

Gaming machine technician's licence

Before you complete this form

What this form is for

A gaming machine technician's licence is required for any individual who wants to service, repair or maintain approved gaming machines.

A licensed gaming machine technician is required to display (ie, wear in a clearly visible manner) the approved technician ID while servicing, repairing or maintaining approved gaming machines in a club or hotel.

Cost

- The fee for this application is available in the [gaming machine licence and application fee schedule](#).
- No GST applies.

Pre-lodgement checklist

Please ensure you have filled out the relevant sections.
If information is missing, processing this application will be delayed and the application may be returned.

- ☐ I have answered all questions in Parts 1 to 7, including authorised witness details.
- ☐ I have ensured that the declaration in Part 8 has been read and signed.
- ☐ I have attached all documents required (see below).

Attachments

- ☐ The National Police Certificate (NPC) in the name of the applicant, issued by an Australian Police agency or ACIC-accredited organisation within the three months from the application lodgement date.
- ☐ Three forms of identification (one of which must be photo identification).
- ☐ ONE original passport photo must be provided which has been certified on the back of the photo by an Authorised Witness (e.g. Justice of the Peace).

How to lodge this form

- ✉ Liquor & Gaming NSW
Att: Licensing - Gaming Applications
GPO Box 7060
Sydney NSW 2001

Need more information?

- 📄 liquorandgaming.nsw.gov.au
- @ [Contact us online](#)
- 📞 1300 024 720

Your privacy

We will handle your personal information in accordance with the *Privacy and Personal Information Protection Act 1998*. It is being collected by Liquor & Gaming NSW and will be used for the purpose of processing your application and may be disclosed to other Government agencies for this purpose. Providing this information is voluntary, but where relevant information is not provided this may lead to your application being refused, delayed or not further considered. You have the right to request access to, and correct details of, your personal information held by us. You can access further information on privacy at liquorandgaming.nsw.gov.au

Examples of an Authorised Witness

This list is in accordance with the Statutory Declarations Regulations 1993 and is not exhaustive.

1. A person who is currently licensed or registered under a law of a State or Territory to practise in one of the following occupations:

- Chiropractor
- Dentist
- Legal practitioner
- Medical practitioner
- Nurse
- Optometrist
- Pharmacist
- Physiotherapist
- Psychologist
- Veterinary surgeon

2. A person who is enrolled on the Roll of the Supreme Court of a State or Territory, or the High Court of Australia, as a legal practitioner (however described); or

3. A person who is in the following list:

- Agent of the Australian Postal Corporation who is in charge of an office supplying postal services to the public
- Bank officer with 5 or more continuous years of service
- Building society officer with 5 or more years of continuous service
- Clerk of a court
- Credit union officer with 5 or more years of continuous service
- Fellow of the National Tax Accountants' Association
- Finance company officer with 5 or more years of continuous service
- Judge of a court
- Justice of the Peace
- Magistrate
- Marriage celebrant registered under Subdivision C of Division 1 of Part IV of the **Marriage Act 1961**
- Member of Chartered Secretaries Australia
- Member of Engineers Australia, other than at the grade of student
- Member of the Association of Taxation and Management Accountants
- Member of the Institute of Chartered Accountants in Australia, the Australian Society of Certified Practising Accountants or the National Institute of Accountants

- Minister of religion registered under Subdivision A of Division 1 of Part IV of the *Marriage Act 1961*
- Notary public
- Permanent employee of the Australian Postal Corporation with 5 or more years of continuous service who is employed in an office supplying postal services to the public
- Permanent employee of:
 - i. the Commonwealth or a Commonwealth authority; or
 - ii. a State or Territory or a State or Territory authority; or
 - iii. a local government authority; with 5 or more years of continuous service who is not specified in another item in this list
- Person before whom a statutory declaration may be made under the law of the State or Territory in which the declaration is made
- Police officer
- Registrar, or Deputy Registrar, of a court
- Sheriff
- Teacher employed on a full-time basis at a school or tertiary education institution.

