

SCHEDULE 1

Regulation 5

APPLICATION TO PUBLISH OR USE VICTORIAN RACE FIELDS

I apply for approval to publish and use the following race fields information:

 Victorian horse racing race fields
DETAILS OF APPLICANT

Name of Applicant:	
Address of Applicant:	
Applicant's contact details:	Mailing Address: Phone: Email:
State, Territory or Country where Applicant is licensed to operate:	
Trading names used by Applicant:	
Applicant's ACN or ABN:	

ADDITIONAL INFORMATION – *in accordance with section 2.5.19C(2)(c) of the Gambling Regulation Act 2003 (Vic)*
Integrity Management

- Please confirm that you operate as a licensed on-course bookmaker under the supervision of Stewards in your home jurisdiction;
YES **NO** If no, please attach further details
- Please confirm that RVL Stewards will have or, as appropriate, will continue to have access to all details of betting transactions conducted and recorded by you on Victorian thoroughbred racing during the approval period, through the Stewards in your home jurisdiction for the purpose of detecting and investigating breaches of the Rules of Racing.
YES **NO** If no, please attach further details

Fees Payable

- Do you expect your turnover on Victorian thoroughbred racing to be less than \$5.0m per annum?
YES **NO**
- Do you agree to meet the conditions of approval as per the attached Race Fields Policies including payment of the economic contribution fee?
YES **NO** If no, please attach further details

CERTIFICATION

Icertify that I am authorised to make the application on behalf
of(or self) and that the information provided is true and correct.

Signature of authorised representative (or self)

Name of authorised representative (or self)

DATE: / /

Please complete, sign and return this form to Racing Victoria.

Post: Race Fields Administration, Racing Victoria Ltd, 400 Epsom Rd, Flemington, VIC, 3031

 Email: racefields@racingvictoria.net.au