



**Jersey Gambling Commission**

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**GAMBLING (JERSEY) LAW 2012**  
**B2B PLATFORM PROVIDER PERMIT**

APPLICATION FOR A B2B PLATFORM PROVIDER PERMIT

**FORM OF APPLICATION**

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Please complete in **BLOCK CAPITALS** and in black ink and then return this completed form to:

**Jersey Gambling Commission, 4<sup>th</sup> Floor, Osprey House, 5-7 Old Street  
St. Helier, Jersey, JE2 3RG**



Name of applicant:

Company registration number:  
*(JFSC Number)*

Date of incorporation:

Address of registered office:

Correspondence address:  
*(if different)*

Full name and position of principal contact:

Address of principal contact:

Telephone number:

Email address:

Other contact:



## Company Details

Type of company:  
(e.g. public/private, limited liability/shared/guarantee)

Trading name(s):

Previous company name(s):

Primary business activity:

List all officers and senior management:

(List all Directors, Company Secretaries and senior management of the applicant. Where applicable, list all entities who exercise influence over the business and/or operational functions of the Applicant – Continue on separate sheets if required)

Full name:

Address:

Position:

Date of birth:

Place of birth:

Nationality:

Country of residence:

Telephone:  
(inc STD)

Office address:

Please complete in **BLOCK CAPITALS** and in black ink



**Company Details** (continued)

List all shareholders with 5% or more of issued capital

Name	Address	Date of Birth	Interest Percentage

**Required Documents**

Memorandum of Association

Articles of Association

Corporate Structure Diagram

Incorporation Certificate(s)

If you cannot provide any of the above mentioned documents, please state the reason why:

Please complete in BLOCK CAPITALS and in black ink



**Corporate Details**

Is the applicant part of a group of companies:  
*(tick as appropriate)*

**YES**

**NO**

Please provide group investors with 5% or more of beneficial capital

Company/ Individual Name	Address	Capital Percentage

Please Provide a List of Ultimate Beneficiaries:

Name	Address	Date of Birth	Place of Birth	Interest Percentage



Corporate Details (continued)

Identify all other controllers/interested parties not mentioned previously:

Does your business or group undertake any form of regulated business in Jersey or elsewhere other than gambling?

YES

NO

If YES, please state the nature of the business and supply the name and address of the pertinent regulatory authority, together with copies of licences and conditions:

Pertinent Regulatory Authority	Address	Licensed Activity	Point of Contact

**Required Documents**

Group Corporate Structure – Please provide a full chart of the company structure, include parent and subsidiary companies, highlight percentage of ownership (if part of a group):

If you cannot provide any of the above mentioned documents, please state the reason why:



**Licensed Jurisdiction Details**

**Licensed Jurisdictions** *(Please list all jurisdictions in where the company/applicant is licensed to conduct remote gambling or gambling related activity)*

Jurisdiction:

Licence Issue Date:

Regulatory Authority Name:

Regulatory Authority Address:

Jurisdiction:

Licence Issue Date:

Regulatory Authority Name:

Regulatory Authority Address:

Jurisdiction:

Licence Issue Date:

Regulatory Authority Name:

Regulatory Authority Address:

Jurisdiction:

Licence Issue Date:

Regulatory Authority Name:

Regulatory Authority Address:



**Financial Details**

**Auditors/Accountants Details**

Company/Individual Name:

Address:

Telephone:  
*(inc STD)*

Fax:  
*(inc STD)*

Email:

If the applicants financial position has changed materially between the date of financial statements supplied and the date of the application, please give details:





**Financial Details**

Provide details of all sources of external finance (including any facilities unused at the time of application):

Loans:	
Amount:	
Nature of the loan:	
Repayment terms:	
Interest payable:	
Loan secured (Yes/No)	<b>YES</b> <input type="checkbox"/> <b>NO</b> <input type="checkbox"/>
Details of loan secured asset(s)	

**Required Documents**

Please provide a copy of auditors engagement letter:

Please provide the last 2 years of audited accounts, capital accounts and audit reports:

If part of a group, please supply group audited accounts and audit reports:

If you cannot provide any of the above mentioned documents, please state the reason why:



**Sufficient Connection Test**

The Commission may only grant a Permit to an applicant that supplies, manages and/or administers a gambling platform in or from within Jersey regardless of whether the physical gambling platform is in Jersey or not [Art. 12(1)(e)]. Please set out how the applicant will meet this requirement:

**Unique resource identifier/unique resource locators**

Please specify all unique resource identifier/unique resource locators (URI/URL) that will use/redirect to applicant's platform if applicable.

**Equipment Location**

The Commission does **NOT** require that all electronic equipment must be sited in Jersey. However, the applicant must fully disclose the scope of its business and provide detail on the location of all electronic equipment used to maintain or administer gambling platforms for gambling businesses.

**Supplying Services**

Provide the legal business name and trading names of each gambling business using the applicant's services. State the basis (sale, hire, profit-share) for the financial contractual arrangements between the applicant and these gambling operator(s).



