

Form 5 Personal details schedule/personal probity form



Liquor Act 1992 s. 105, Gaming Machine Act 1991 s. 57 & s. 93 • V6 April 2020

<p>Office use only</p> <p>Person no.</p> <p>Receipt no.</p> <p>Licence no.</p> <p>Amount \$.....</p> <p>Initials</p>	<p>Instructions</p> <p>Please complete in BLOCK letters. Attach extra pages if needed.</p> <p>If you need help completing this form contact the Office of Liquor and Gaming Regulation (OLGR) on 13 QGOV (13 74 68) or www.business.qld.gov.au/liquor-gaming</p>	<p>Warning</p> <p>Failure to honestly and truthfully complete this form will delay the processing of any associated application, may impact on the outcome of the application and may constitute an offence under section 350 of the <i>Gaming Machine Act 1991</i> and section 231 of the <i>Liquor Act 1992</i>. Maximum penalty under the <i>Gaming Machine Act 1991</i> - 400 penalty units or 2 years imprisonment. Maximum penalty under the <i>Liquor Act 1992</i> - 100 penalty units or 6 months imprisonment.</p> <p>Fees</p> <p>To find out the current application fee go to www.business.qld.gov.au/liquor-gaming</p>
<p>Section 1</p> <p>Persons who must complete this form</p>	<p>If you are identified as one of the following you must complete this form. Each individual must complete a separate form. Please tick which applies to you:</p> <p><input type="checkbox"/> Proposed individual licensee</p> <p><input type="checkbox"/> Company director or executive officer</p> <p><input type="checkbox"/> Company shareholder</p> <p><input type="checkbox"/> Beneficiary under trust (over the age of 18)</p> <p><input type="checkbox"/> Member of club management committee or director of club</p> <p><input type="checkbox"/> Director of proposed sub-lessee of premises, director of management company or franchisee</p> <p><input type="checkbox"/> Proposed individual sub-lessee, manager or franchisee</p>	
<p>Section 2</p> <p>Required documents</p>	<p><input type="checkbox"/> Attach a certified photocopy of current photographic identification</p> <p>Acceptable forms of identification include driver's licence/permit, 18+ card or proof of age card, passport, weapon's licence.</p>	
<p>Section 3</p> <p>Applicant/licensee's premises details</p>	<p>Premises name</p> <p>Premises address</p> <p>Locality/suburb State <input type="checkbox"/><input type="checkbox"/><input type="checkbox"/> Postcode <input type="checkbox"/><input type="checkbox"/><input type="checkbox"/><input type="checkbox"/></p> <p>Liquor licence number (if applicable)</p> <p>Gaming machine licence number (if applicable)</p>	
<p>Section 4</p> <p>Personal details</p>	<p>Preferred title <input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss <input type="checkbox"/> Other (please specify)</p> <p>Given names Surname/family name</p> <p>Gender <input type="checkbox"/> Male <input type="checkbox"/> Female</p> <p>Residential address</p> <p>Locality/suburb State <input type="checkbox"/><input type="checkbox"/><input type="checkbox"/> Postcode <input type="checkbox"/><input type="checkbox"/><input type="checkbox"/><input type="checkbox"/></p> <p>Phone (daytime) Mobile.....</p> <p>Email</p> <p>Please state any aliases, legal or otherwise, which you have used or may have been known by, i.e. maiden or previous married name including date of change:</p> <p>.....</p> <p>Date of birth <input type="text"/><input type="text"/> / <input type="text"/><input type="text"/> / <input type="text"/><input type="text"/><input type="text"/><input type="text"/> Place of birth</p>	

