



Office Use Only	
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Amount Paid	

**APPLICATION FOR A PERMIT FOR A CLASS OF GAMING EQUIPMENT**

GAMING AND WAGERING COMMISSION ACT 1987

Section 88

Please print neatly in **BLOCK LETTERS** with a *black* pen only

**Organisation Details**

Full Name of Organisation _____
Full Address of Organisation _____
_____ P/Code _____

Hereby apply for a permit for a **Class** of Gaming Equipment, pursuant to Regulation 18B at:-

**Premises Details**

Full Name of Premises _____
Situated at _____
For a period of _____ (maximum 12 months)
commencing _____

**Permit Holder Details**

Title & full name of permit holder _____
Date of Birth ____/____/____ (A permit holder must be aged 18 years or over)
Full Address _____
_____ P/Code _____
Tel: Daytime _____ After hours _____ Mobile _____
Email: _____

List the gaming equipment (only those types of machines which dispense vouchers) used. If insufficient space please provide the required information on an attached page.


\_\_\_\_\_  
(Signature of person authorised by the applicant)      (Position held)

Permit Holders Signature \_\_\_\_\_ Date \_\_\_\_\_

**FEES**

Application fees are prescribed in Schedule 1 to the *Gaming and Wagering Commission Regulations 1988*. Please refer to the fee schedule for a list of all application fees and charges.

Cheques are to be made payable to the "**Gaming and Wagering Commission**" (cash must not be sent through the mail). The application must be lodged at least **14 days prior to the commencement date**.

## PAYMENT DETAILS

For fees payable please refer to [Fees and Charges](#) on our website.

Entering your credit card details below, you give consent for the appropriate application fee to be deducted from your card.

<b>Card Type:</b> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/>	<b>Copy of Receipt</b> ( <i>email only</i> ): YES <input type="checkbox"/> NO <input type="checkbox"/>
<b>Card Number:</b>	<b>Expiry Date:</b>
<b>Cardholder's Name:</b>	<b>Cardholder's Signature:</b>
<b>Email Address:</b>	

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