

INDIVIDUAL ACTIVITY NOTIFICATION FOR LUCKY ENVELOPES

DETAILS OF MINOR GAMING PERMIT HOLDER

Minor Gaming Permit Holder Name

Minor Gaming Permit Number Daytime Phone Number.....

DETAILS OF LUCKY ENVELOPES

HOTELIERS – PLEASE COMPLETE THIS SECTION

Name of Hotel.....

Full Name of Licensee.....

Number of Dispensers

IMPORTANT: Please complete the reverse side of this form which details the beneficiaries of the activity.

CLUBS AND OTHER ORGANISATIONS - PLEASE COMPLETE THIS SECTION

Full Name of Organisation

What type of lucky envelope tickets are to be sold? (Please Circle) Liquor Cash

Number of Dispensers ?

What dates do you wish to sell ?

Full address of where envelopes are to be sold

What purpose will the proceeds be used for?.....

Has the organisation received a permit before?..... If so, When?.....

If the organisation has not been granted a previous permit, a copy of the constitution is required.

I certify that proceeds raised will only be applied for the lawful purposes of the organisation(s) noted on this notification and that have been subsequently approved by the Commission. I certify that the proceeds raised from the sale of lucky envelopes pursuant to this application will not be used for private gain.

I have read and understood the conditions that apply in respect of lucky envelopes. I certify that, to the best of my knowledge, the details provided in this notification are true and correct. I accept total responsibility for the proper sale of lucky envelopes.

Signature of responsible person Date.....

Name of responsible person

Signature of licensee in the case of a hotel Date.....

Name of licensee in the case of a hotel

LIQUOR AND GAMING CONTACT DETAILS

Salamanca Building Parliament Square 4 Salamanca Place HOBART TAS 7000
Telephone: (03) 6166 4040 Facsimile: (03) 6173 0218

Level 3 Henty House 1 Civic Square LAUNCESTON TAS 7250
Telephone: (03) 6777 2777 Facsimile: (03) 6173 0218

GPO Box 1374 HOBART TAS 7001 Australia
Email: gaming@treasury.tas.gov.au Web: www.gaming.tas.gov.au

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HOTELIERS – PLEASE COMPLETE THIS SECTION

PAYMENTS MUST BE MADE IN MONEY EACH QUARTER AND NOT IN GOODS OR SERVICES
(Beneficiaries will be asked to verify that they have received payments)

A CURRENT DISTRIBUTION NOTICE MUST AT ALL TIMES BE DISPLAYED IN A PROMINENT POSITION IN THE HOTEL.

Full Name of organisation
Name of person you will be paying money to
Position in the organisation
Home address
Daytime phone number (mandatory)

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