Explanation of terms

Term	Definition
Applicant	The person qualified to make this application. The applicant may nominate a legal or other representative to be their contact person regarding this application.
Authorised witness	You can find information regarding who qualifies as an authorised witness on the previous page
Employer	The person or organization with whom you will have a contract of services or contract for services upon grant of the licence
Person	A natural person
Supervisor	The person who shall provide you with training and instruction

Requirement of the **Gaming Machine Act 2001**

Sec 101(5) The Authority must not grant a gaming-related licence unless they are satisfied that the applicant is a fit and proper person to carry on the business or activity to which the licence relates.

continue overleaf

Gaming machine technician's licence

OFFICE USE ONLY

GRL100

By	<input type="checkbox"/> Mail
Date lodged	<input type="text" value="DD / MM / YYYY"/>
Amount paid	\$ <input type="text"/>
GLS receipt no.	<input type="text"/>
Application number	<input type="text"/>
Finalised by	<input type="text"/>
Date finalised	<input type="text" value="DD / MM / YYYY"/>
Licence number	<input type="text"/>

Daytime phone

Driver licence no.

State

Residential street address

Suburb/town/city

State

Postcode

Country if not Australia

☐ Postal address as above

We will use this mailing address when we contact this person about the licence.

Postal address

GPO/PO box or street address

Suburb/town/city

State

Postcode

Country if not Australia

Part 1 About the applicant

☐ Mr ☐ Ms ☐ Mrs ☐ Miss ☐ Other

Given name

Middle name

Family name

Gender

Date of birth

City/town and country of birth

Email

Secondary email

Mobile

continue overleaf

Part 2 Gaming industry experience

Complete the below table if you have ever been engaged (whether under a contract for services or a contract of employment and other than in their current provisional position) in any gaming industry in any jurisdiction.

Employer	Employer location	Start Date	End Date	Last Position	Licence No.
		DD / MM / YYYY	DD / MM / YYYY		
		DD / MM / YYYY	DD / MM / YYYY		
		DD / MM / YYYY	DD / MM / YYYY		
		DD / MM / YYYY	DD / MM / YYYY		
		DD / MM / YYYY	DD / MM / YYYY		
		DD / MM / YYYY	DD / MM / YYYY		

Demonstrate that you have the necessary capabilities and experience in maintaining, repairing and servicing approved gaming machines; or provide details of training you have received or are intending to receive if your application is successful:

If you do not have the necessary capabilities or experience, provide a letter from your proposed employer that confirms training will be provided for 12 months.

Note If you answer Yes to any of the below questions you must provide further information and/or documentation.

Licence (including concession, approval, authorisation and/or registration) status history

Has any gaming industry licence, casino industry licence, liquor industry licence, concession, approval, authorisation or registration you have held (in any capacity, including as office holder for a company) been suspended, disqualified, cancelled, amended, revoked or been the subject of any disciplinary action?

Yes ☐

No ☐

Withdrawn or refused gaming industry applications

Has any gaming industry application you have submitted ever been withdrawn or refused?

Yes ☐

No ☐

Other matters that the applicant wishes to disclose

Are there any other matters you wish to disclose in relation to this application which have not otherwise been covered by questions above?

No ☐

Yes ☐

Note Failure to declare can result in an unfavourable probity assessment.

continue overleaf

Part 3 Employment details

Employment type:

☐ Employee ☐ Self-employed ☐ Sub-contracted

Employer gaming related licence no.

GM

Employment commencement date

DD / MM / YYYY

Employer name

ABN

ACN

Business street address

Suburb/town/city

State Postcode

Employer contact person

Employer phone number

Employer email address

Supervisor gaming related licence no.

GM

Supervisor name

Part 4 Work premises address (Technician's place of business)

Is your work premises at the same business street address as that of your employer that is given in Part 3?

Yes ☐

No ☐ Supply details below

Business street address

Suburb/town/city

State

Postcode

Part 5 Other Interested parties on grant of licence

If you propose to carry on a business (as opposed to being an employee), is any other person entitled to receive:

- a) any income derived from the business, or any other financial benefit or financial advantage from the carrying on of the business (whether the entitlement arises at law or in equity or otherwise); or
 - b) any rent, profit or other income in connection with the use or occupation of premises on which the business is to be carried on?
- If the interested party is an individual (ie. a person), Complete all questions in Part 5A only.
 - If the interested party is an organisation (e.g. a company), Complete all questions in Part 5B only.
 - If the interested party is an individual and an organisation, Complete all questions in Parts 5A and 5B.