Section 5 Liquor licence history	<p>Have you held a liquor licence in Queensland within the last 3 years?</p> <p><input type="checkbox"/> No – go to section 6</p> <p><input type="checkbox"/> Yes – complete premises detail below</p> <p>Premises name</p> <p>Premises address</p> <p>Locality/suburb State <input type="checkbox"/><input type="checkbox"/><input type="checkbox"/> Postcode <input type="checkbox"/><input type="checkbox"/><input type="checkbox"/><input type="checkbox"/></p> <p>Liquor licence number (if known)</p> <p>Type of involvement (e.g. licensee/company director)</p> <p>Discharge/ surrender date/ cancellation date (if applicable) <input type="checkbox"/><input type="checkbox"/> / <input type="checkbox"/><input type="checkbox"/> / <input type="checkbox"/><input type="checkbox"/><input type="checkbox"/><input type="checkbox"/> <small style="margin-left: 100px;">D D M M Y Y Y Y</small></p>																								
Section 6 Residential history	<p>Have you resided overseas for more than 12 months in the last 5 years?</p> <p><input type="checkbox"/> No – go to section 7</p> <p><input type="checkbox"/> Yes – provide details in table below.</p> <p>Note, if you have resided overseas for more than 12 months in the last 5 years, a police clearance from the relevant jurisdiction may be requested.</p> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <thead> <tr style="background-color: #f2f2f2;"> <th style="width: 55%;">Country</th> <th style="width: 20%;">Date from</th> <th style="width: 25%;">Date to</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </tbody> </table>	Country	Date from	Date to																					
Country	Date from	Date to																							
Section 7 Disclosure of criminal history	<p>Have you ever been arrested, summonsed or been issued with a notice to appear for an offence regardless of the disposition/outcome (personally or as a director), in Queensland, interstate or overseas, excluding juvenile offences?</p> <p><input type="checkbox"/> No – go to section 8</p> <p><input type="checkbox"/> Yes – list all cases without exception</p> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <thead> <tr style="background-color: #f2f2f2;"> <th style="width: 35%;">Nature of offence</th> <th style="width: 15%;">Age at time of offence</th> <th style="width: 10%;">State</th> <th style="width: 10%;">Court/ town</th> <th style="width: 15%;">Date of offence</th> <th style="width: 15%;">Result</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table> <p style="margin-top: 10px;">Liquor licence applicants: A criminal history check will be conducted for each person named on the application form who has not held a licence within the last 6 months (e.g. company director). However, criminal history checks are not usually required for applicants applying for, or associated with, a subsidiary on-premises licence with a principal activity of the provision of meals (restaurants) and provision of prepared food (cafes) as well as applicants who are members of management committees for licensed clubs. The Commissioner for Liquor and Gaming reserves the right to seek a criminal history check where appropriate. This may occur if a criminal history is declared, or the licensee proposes to operate beyond midnight.</p> <p>Gaming machine licence applicants: A criminal history check will be conducted for each person named on the application form.</p>	Nature of offence	Age at time of offence	State	Court/ town	Date of offence	Result																		
Nature of offence	Age at time of offence	State	Court/ town	Date of offence	Result																				

<p>Section 8 Bankruptcy</p>	<p>Have you ever been declared bankrupt?</p> <p><input type="checkbox"/> No – go to section 9</p> <p><input type="checkbox"/> Yes – please attach full details surrounding these circumstances including:</p> <ul style="list-style-type: none"> • evidence of date of discharge • list of creditors involved • amount of debt involved • monies paid back.
<p>Section 9 Liquidation or receivership</p>	<p>Have you:</p> <ul style="list-style-type: none"> • ever held shares in or been a director/ executive officer of an externally administered body corporate • ever held shares in or been a director/ executive officer of a body corporate that has entered into liquidation or had receivers and managers appointed • been subject to an investigation by the Australian Securities and Investments Commission (or any similar authority). <p><input type="checkbox"/> No – go to section 10</p> <p><input type="checkbox"/> Yes – please attach full details surrounding these circumstances including:</p> <ul style="list-style-type: none"> • copy of trustee report • list of creditors involved • amount of debt involved • monies paid back.
<p>Section 10 Gaming machine licence</p>	<p>Are you applying for or are you associated with a gaming machine licence?</p> <p><input type="checkbox"/> No – go to section 25</p> <p><input type="checkbox"/> Yes</p>
<p>Section 11 Previous associations</p>	<p>Do you hold or have you previously held or previously been associated with a gambling licence/ authority/approval issued in Queensland or another jurisdiction?</p> <p>For example, a casino employee, casino key employee, gaming employee, gaming nominee, gaming repairer, keno employee, key employee wagering, key lottery employee, key monitoring employee or machine manager.</p> <p><input type="checkbox"/> No – go to section 12</p> <p><input type="checkbox"/> Yes – give details below</p> <p>Capacity held (e.g. director/shareholder)</p> <p>Licence number (if applicable)</p> <p>Licence type</p> <p>Issuing authority.....</p>
<p>Section 12 Civil lawsuits</p>	<p>Have you ever been a party to a civil lawsuit (this includes as a director/plaintiff/defendant, regardless of outcome)?</p> <p><input type="checkbox"/> No – go to section 13</p> <p><input type="checkbox"/> Yes – attach full details</p>
<p>Section 13 Judgements</p>	<p>Have you ever had a judgement returned against you (this includes as a director or personally)?</p> <p><input type="checkbox"/> No – go to section 14</p> <p><input type="checkbox"/> Yes – attach full details</p>

