



## NATIONAL LOTTERIES COMMISSION

(Established under the Lotteries Act, 57 of 1997)

### APPLICATION FOR A CERTIFICATE TO MANAGE A SOCIETY LOTTERY IN TERMS OF THE LOTTERIES ACT, 57 OF 1997

**BEFORE COMPLETING THIS FORM PLEASE READ IT CAREFULLY  
AND NOTE PARTICULARLY THE DOCUMENTS REQUIRED BY THE  
COMMISSION. FAILURE TO SUBMIT THE DOCUMENTS IS LIKELY TO  
DELAY THE APPLICATION.**

When completed this form should be sent with the documents listed on page 14 and the appropriate fee to:

**National Lotteries Commission  
333 Grosvenor Street  
Hatfield Gardens, Block D  
Hatfield  
Pretoria  
0083  
[compenforce@nlcsa.org.za](mailto:compenforce@nlcsa.org.za)**

1. Full name of company, firm etc.:

2. Nature of Business

3. Full name, status and telephone number of the person with whom the Commission should communicate about this application:

Name: .....

Status: .....

Telephone No: .....

4. Registration number, Registered office and place of business of the company:

Registration Number: .....  Registered Office: .....  .....
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Postal Address: .....  .....  Place of Business: .....
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5. Date & Place of incorporation:  
(A copy of the Memorandum of Incorporation must accompany this application.)

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6. Nominal capital:  
  
 Par value of shares:  
  
 Issued capital:

R	
R	
R	

7. Does the company hold an interest of 20% or more in any other company or undertaking?

Yes	No
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If 'yes', please give the names of the other companies or undertakings, and the size of the holdings in each case.

Company/undertaking (please give place of Incorporation, type of business and registration number) .....	Holding	%
.....		
.....		
.....		
.....		
Continued on separate sheet	Yes	No

8. Is the applicant a parent company of a group of companies?

Yes	No
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If 'yes', please give details of all subsidiaries (Past and present) of that group, other than those listed in 8.

Company/undertaking (please give place of Incorporation, type of business and registration number) .....	Holding	%		
.....				
.....				
.....				
.....				
Continued on separate sheet				
<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 30px; text-align: center;">Yes</td> <td style="width: 30px; text-align: center;">No</td> </tr> </table>	Yes	No		
Yes	No			

9. Is the applicant's company a wholly or partly owned subsidiary of another company?

Yes	No
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10. Please list names, addresses and shareholdings of shareholders holding 3% **or more** of the issued capital of the applicant, and the **number** of remaining shareholders.

<b>Name</b>	<b>Address and postcode</b>	<b>Shareholding</b>

Number of remaining shareholders

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11. Please give names and addresses of any lenders, mortgagees, or others providing finance, and the terms under which they have undertaken to supply funds in respect of this application.

Name and Address	Account No./ Reference No.	Type of Facility	Security, repayment and other terms

12. Has the applicant's company or any other company named in this application, or any officer of such company ever been convicted of
- |     |    |
|-----|----|
| Yes | No |
|-----|----|

an offence (*other than traffic offences*)?

If 'yes', please give details i.e. court at which convicted, date of conviction, offence and penalty.

COURT AND DATE

OFFENCE AND PENALTY

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13. Is there any reason to believe that a prosecution against the applicant company or any of the named companies or officers may be pending?
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|-----|----|
| Yes | No |
|-----|----|

If 'yes', please give details

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14. Has the company at any time previously applied to the Commission for certification?
- |     |    |
|-----|----|
| Yes | No |
|-----|----|

If 'yes' please give reference no.

<b>LOT</b>	
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15. Has the company ever been subject of a winding?

Petition

Yes	No
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If 'yes' please give details.

Date	Court	Petitioner	Outcome

16. Please give the name and address of the company's auditors:

Name: .....  Contact Person: .....  Physical Address: ..... ..... Postcode: .....  Telephone no: .....
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17. Please list all bank accounts, including foreign accounts, held by the company at any time during the last five years.

Bank	Account No.	Branch Code	Address	Contact Name

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18. Please list full names and addresses and dates of birth of all directors and the company secretary (please indicate who is company secretary).

Name	Identity Number	Date of birth (DDMMYYYY)	Address and postcode

Is the company secretary also a director?

Yes	No
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19. Has the applicant company or partnership ever been, or is it currently being, investigated by any statutory or Government body in the Republic of South Africa, in respect of any application or enquiry?

Yes	No
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If 'yes' please give details below:

Statutory Body / Department

Address and Postcode

Date:

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Ref. No:

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20. Will the business of managing lotteries be the only business carried on by the applicant? 

Yes	No
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21. Please give the following details of financial requirements:

An estimate of the capital expenditure required:

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Working capital for the first 12 months:

R
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Fee payable to the Commission:

R

Other requirements *(if applicable, state what R these are)*

**TOTAL R**

22. Please give details of resources available to meet requirements:

a. from applicant's own resources:

Nature of resources	Name, address and postcode of holder	A/C reference	Amount

- b. from other resources: (If a **company**, state place of incorporation; if an **individual**, state date of birth and identity number.)