If insufficient space in this form for multiple interested parties, attach a separate sheet answering all questions for each interested party

5A Interested party (if an individual)

☐ Mr ☐ Ms ☐ Mrs ☐ Miss ☐ Other

Given name

Middle name

continue overleaf

Family name

Gender

Date of birth

City or town of birth

Email

Mobile

Home phone

Daytime phone

Driver licence no.

State

Residential street address

Suburb/town/city

State

Postcode

Country if not Australia

☐ Postal address as above

We will use this mailing address when we contact this person about the licence.

Postal address

GPO/PO box or street address

Suburb/town/city

State

Postcode

Country if not Australia

5B Interested party (if an organisation)

Name of organisation

ABN

ACN

Daytime phone

Email

Website

Business street address

Suburb/town/city

State

Postcode

Country if not Australia

☐ Postal address as above

Postal address

GPO/PO box or street address

Suburb/town/city

State

Postcode

Country If not Australia

continue overleaf

Part 6 Other information we need

Attach

☐ a National Police Certificate for the applicant

The National Police Certificate in the name of the applicant shall be issued by an Australian Police agency or an ACIC-accredited organisation*, within the three months from the application lodgement date.

To obtain a National Police Certificate in NSW, visit and apply for it from your local police station. You may also request it online from www.police.nsw.gov.au or an ACIC-accredited organisation*.

*ACIC stands for Australian Criminal Intelligence Commission.

☐ a colour copy of the 3 identity documents** presented when applying for the National Police Certificate

**One of the identity documents must be photo identification.

Part 7 Identification card information

Applicant name

Applicant signature

Please sign within the borders of the below box

Attach certified original passport photo here

Back of original photo should state:

'I (witness name) declare that this is a true photograph of (applicant name)'

Authorised witness signature and date

NOTE: Please ensure your photos are included within your application by the following options:

Option 1. Affix your certified original photo with small amount of double sided tape, or

Option 2. Place your certified original photo with witness declaration and signature in an enclosed envelope and ensure this is included with your application.

Authorised witness name

Authorised witness occupation

Authorised witness contact phone

Authorised witness signature please sign within the borders of the below box

Date

DD / MM / YYYY

OFFICE USE ONLY

Applicant name

Technicians licence number

GM

Technicians licence number

New expiry date

Note: card number and ID expiry are to be assigned by Liquor & Gaming NSW.

DD / MM / YYYY

continue overleaf

Part 8 Declaration by proposed licensee

- I declare that I am 18 years or older and I am authorised to lodge this application.
- I declare that the contents of this application including the attachments are true, correct and complete and that I have made all reasonable inquiries to obtain the information required to complete this application.
- I undertake to notify as soon as possible Liquor & Gaming NSW (L&GNSW) of any change to the information in this application if the information changes before the application is determined.
- I declare that I am not suspended or disqualified from holding a gaming licence.
- I acknowledge that under the *Gaming and Liquor Administration Act 2007* and the *Crimes Act 1900* it is an offence to provide false, misleading or incomplete information in this application.
- I acknowledge that failure to provide all required information will result in the application being rejected.
- I understand that specific details I have supplied in this application may be 'personal information' under the *Privacy and Personal Information Protection Act 1998*. Personal information is any information or opinion that identifies an individual, or enables someone to identify an individual. I acknowledge that L&GNSW is collecting information on behalf of Independent Liquor & Gaming Authority to enable processing of the application.
- I also understand that L&GNSW will use this information for its intended purpose only, store the information securely, and allow the applicant or licensee to access and update the information. When processing this application, L&GNSW may disclose information to other Government agencies.

Name of applicant

Signature

Date

Part 9 Payment for this application

The fee for this application is available in the [gaming machine licence and application fee schedule](#). Fill in the fee below.

Payment amount \$

Pay by credit card or PayPal® using the following link: liquorandgaming.nsw.gov.au/applicationpayments

- **Step 1**
Click on the link or type the URL into your web browser
- **Step 2**
Follow the instructions online to complete the payment
- **Step 3**
When the lodgement fee is paid online you will receive a receipt number. Please record the receipt number below before lodging the application. Not providing this information may result in delays in processing your application.

Receipt number: