

BEFORE COMMENCING THE APPLICATION **PLEASE READ THE INSERT PROVIDED**  
IF YOU REQUIRE ASSISTANCE CONTACT THE LIQUOR AND GAMING BRANCH ON  
(03) 61664040 - HOBART OR (03) 6777 2777 - LAUNCESTON

## APPLICATION FOR A SPECIAL EMPLOYEE'S OR TECHNICIAN'S LICENCE

CHECKLIST PLEASE ENSURE REQUIREMENTS FOR EACH ITEM ARE COMPLETE BEFORE SUBMITTING THIS APPLICATION

- All questions are answered and details provided where required - ensure you write in **BLOCK LETTERS** in pen, not pencil. If a question does not apply to you state N/A in response to that question. If space available is insufficient, please supply the required information on an attached page and precede each answer with the number applicable to the question.
- Provide four (4) recent passport photographs.**
- Provide two (2) identification documents, one of these must be a form of photo identification (eg. passport or Driver Licence).** These copies need to be endorsed with the words "original sighted" and signed by an acceptable witness.
- The correct application fee is enclosed.

**You may be requested to provide additional information as part of the assessment of your application.**

GAMING LICENCE CATEGORIES PLEASE TICK

- |   |                          |   |                          |
|---|--------------------------|---|--------------------------|
| 1. Licensed Premises Gaming Operative:<br>(Hotel or Club Staff) | <input type="checkbox"/> | 5. Statewide Gaming Operative<br>(Network Gaming Staff Only)  | <input type="checkbox"/> |
| Keno Writer   | <input type="checkbox"/> | 6. Statewide Gaming Management<br>(Network Gaming Staff Only) | <input type="checkbox"/> |
| Senior Writer   | <input type="checkbox"/> | 7. Technician (Category A)                                    | <input type="checkbox"/> |
| Gaming Machine Attendant  | <input type="checkbox"/> | 8. Technician (Category B)                                    | <input type="checkbox"/> |
| Gaming Machine Supervisor                                       | <input type="checkbox"/> | 9. Betting Exchange Operative                                 | <input type="checkbox"/> |
| 2. Casino Operative   | <input type="checkbox"/> |   |                          |
| 3. Casino Management  | <input type="checkbox"/> |   |                          |
| 4. Casino Security  | <input type="checkbox"/> |   |                          |

THIS DOCUMENT AND ITS CONTENTS WILL REMAIN STRICTLY CONFIDENTIAL  
TO THE LIQUOR AND GAMING BRANCH AND THE TASMANIAN LIQUOR AND GAMING COMMISSION.

1. FULL NAME OF APPLICANT (Note: The applicant must be at least 18 years of age)

TITLE	SURNAME	GIVEN NAME
MIDDLE NAME/S	DATE OF BIRTH	PLACE OF BIRTH (TOWN AND STATE)

2. HAVE YOU BEEN KNOWN BY ANY OTHER NAMES?

(For example, maiden name, married name, family name, change by deed poll etc.)

GIVE DETAILS

3. CONTACT DETAILS (The Commission will contact you by email)

WORK	HOME PHONE	MOBILE / AH	EMAIL

4. CURRENT RESIDENTIAL ADDRESS

POSTCODE:	
FROM (month and year)	TO (month and year)

5. POSTAL ADDRESS (If different from residential)

POSTCODE:	

6. PREVIOUS RESIDENTIAL ADDRESS

POSTCODE:	
FROM (month and year)	TO (month and year)

7. DO YOU HAVE A CURRENT DRIVER LICENCE?  NO  YES (If YES complete below)

LICENCE NUMBER	EXPIRY DATE	PLACE OF ISSUE

8. DETAILS OF THE WITNESS TO YOUR IDENTIFICATION

TITLE	SURNAME	GIVEN NAME/S
ADDRESS		
POSTCODE:		
OCCUPATION	TELEPHONE	CATEGORY OF WITNESS (See insert)

9. HAVE YOU EVER BEEN EMPLOYED IN THE GAMING INDUSTRY?  NO  YES (If YES provide details)  
(ie casino, keno/gaming machine venue or gaming regulatory authority)

LICENCE TYPE AND NUMBER

--

PLACE AND YEAR OF ISSUE

--

NAME OF CONTROL AUTHORITY

--

10. ARE YOU CURRENTLY EMPLOYED?  NO  YES (If YES complete below)

CURRENT OCCUPATION

PRESENT EMPLOYER

--	--

ADDRESS

--

POSTCODE:

--

FROM (month and year)

--

11. HAVE YOU EVER BEEN CONVICTED OF AN OFFENCE IN TASMANIA OR ELSEWHERE (whether as a juvenile or an adult)?

NO  YES (If YES provide details)

NATURE OF OFFENCE

LOCATION

DATE


12. HAVE YOU EVER BEEN BANKRUPT OR ARE YOU CURRENTLY AN UNDISCHARGED BANKRUPT?

NO  YES

13. CONSENT TO FINGERPRINT

i consent to being fingerprinted and palm printed for the Tasmanian Liquor and Gaming Commission.

