Change of Particulars

For use by authorised interstate betting operators who have notified under the *Authorised Betting Operations Act 2000*

When to use this form

This form should be used by authorised interstate betting operators when updating either their:

- address for service
- email address
- telephone number
- street address
- postal address.

Contact details

ABN:

Contact person for this application

Section 40A of the *Authorised Betting Operations Act 2000* (the Act) requires that an authorised interstate betting operator notify the Liquor and Gambling Commissioner (the Commissioner) within 14 days of the change of any of the aforementioned details.

Title:	Position:
Given name:	Mobile number:
Family name:	Email:
Postal address	
Street address:	State:
Suburb:	
Interstate operator	
Trading name:	Registration number:

Details being updated

Only complete the sections relevant to the details that have changed

Add	ress for service	
Stree	et address:	State:
Subu	rb:	
Ema	ail address	
Emai	l:	
Tele	ephone number	
Telep	phone number:	
Stre	et address	
Stree	et address:	State:
Subu	rb:	
Post	tal address	
Posta	al address:	State:
Subu	rb:	
Dec	laration	
l,		declare that:
•	I am authorised to make this application	
•	all the information provided in this application is true and correct	
•	I consent to the details of this notification being published on the Commissioner's website (where appropriate).	
	I make the above declarations	