Class A licensee recipient or an authorised representative, at premises where betting services are provided, and must be submitted completed to the National Betting Authority.
- It is noted that the statutory declaration must be completed in CAPITAL letters.
- In case there is no sufficient space please attach additional pages. Every additional page should be numbered at the top and be initialed by the applicant.
- The application must be completed in Greek.
- In case a subparagraph is not applicable please write not applicable or N/A.
- The Authority preserves the right to request any additional information at any time.

NAME AND SURNAME OF APPLICANT RESPONSIBLE PERSON	
TRADE NAME OF CLASS A RECIPIENT /AUTHORISED REPRESENTATIVE	

STATUTORY DECLARATION OF AUTHORISED REPRESENTATIVE/COMPANY REPRESENTATIVE – CLASS A RECIPIENT

Name:
Surname:
Address:
Contact number:
I, the below undersigned, holder of identity card number, an authorised
representative/ representative of the company that provides betting services
(company name) for the premises at
the address
(premises address), verify the validity of the Declaration by Responsible Physical Person in Licensed
Premises (N.B.A. 4).
Signature of
Authorised Representative
Or Representative of Class A Recipient Date

To be completed for each responsible person who is responsible for the application of the provisions of The Betting Law 2012 N106(I)/2012 in the premises.

1. Personal Details

Name	Surname	
Date of birth	Identity	y card number
Alien Registration Certificate	European c	citizen registration number
Residential address (street and numb	oer)	
City	Municipality	Postal code
Telephone	Mobile phone	Fax

2. Criminal Record

Does the applicant have a clean crimin	nal record?
□ Yes □ No	
Please state the nature of any previous	s convictions and the kind of the sentence imposed.
3. Details of Class A Recipie	nt/Authorised Representative
3.1. Class A Recipient	
Company Name	Registration number
Recipient License Number	
3.2. Authorised Representative	
3.2.1. If it is a company	
Company Name	Registration number
Authorised Representative License Nun	nber

3.2.2. If this is a physical person

Name	Surname	
Authorised Representative License	Number	
4. Details of premises		
Premises License Number		
Street and number		
City	Municipality	Postal code
Telephone	Mobile phone	Fax

5. Employment

Date of commencement of employment	
Social Security Number	Tax Registration Number
Responsible Person Signature	Date of submission of application
Responsible i cison signature	Date of submission of application

THE PROCESSING OF PERSONAL DATA

(PROTECTION OF INDIVIDUALS LAW 2001)

Explicit consent and declaration of acknowledgment of updating by an applicant or applicant company in regards to the collection and processing of personal data.

I give my consent and authorise the National Betting Authority to maintain one or more personal data archives for the purposes of examining any application for the provision to the applicant or the applicant company of a premises license to the recipient/authorised representative for the carrying out of Class A bets, according to The Processing of Personal Data (Protection of Individuals) Law 2001, as has been amended.

I acknowledge and accept that every premises license for the provision of a Class A bet that is issued by the National Betting Authority as well as any revocation or suspension of a license and every amendment, cancelation or imposition of new terms are communicated to the credit institutions and publicised by the Authority, according to article 18 of The Betting Law 2012.

Name and surname of applicant	Signature

ENCLOSURES

3. Original Criminal Record

1.	Copy of identity card number (both sides) or copy of Residence Permit	
	or Copy of Passport	
2.	Confirmation of European Citizen Registration by the Civil Registry	
	and Migration Department	

The form must $\underline{necessarily}$ be accompanied by the following documents:

4. Confirmation of registration to the Social Insurance Scheme