

**APPLICATION BY SECRETARY OF THE DEPARTMENT OF INTERNAL AFFAIRS
TO SUSPEND OR CANCEL A CASINO LICENCE UNDER s144 OF THE
GAMBLING ACT 2003**

This form is to be used by the Secretary of the Department of Internal Affairs when applying to suspend or cancel a casino licence.

1. Name of casino licence holder:
2. Address of casino licence holder:
3. Contact phone number, facsimile and email address of casino licence holder:
4. Details of casino licence to which the application relates, including whether licence is an operator's or venue licence, and date of issue.
5. Names and contact details of any person who is a party to a casino venue agreement with the casino licence holder:
6. Reasons that the Secretary seeks the suspension/cancellation of the licence.
7. Attach any written submission, evidence, or other information on which the Secretary relies in support of the application.

Date: _____

Signed by or on behalf of the Secretary: _____

Name of Signatory: _____

Designation of Signatory: _____