NO  YES (If NO your application may be refused by the Tasmanian Liquor Gaming Commission)

14. IS THERE ANYTHING ELSE YOU WISH TO DISCLOSE WHICH YOU CONSIDER WOULD BE RELEVANT TO THE TASMANIAN LIQUOR AND GAMING COMMISSION'S CONSIDERATION OF YOUR APPLICATION?

NO  YES (If YES provide details)


THE APPLICANT IS REQUIRED TO COMPLETE **BOTH** THE  
'STATUTORY DECLARATION' AND THE 'AUTHORITY AND CONSENT' SECTIONS

## STATUTORY DECLARATION

I, \_\_\_\_\_  
(Full Name of Applicant)

of \_\_\_\_\_  
(Address of Applicant)

### DO SOLEMNLY AND SINCERELY DECLARE:

- (a) I have personally completed all the information required in this Special Employee's or Technician's Licence application form; and
- (b) I certify that the particulars contained in the completed Special Employee's or Technician's Licence application form are true and correct in every detail and fully disclose the information required to complete this application.

AND I MAKE THIS SOLEMN DECLARATION by virtue of the *Oaths Act 2001*.

\_\_\_\_\_  
(Signature of Applicant)

DECLARED at \_\_\_\_\_  
(Place of declaration eg. Hobart)

In the State of \_\_\_\_\_  
(State of declaration eg. Tasmania)

This day of 20\_\_\_\_\_

before me \_\_\_\_\_  
(Signature of Witness)

\_\_\_\_\_  
(Name and occupation of Acceptable Witness)

\_\_\_\_\_  
(Category of Witness)

## AUTHORITY AND CONSENT

To: All courts, Government Departments, employers, educational institutions, banks, financial and other institutions, all agencies - Federal, State and Local Governments, without exception to both foreign and domestic and to whomsoever else this authorisation and consent may be duly presented.

From: \_\_\_\_\_  
(Full Name of Applicant)

of \_\_\_\_\_  
(Address of Applicant)

Date of Birth / /

Telephone (M) \_\_\_\_\_

I hereby authorise and consent to the Tasmanian Liquor and Gaming Commission and any member of the Liquor and Gaming Branch to obtain information (including financial and other confidential information) concerning myself. I also consent to my information being checked with the document issuer or official record holder for the purpose of confirming my identity. A photocopy of this Authority and Consent will be considered as effective and as valid as the original.

One of the purposes for which this Authority and Consent has been given is to satisfy section 18n(1)(ga) of the *Commonwealth Privacy Act 1988* which provides that the personal information in possession of any credit provider can only be disclosed to another person where there is written authorisation by the applicant to do so.

\_\_\_\_\_  
(Signature of Applicant)

Date / /

\_\_\_\_\_  
(Signature of Witness)

\_\_\_\_\_  
(Name and Address of Acceptable Witness)

### CATEGORY OF ACCEPTABLE WITNESSES (NOTE: A family member is NOT an acceptable witness)

1. A Commissioner for Declarations	5. A legally qualified medical practitioner
2. A Justice of peace or bail justice	6. A pharmacist
3. A member of the police force	7. An authorized person of the Tasmanian Liquor and Gaming Commission
4. A barrister an solicitor of the Supreme Court	

Applications may be lodged in person, by post or faxed to the contact details below.

Email: [gaming@treasury.tas.gov.au](mailto:gaming@treasury.tas.gov.au)  
Web: [www.gaming.tas.gov.au](http://www.gaming.tas.gov.au)  
Fax: (03) 6173 0218

**HOBART**  
Salamanca Building Parliament Square  
4 Salamanca Place HOBART  
Ph: (03) 6166 4040

**MAILING ADDRESS**  
GPO Box 1374  
HOBART TAS 7001

**LAUNCESTON**  
3<sup>RD</sup> Floor Henty House  
1 Civic Square LAUNCESTON  
Ph: (03) 6777 2777



# Applying for a Special Employee's or Technician's Licence

## ELIGIBILITY

Applicants must be 18 years of age or over.

Your application will be assessed by the Tasmanian Liquor and Gaming Commission to determine whether or not you are suitable to be a licence holder. To make this assessment, the Commission may contact various organisations including the following:

- Tasmania Police
- Australian Securities and Investments Commission
- Registrar of Births, Deaths and Marriages
- Gaming Regulatory Authorities
- Credit Agencies
- Financial Institutions

You are required to give authority and consent to the Commission to obtain information (including financial and other confidential information) relevant to your application.