**Penalties and Civil Actions**

Has the applicant at any time in the previous 10 years had a receiver, administrative receiver or administrator appointed?

**YES**

**NO**

Has the applicant in the last 10 years failed to satisfy a debt adjudged due or a debt in respect of which a decree has been passed against it or entered into a scheme of arrangement or composition of its debts with its creditors?

**YES**

**NO**

Has the applicant at any time in the last 10 years been refused or had withdrawn any licence, recognition or authorisation under the legislation of any country or jurisdiction?

**YES**

**NO**

Has the applicant at any time in the last 10 years ever been refused or had revoked any authorisation to carry on activities in any country or jurisdiction?

**YES**

**NO**

Provide details of the imposition of any conditions on any licence or authorisation of the applicant to carry on business within the last 10 years?

**YES**

**NO**

Has the applicant ever been subject to any disciplinary measure by any regulatory body in any country or jurisdiction in relation to its activities?

**YES**

**NO**

Have the applicant's affairs ever been investigated by any regulatory body in any country or jurisdiction in relation to any of its activities?

**YES**

**NO**

Has the applicant ever been the subject of formal investigation under the legislation of any country or jurisdiction?

**YES**

**NO**

Has the applicant or any of its beneficial owners, directors or senior management been criticised or disciplined in Jersey or elsewhere in the previous 10 years by any regulatory or supervisory organisation or law enforcement or professional body?

**YES**

**NO**

Please provide details of and reasons for any changes in the bankers, auditors or legal advisers to the applicant within the last 3 years.

**YES**

**NO**

**If you answered YES to any of the questions above, please provide a full explanation and enclose copies of all relevant formal documentation.**

Please complete in BLOCK CAPITALS and in black ink

**Further Information**



Further information:

*(please supply information that you consider relevant to assist with the determination of your application)*

Please complete in BLOCK CAPITALS and in black ink

**Further Information**



Further information:

*(please supply information that you consider relevant to assist with the determination of your application)*

A large, empty rectangular box with a red border, intended for providing further information relevant to the application.

Please complete in BLOCK CAPITALS and in black ink

**Further Information**



Further information:

*(please supply information that you consider relevant to assist with the determination of your application)*

A large, empty rectangular box with a red border, intended for providing further information relevant to the application.



## Declaration

I am fully authorised by the applicant to make this application on its behalf (see certified true copy of Minute attached).

I declare that the information contained in this Application is true and accurate to the best of my knowledge, information and belief that, if any of the information contained in or appended is discovered to be false, I may be liable to prosecution.

Signature:

Name (*print*):

Date:

## Data Protection

The Commission requires data regarding applicants (including lead executives and beneficiaries, where necessary) for the purposes set out in the Gambling Commission (Jersey) Law 2010 and the Gambling (Jersey) Law 2012. As a competent authority listed in Schedule 1 of the Data Protection (Jersey) Law 2018, the Commission will primarily collect and process data and special category data necessary for the exercise of its public functions.

The Commission has produced a Privacy Policy for users and an Information Note. These are available on the website at the following link - <https://www.jgc.je/data-protection>. Please read them carefully.



## Notes to Applicants

The original completed application form and any attachments appended should be bound as a single document and, together with certified copy of the same, should be forwarded with the prescribed application fee of £6,000 to:

Jersey Gambling Commission,  
4<sup>th</sup> Floor, Osprey House,  
5-7 Old Street,  
St. Helier,  
Jersey  
JE2 3RG

**NOTE: Please make cheques payable to the JERSEY GAMBLING COMMISSION or by bank transfer to HSBC 402534 – 52474700.**

The principal purpose of seeking the information required by this Application form is to provide core factual details, thereby enabling:

- Preliminary investigations in order to ascertain the full scope of its investigations; and
- Identify where further information will need to be requested and/or required.

Additional information may be sought by way of a meeting with an officer of the Jersey Gambling Commission and/or a visit to the premises for which approval will be sought.

If any details set out on this Application form change prior to the determination of this Application, you must notify the Jersey Gambling Commission in writing as soon as reasonably practicable.

Wherever possibly, use BLOCK CAPITALS.

All dates should be in the form of Day / Month / Year (DD / MM / YYYY).

Answer every question, using N/A or NIL where applicable.

Use additional sheets as necessary, cross-referencing against the relevant question the additional sheet(s) on which the answer is to be found.

If the £6000 application fee required by the Commission has not already been made, it must accompany the submission of this Application form. The Commission WILL NOT begin the application until the application fee has been deposited. The Commission may require a further payment of £6000 to process the application, but will not request this payment unless the application fee has been exhausted.

Application processing will not commence until all initial requested documentation is received.

If you require any assistance or would like to discuss any part of the application form, please contact the Commission on telephone number +44 (01534) 828540.

Please number, date and sign any additional attached pages to the application form.