<b>Name, address and postcode of proposed source</b>	<b>Rate of interest</b>	<b>Security, repayment and other terms</b>	<b>Amount</b>

Please submit documentary evidence (e.g. letters from a bank) to support the details given at 22a. and b.

23. What are the proposed collection and banking arrangements for the proceeds from the lotteries?



24. Describe how the proceeds from each separate lottery will be identifiable and accounted for entirely separately at all times.

25. What protection will there be for the proceeds ultimately due to client societies and prize winners in the event of the financial collapse of the business?

26. Describe the basis on which the business will be paid for its services by client societies (e.g. fixed percentage of proceeds, fixed fee per lottery etc.)

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27. From what source will tickets be obtained?

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28. What type of lotteries do you propose to manage (e.g. Counterfoil draw, instant etc.)?

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29. Have arrangements already been made to manage Lotteries on behalf of particular societies?

Yes	No
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If 'yes', please give details (continue on separate sheet, if necessary)

<b>Name of society</b>	<b>Address</b>

30. Please give the name of the persons who will be responsible for the management of the applicant business

<b>Name</b>	<b>Details of responsibility</b>

31. Please give details of any experience the applicant (or anyone directly associated with the application) has in managing lotteries.

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32. Has any person named in this application been associated in any way with any other application to the Commission?

Yes	No
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If 'yes', please state the name of the person concerned; give details of any such application; and quote the Commission's reference number.

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33. Please give the name and address of the accountants and attorneys, if applicable, acting for the applicant.

Attorneys' name:	Address and postcode:  Telephone: Email:
Accountants' name	Address and postcode:  Telephone: Email:

**Further Information and declaration**

34. If there is any further information that you wish the Commission to take into account when considering your application for a certificate, please give it below.

35. The Commission shall not grant a certificate as a lottery manager in terms of Section 47(4) of the Lotteries Act 1997 if it is not satisfied that the applicant is a fit and proper person to manage a lottery. It may also refuse an application if, among other things, it appears that any person who would be likely to manage any part of the business, or benefit from it, is not a fit and proper person. In the discharge of this duty, the Commission will seek information from the police about the applicant and other persons associated with the application, including any convictions they may have had. This does not absolve those concerned in the application from the duty of declaring any such convictions in full on this form or on their personal declaration forms.
36. Applicants are warned that the discovery of any material falsification or omission of information required may result in the Commission's refusal to grant a certificate, or

revocation of a certificate if one has been issued. Pending a decision by the Commission, all changes affecting any of the information given in this application must be notified to the Commission without delay.

37. The following declaration must be signed in all cases:

a. if the applicant is a company, by both the secretary and a director (who is not also the secretary) of the company.

I/We certify to the best of my/our knowledge and belief that the information given in this application is complete and correct.

Signed: .....
Full names: .....
Designation: .....
Date: .....

Signed: .....
Full names: .....
Date: .....
Date: .....

<b>OFFICE USE ONLY</b>	
<b>Application Fee: R.....</b>	<b>Receipt No.: .....</b>
<b>Certification Number Issued: .....</b>	<b>Signature: .....</b>

**HAVE YOU ENCLOSED ALL NECESSARY DOCUMENTS?  
(SEE FOLLOWING NOTES)**

**DOCUMENTS TO BE SUBMITTED WITH APPLICATION**

- i) If the applicant is a company, the Memorandum of Incorporation (MOI)
- ii) Annual Financial Statements recent three years, if in existence for more than three years
- iii) Recent Annual Financial Statements and interim accounts if less than three years but more than a year in existence.
- iv) Interim accounts and or six months' bank statements if it is less than a year.
- v) Detailed projections, including a profit and loss account, balance sheet and cash flow for the next 12 months if available.
- vi) A bank confirmation letter
- vii) A statement of the manner in which the applicant will obtain or provide sufficient funds to operate for the next 12 months. Documentary evidence (e.g. bank letters) should be provided to support any information given about available resources.
- viii) Details of who will be responsible for preparing the accounting records and for managing funds, together with their qualifications and experience.
- ix) A brief description of the accounting records to be used, indicating whether manual or computerised. If computerised, a note of the software package should be provided.
- x) Any available note of the proposed systems and internal controls.

(It is recognised that those with smaller businesses may not necessarily always be in a position to provide all the information and evidence referred to above. If an applicant has difficulties in this respect, he should explain this to the Commission in determining his application. The Commission will then advise him whether this is acceptable.

- xi) Personal declaration forms (SL02(a)/14) must be completed by:
  - a) All directors, the company secretary and all shareholders and others with a financial interest of 3 per cent or more in the proposed business;
  - b) Person appointed to manage the lottery; and
  - c) Any other person from whom the Commission requires such a declaration.
- xii) A certified copy of the identity document and two copies of a recent photograph (passport size) in relation to each person completing a personal declaration form (SL02(a)/14).