Section 14 Repossessions	Have you ever had an item repossessed (this includes as a director and personally)? <input type="checkbox"/> No – go to section 15 <input type="checkbox"/> Yes – attach full details			
Section 15 Directorships	Have you ever held any directorship within Australia? <input type="checkbox"/> No – go to section 16 <input type="checkbox"/> Yes – provide a historical directorship listing from an agent of the Australian Securities and Investments Commission, no older than 30 days prior to application being lodged.			
Section 16 Foreign directorships	Have you ever held any directorship outside of Australia within the last 5 years? <input type="checkbox"/> No – go to section 17 <input type="checkbox"/> Yes – attach full details			
Section 17 Affiliations	Do you currently hold or have you held in the past 5 years any other shareholdings, financial interests, partnerships or other business interests or affiliations within Australia or elsewhere? <input type="checkbox"/> No – go to section 18 <input type="checkbox"/> Yes – attach full details and complete the table below			
	Company/organisation	Position held/affiliation	ACN/ABN	Country
Section 18 Category 2 (club) licences	Are you applying for/associated with a category 2 (club) gaming machine licence? <input type="checkbox"/> No – go to section 23 <input type="checkbox"/> Yes			
Section 19 Category 2 (club) licence lessor	Are you the lessor of a category 2 (club) licensee’s licensed premises? <input type="checkbox"/> No – go to section 20 <input type="checkbox"/> Yes – attach a copy of the agreement			
Section 20 Category 2 (club) licence creditor	Are you a person who is a creditor of a category 2 (club) licensee? <input type="checkbox"/> No – go to section 21 <input type="checkbox"/> Yes – attach a copy of the agreement			
Section 21 Category 2 (club) operations	Are you a person who: <ul style="list-style-type: none"> • has entered into an agreement or an arrangement with a category 2 (club) licensee about the management of the licensee’s business or operations or <ul style="list-style-type: none"> • is responsible for the day to day management of the operation of a category 2 (club) licensee’s licensed premises? <input type="checkbox"/> No – go to section 22 <input type="checkbox"/> Yes – attach a copy of the agreement			
Section 22 Category 2 (club) association	Are you a person who is an associate, as defined in section 5 of the <i>Gaming Machine Act 1991</i> , of a person mentioned in questions 19, 20, 21? <input type="checkbox"/> No – go to section 25 <input type="checkbox"/> Yes – attach a copy of the agreement			

Section 23 Category 1 (hotel/ tavern) licences	Are you applying for or are you associated with a category 1 (hotel/tavern) gaming machine licence? <input type="checkbox"/> No – go to section 25 <input type="checkbox"/> Yes		
Section 24 Category 1 (hotel/ tavern) licences Assets and liabilities	Please complete the following table. If any assets or liabilities listed below are in joint ownership only state the value that you own, not the full value.		
Liabilities	\$	Assets	\$
Bank accounts		Cash on hand	
		Bank accounts	
Credit cards			
		Real estate	
Mortgage/loans			
		Shares	
Lease liabilities		Business interests	
		Motor vehicles	
Other		Other	
		Total assets	\$
		Total liabilities	\$
Total liabilities	\$	Surplus/(deficiency)	\$
Note that evidence of financial position may be required			

