Gambling application kit Application to decrease gaming machines

VOL091224

This form is for holders of a Venue Operator's Licence to apply to decrease the number of gaming machines permitted at an approved premises. You should only make this application if the excess machines have already been removed from the premises. No fee applies to this application.

How to apply

Send application via email to:

contact@vgccc.vic.gov.au

Privacy Policy

The VGCCC is committed to responsible and fair handling of personal information consistent with the *Privacy and Data Protection Act 2014* and its obligations under the *Gambling Regulation Act 2003 (the Act).*

Confidentiality Provisions

Information provided in your application must not be disclosed by the VGCCC or its staff to someone else, except for the purposes stated in Part 1, Division 6 of Chapter 10 of the Act. Go to <u>vgccc.vic.gov.au</u> to access this Act.

Victorian Gambling and Casino Control Commission

VGCCC.VIC.GOV.AU

Application to decrease gaming machines

1. Premise details	3. Venue Operator's Licence (VOL)
Name:	What is the name shown on your VOL?
Address:	What is the address shown on your VOL?
Approval number:	What is the licence number?
Telephone number:	
	4. Application details
Email address:	— How many gaming machines are approved under your current
	VOL?
2. Authorised representative details	
	How many gaming machines do you want to remain on your VOL?
Name:	
Address:	Have the excess machines been removed from the premises?
	YES
Telephone number:	
Email address:	



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Declaration

I, the authorised representative for the applicant, declare that I have read and understood the questions in this application form and the directions for answering them. I declare that I have answered the questions truthfully and completely to the best of my knowledge. I undertake to immediately notify the VGCCC should any information in this application change. I acknowledge that it is an offence to provide false or misleading information.

I understand that by typing my name below, I am deemed to have signed this document.

Authorised representative:

Date (day/month/year):

Victorian Gambling and Casino Control Commission