## WHY DO I NEED A LICENCE?

### Special Employee

If you wish to operate keno and gaming machines you will need a Special Employee's licence to do so. Section 50(1) of the *Gaming Control Act 1993* states that "a person must not exercise the functions of a special employee except in accordance with the authority conferred on the person by a licence".

Failure to comply with this section may result in a **fine of up to \$8,150** or a **term of imprisonment not exceeding three months** or **both**.

### Technician

A technician is a person who installs, services, repairs or maintains gaming equipment in Tasmania or undertakes software / hardware development, testing and analysis.

A person conducting these activities without a licence issued by the Commission may receive a **fine not exceeding \$40,750** or a **term of imprisonment for 12 months**.

## PROBITY REQUIREMENTS

Special Employee's licence and Technician licence applicants are not required to be fingerprinted unless the Commission determines otherwise.

All new applicants **must consent to being fingerprinted**, irrespective of whether this takes place. Please do not have your fingerprints taken unless requested by the Commission.

If you think you may be entitled to claim a right of non-disclosure in relation to offences, you should check with the Privacy Commissioner on the Privacy hotline: 1300 363 992 (toll free).

The Commission will destroy your fingerprints when your licence expires or where an application for a licence is refused.

## DOCUMENTS WHICH MUST ACCOMPANY YOUR APPLICATION

Two copies of identification from the list below must be included with your application. One of these **must be** a form of photo identification. All documents must be certified copies. These copies need to be endorsed with the words "**Original Sighted**" **signed (witness name)**.

- Birth Certificate
- Department of Immigration and Multicultural Affairs Certificate of Evidence of Resident Status
- Citizenship Papers
- Medicare Card
- Australian Passport
- Plastic Bank or Credit Card, with signature
- Overseas Passport/Visa
- Tertiary Student Identity Card
- Driver Licence
- Department of Veterans' Affairs/Centrelink Pensioner Concession Card
- Firearm Licence
- Security Guard/Crowd Controller Licence
- Department of Immigration and Multicultural Affairs-issued travel documents, including a visa
- Births Deaths & Marriages Change of Name/Marriage Certificate or Deed Poll (to prove name change)
- Working with Vulnerable People card

## ACCEPTABLE WITNESSES

The following are acceptable categories of witnesses:

- A Commissioner for Declarations
- A Legally qualified Medical Practitioner
- A Justice of the peace or Bail Justice
- An Authorised Person of the Tasmanian Gaming Commission
- A member of the Police force
- A Pharmacist
- A Barrister and Solicitor of the Supreme Court

## PASSPORT PHOTOGRAPHS

Your application must include a recent passport sized photograph.

## APPLICATION FEES

The application fee for a Special Employee's licence is **\$189.60**.

The application fee for a Technician's licence is **\$189.60**.

Should you be required to have your fingerprints taken by the Tasmanian Liquor and Gaming Commission, further fees may apply.

Application fees are non refundable once an application has been registered. The fee can be paid by:

- Credit Card
- Money Order
- Cheque made payable to the Tasmanian Liquor and Gaming Commission

Your application should be forwarded to the Liquor and Gaming Branch either in person or by mail.

## PERSONAL INFORMATION PROTECTION STATEMENT

1. Personal information will be collected from you for the purpose of determining your application and will be used by the Liquor and Gaming Branch, Department of Treasury and Finance, for managing, assessing, advising upon and determining the relevant application and may be used for other purposes permitted by the *Gaming Control Act 1993* and Regulations.
2. You are required to provide this information by the *Gaming Control Act 1993* and Regulations. Failure to provide this information may result in your application not being able to be processed or the service not being able to be provided.
3. 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.
4. Your basic personal information may be disclosed to other public sector bodies where necessary for the efficient storage and use of the information.
5. Personal information will be managed in accordance with the *Personal Information Protection Act 2004* and may be accessed by the individual to whom it relates on request to the Department. You may be charged a fee for this service. Further information on the Department's policies in relation to the *Personal Information Protection Act 2004* can be found at <http://www.treasury.tas.gov.au/pip>

## 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 I 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](mailto:gaming@treasury.tas.gov.au) Web: [www.gaming.tas.gov.au](http://www.gaming.tas.gov.au)

## CREDIT CARD AUTHORITY

Name of Applicant:-
Venue / Premises:-

Name on Credit Card:-	
Acceptable Credit Cards (please tick):- MasterCard <input type="checkbox"/> Visa <input type="checkbox"/>	
Credit Card No.    ____ / ____ / ____ / ____	Expiry Date    ____ / ____
Card Verification Number (last 3 digits on signature panel)    ____ ____ ____	

Signature of credit card holder:-	
Total amount to be debited	\$

(Office use only)

PAYMENT NO:-	ENTERED BY:
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### LIQUOR AND GAMING CONTACT DETAILS

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

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