<p>Section 25 Authority for release of information</p>	<p>I, (full name in BLOCK letters)</p> <p>of</p> <p>..... Postcode</p> <p>(residential address)</p> <p>hereby authorise:</p> <ol style="list-style-type: none"> 1. Any person conducting any investigations or enquiries on behalf of the responsible Minister and/ or the Commissioner for Liquor and Gaming under the <i>Liquor Act 1992</i> the <i>Gaming Machine Act 1991 (Acts)</i>, including any OLGR officer (authorised person), to obtain and hold any information and make any investigations or enquiries with state, federal or overseas police authorities or any other relevant agency which relate to me for the purpose of satisfying the requirements of the Acts. 2. Any officer of any police service, law enforcement agency or regulatory body in any jurisdiction, to release to any authorised person any information or official record of any kind in written, electronic or any other form which relates to me and is held by the police service, agency or body, including any information relating to my personal and criminal history (such information to include charges laid against me awaiting determination). 3. I will at all times sufficiently indemnify those officers referred to in 1 and 2 above and the authorised person and keep such officers and the authorised person indemnified against all liability in respect of the supply or disclosure in accordance with the Act or as otherwise required by law, of the information, and against all actions, suits, proceedings, claims, demands, costs and expenses whatsoever which may be taken against such officers and the authorised person or incurred or become payable by such officers or the authorised person in respect thereof. <p>Signature..... Date <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>Witness</p> <p>Witness signature</p> <p>Witness name</p> <p>Witness address</p> <p>Locality/suburb State <input type="text"/> <input type="text"/> <input type="text"/> Postcode <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p>
<p>Section 26 Declaration</p>	<p>I, (full name in BLOCK letters)</p> <p>hereby declare that I:</p> <ul style="list-style-type: none"> • am the person identified in this document • certify that the particulars contained herein and all matters accompanying this form are true and correct in every detail and fully disclose the information required to complete this form • am the person in the certified photographic identification attached. <p>Signature..... Date <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>Witness</p> <p>Witness signature</p> <p>Witness name</p> <p>Witness address</p> <p>Locality/suburb State <input type="text"/> <input type="text"/> <input type="text"/> Postcode <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p>

The Department of Justice and Attorney-General (the department) is collecting the information on this form to assess your application for a liquor and/or gaming machine licence or your suitability to be associated with an applicant or holder of a gaming machine licence in accordance with section 105 of the *Liquor Act 1992* and sections 57 and 93 of the *Gaming Machine Act 1991*. The department may disclose this information to the Queensland Police Service for assisting with criminal history searches. For gaming machine licence applicants/associates, the department may also disclose this information to those relevant agencies listed in Schedule 1 of the *Gaming Machine Regulation 2002*. Your information will not be disclosed to any other parties unless authorised or required by law.

Section 27

Lodgement and payment

Lodging applications

By mail:
Office of Liquor and Gaming Regulation
Locked Bag 180
CITY EAST QLD 4002

In person:
Office of Liquor and Gaming Regulation
Upper Plaza, 33 Charlotte Street
BRISBANE QLD 4000

You may lodge your application (including fee and supporting documentation) by post or in person. Counter hours are 8.30am–4.30pm Monday–Friday (closed on public holidays).

The application fee must be paid at the time of application. There is no GST payable on any fee. Fee amounts are listed under Fees and Charges online at www.business.qld.gov.au/liquor-gaming or phone 13 QGOV (13 74 68). The fee can be paid by cheque, money order or credit card. Cash and eftpos will only be accepted if payment is made in person.

Payment type:

- Money order—make money order payable to Office of Liquor and Gaming Regulation
- Cheque—make cheque payable to Office of Liquor and Gaming Regulation
- Credit card*—charge my:
 - Mastercard
 - VISA

Credit card no.

Cardholder's name

Amount authorised \$ Expiry date / /

Cardholder's signature

*OLGR **will not** accept credit card details by fax or email, including PDF attachments. If an email is received with credit card details, it will be deleted immediately and your form will not be processed. This is in accordance with the Payment Card Industry Data Security Standard.
A receipt will not be issued unless specifically requested