

A. Application requirements

This checklist details the documents required to accompany an Associate Application. Lodging a complete application can reduce the processing time. Incomplete applications that do not meet the below requirements are unable to be processed. Further information on Associates can be found [here](#).

Tick to confirm you have lodged the required documentation for this application

- Associate Application (this document)
- [Statutory Declaration](#)
- [Authority and Consent](#)
- [Proof of identity documentation](#)
- Credit Card Payment Authority for [application fee](#) (gaming associates **only**)

B. Type of licence/permit to be associated with

An applicant or current holder of

- Liquor licence
- Club liquor licence
- Liquor permit
- Licensed Premises Gaming Licence
- Tasmanian Gaming Licence
- Tasmanian Casino Licence
- Foreign Games Permit
- Roll of Recognised Manufacturers, Suppliers and Testers of Gaming Equipment

Liquor
(complete sections
B, C, D and G)

Gaming
(complete sections
B, C, D, E, F and G)

Business, premises or club name*

Next steps:

1. Complete and compile all required attachments (section A).
2. Complete the relevant sections of this *Associate Application* form.
3. Lodge the complete application (including all attachments) via email or post.

Email
licensing@treasury.tas.gov.au

Web
www.treasury.tas.gov.au/liquor-and-gaming

Post
The Commissioner for Licensing
Liquor and Gaming Branch
GPO Box 1374
HOBART TAS 7001

Telephone
Monday to Friday
8:45 am to 5:00 pm
(03) 6166 4040

C. Type of associate

How are you associated to the above named business, premises, club*

[Select from the below options and specify your association to the applicant or current licence/permit holder.]

I hold or will hold: Office Bearer title
(for club licences e.g. Treasurer, president, secretary)
specify

relevant financial interest
(for example investor, shareholder, business partner)
specify

relevant position in the business
(for example, director, manager)
specify

relevant power or significant influence in the management or operation of the business
specify

I am a relative (full or half-blood): spouse child
 partner sibling
 parent

D. Associate details

Title

Surname*

Given name*

Middle name(s)

Preferred name (if different from above)

Have you been known by another name?* Yes No

If YES, provide former name and details
(e.g. maiden name, married name, name change by deed poll)

Residential address*

State* Postcode*

Postal address (if different from residential address)

State Postcode

Previous residential address

State Postcode

Date of birth (dd/mm/yyyy)*

Place of birth*

Mobile*

Home phone

Email address*

Have you ever been found or pleaded guilty Yes No

to an offence in Tasmania, or any other Australian State?*

[If YES, insert offence details below. Examples of offences may include (but are not limited to) assault, stealing, fraud, obtaining a financial advantage (minor traffic offences are not required).]

Nature of offence

State Year

Nature of offence

State Year

Nature of offence

State Year

Have you ever been bankrupt or are currently an undischarged bankrupt?* Yes No

[If YES, provide details below. Supporting documents can be attached.]

Have you ever entered into a debt agreement?* Yes No

[If YES, provide details below. Supporting documents can be attached.]

Additional information* Yes No

Other information relevant to the assessment of associate suitability

[If YES, provide details below. Supporting documents can be attached.]

E. Associate details [gaming only]*

Complete this section if your association is with an applicant or current licence holder of a gaming licence or permit.

Have you held a gaming or technicians licence in any State or territory in Australia?* Yes No

[If YES, complete all of this section (section E).]

Licence type Licence number

State of issue Year issued

Name of licensing authority

Are you currently employed in the gaming industry?* Yes No

[If YES, provide your employment and employer details below.]

Year employment commenced

Occupation (current)

Venue name

Venue address

State Postcode

F. Consent to finger print [gaming only*]

Complete this section if your association is with an applicant or current licence holder of a gaming licence or permit. This application may be refused by the Tasmanian Liquor and Gaming Commission if consent is not given.

I consent to be finger printed and palm Yes No
printed for the Tasmanian Liquor and
Gaming Commission*

G. Signature

By submitting this application and providing my email address, I consent to information being given by means of electronic communication as defined by the *Electronic Transactions Act 2000 (Tasmania)*.

Associate signature

Date

Personal Information Protection Statement

Personal information is collected by the Tasmanian Liquor and Gaming Commission and the Commissioner for Licensing and used for the purpose of managing, assessing, advising upon and determining the relevant application. It may be used for other purposes as permitted by the [Gaming Control Act 1990](#), the [Liquor Licensing Act 1990](#) and relevant Regulations. Failure to provide the information required may result in an application not being able to be processed, or a service not being able to be provided.

Your personal information will be used for the primary purpose for which it is collected, and may be disclosed to contractors and agents of the Liquor and Gaming Branch, the Tasmanian Liquor and Gaming Commission, law enforcement agencies, debt collection and other finance agencies for the purposes of conducting a credit check, courts and other organisations authorised to collect it.

The [Personal Information Protection Act 2004](#) governs the collection, use and disclosure of personal information. The Department of Treasury and Finance is the custodian of personal information it collects. Further information about Treasury's Personal Information Protection Policy is available at www.treasury.tas.gov.au/pip.