

**Submission on application by Christchurch Casinos Limited for
Renewal of Casino Venue Licence under section 134 Gambling Act 2003**

You may use the below form to provide your feedback on the application by Christchurch Casinos Limited to renew their Casino Venue Licence for the Christchurch Casino, located at 30 Victoria Street, Christchurch. The full application can be read on the Gambling Commission's website [here](#).

To: The Gambling Commission

From: Bruce Garrett, Managing Director, Brook Serene & Co. Ltd.

Full name of submitter

1. I **support** / ~~oppose~~ / ~~am neutral to~~ the application by Christchurch Casinos Limited to renew their Casino Venue Licence. *(circle one)*
2. The reasons for my **support** / ~~opposition~~ / ~~neutrality~~ to the application are: *(please circle one, and use extra pages if necessary)*

Brook Serene manages The George and Hotel Montreal, both located a short distance from the Christchurch Casino. Many of our guests enjoy using Casino facilities, not only for gambling, but also for currency exchange services, dining and entertainment. Our dealings with the Casino have shown the Casino to be a responsible operator, with a large emphasis on engaging and supporting the local community and tourist economy. In our view, the Casino is a valued local business that would leave a huge whole in the city if they were not allowed to continue to operate. We are aware of the social harm gambling can create, but we believe the Casino has good systems in place to monitor and address this issue. Removal of the Casino would potentially shift issues elsewhere to an environment where they can not be as easily monitored.

3. I ~~would~~ / **would not** like to attend and be heard at the public hearing of the application. *(circle one)*
4. If you **would** like to attend and be heard at the public hearing, please explain below:
- your connection with the Casino;
 - why you are interested in the application; and
 - a brief outline of the information you could provide at the hearing to assist the Gambling Commission in making their decision on the application.

(please use extra pages if necessary)

Bruce Grant

Signature of submitter (a signature is not required if you make your submission by electronic means)

8 August 2018

Date

Email address:

[REDACTED]

Telephone:

[REDACTED]

Postal address:

[REDACTED]

Note to submitter

The closing date for submissions is the **8 August 2018**. The Gambling Commission must receive your submission by the closing date.

You can send your completed submission by email to:

info@gamblingcom.govt.nz

Or, you can send your completed submission by post to:

PO Box 137295, Parnell, Auckland 1052