|  |
| --- |
| **COMMUNITY GAMING AUTHORITY***Community Gaming Act 2018; Community Gaming Regulation 2020* |
| **Notification Form for Changes to Gaming Activity** |
|  |
| **What is this form used for?**This form is used to notify NSW Fair Trading about any substantial changes to the rules of a gaming activity conducted under an existing authority. **Substantial change** includes (but is not limited to):(a) a change to the prizes or the value of the prizes,(b) a change in the date on which prize winners are to be determined or the method for determining prize winners,(c) a change in the details of the authority holder,(d) a significant change in the number of tickets. |
|  |
| 1. You cannot use this form to completely replace the rules, change the type of gaming activity or the authority holder. You will need to complete a new application form for these changes.
2. You must include a marked-up version of the updated rules containing the changes.
3. If information is missing, we may ask you to supply further information and/or documents to support the notification form.
4. You must be aware of, and abide by, your obligations and responsibilities under the *Community Gaming Act 2018,* the *Community Gaming Regulation 2020* and any other relevant Acts and Regulations related to the conduct of their authorised gaming activity.
 |
| For further information or help completing this form, call **13 32 20** or email CElottery@customerservice.nsw.gov.au*.****Note: No fee is payable when lodging this form.*** |

|  |
| --- |
| **SECTION 1 – AUTHORITY DETAILS** |
| Authority Number:  |
|  | Click or tap here to enter text. |  |  |
|  |  |
|  |

|  |
| --- |
| **SECTION 2 – AMENDMENT DETAILS** |
|  |
| Please indicate the type(s) of change to your existing authority:  |
|  |
|  |[ ]  Prize type and/or value |  |
|  |[ ]  Draw date |
|  | ☐ | Draw location  |
|  |[ ]  Method of determining prize winners |  |
|  |[ ]  Authority holder details (please fill out Section 3) |  |
|  |[ ]  Number of tickets sold |  |
|  |[ ]  Other (please specify) | Click or tap here to enter text. |  |
|  |  |  |

|  |
| --- |
| **SECTION 3 – AUTHORITY HOLDER DETAILS (if changed)** |
| **Part A – Authority holder**  |
|  | Name: |  |  |
|  | Click or tap here to enter text. |  |
|  |  |  |
|  | Trading name (if applicable):  |  |
|  | Click or tap here to enter text. |  |
|  |  |  |  |  |
|  | Postal address: |
|  | Click or tap here to enter text. |  |
|  | Click or tap here to enter text. |  |
|  | Click or tap here to enter text. | Postcode: | Click or tap here to enter text. |  |
|  |  |  |  |  |
|  | Is this a residential address? |[ ]  Yes |[ ]  No |  |
|  |  |  |  |  |
|  | Phone: |  | E-mail: |  |
|  | Click or tap here to enter text. |  | Click or tap here to enter text. |  |
|  |  |  |  |  |
|  | Website (if applicable):  |  |  |  |
|  | Click or tap here to enter text. |  |
|  | **Note: Part A is used to change contact details of the authority holder. To apply as a new authority holder, you must fill out a separate application form.**  |  |

|  |
| --- |
| **Part B – Nominated contact person**  |
| *The nominated contact person is the primary point of contact for this notification.* |
|  |  |  |  |
|  | Surname: |  | Given Names: |
|  | Click or tap here to enter text. |  | Click or tap here to enter text. |  |
|  |  |  |  |  |
|  | Phone:  |  | Email:  |  |
|  | Click or tap here to enter text. |  | Click or tap here to enter text. |  |
|  |  |  |  |  |
|  | Position within organisation (if applicable):  |  |
|  | Click or tap here to enter text. |  |
|  |  |  |
|  | Postal address:  |  |
|  | Click or tap here to enter text. |  |
|  |  |  |
|  |  | Postcode: | Click or tap here to enter text. |  |
|  |  |  |  |  |

|  |
| --- |
| **SECTION 4 – ATTACHMENTS** |
| You must provide updated rules of the gaming activity, outlining all substantial changes. **Note:** A marked-up copy of the original rules would be acceptable.  |

|  |
| --- |
| **SECTION 5 – DECLARATION** |
| * I declare that I am 18 years or older and I am authorised to make this notification on behalf of the person or organisation conducting the gaming activity.
* I declare that all reasonable steps will be taken to ensure that persons proposing to conduct the gaming activity and persons associated with proposed activity are fit and proper.
* I declare that the contents of this notification including any attachments are true, correct and complete.
* I acknowledge that under section 307A of the *Crimes Act 1900* it is an offence to provide false, misleading or deficient information in this notification.
* I acknowledge that failure to provide all required information may result in refusal of the notification.
* I understand that specific details I have supplied in this notification may be ‘personal information’ under the *Privacy and Personal Information Protection Act 1998*. Personal information is any information or opinion that identifies an individual, or enables someone to identify an individual.
* I acknowledge that NSW Fair Trading is collecting personal information to enable processing of the notification. I also understand that this agency will use the information for its intended purpose only, store the information securely, and allow me to access and update the information. I also acknowledge that this agency, when processing this notification, may need to disclose personal information to other Government agencies
* I consent to the use of personal information in this notification for the purposes of maintaining the Community Gaming public register.
 |
| **Signature** |  |
| **Printed name** | FULL NAME IN BLOCK LETTERS |
| **Position/ Title** | Position |
| **Date of signing**  | Click or tap to enter a date. |