NOTICE OF APPLICATION FOR A PROVISIONAL STATEMENT UNDER THE GAMBLING ACT 2005

Notice is hereby given that

Global Gaming Ventures (RP) Limited

of the following address:

11 John Princes Street London

Postcode W1G 0JR

Is applying for a provisional statement under section 204 of the Gambling Act 2005. The application relates to the following type of premises:

Large Casino

The application relates to the following premises:

To be located on existing and reclaimed land situated to the south of Town Quay and to the east of Mayflower Park and known as the Royal Pier Waterfront, Southampton SO14 2AQ



The application for a premises licence has been made to the following licensing authority:

Southampton City Council PO Box 1767 Southampton

Postcode SO18 9LA

Website: www.southampton.gov.uk

Information about the application is available from the licensing authority, including the arrangements for viewing the details of the application.

The following person connected with the applicant is able to give further information about the application:

Bond Dickinson LLP 3 Temple Quay Temple Back East Bristol BS1 6DZ

ewen.macgregor@bonddickinson.com or Direct Dial: 0845 415 6647

Any representations under section 161 of the Gambling Act 2005 must be made no later than the following date:

29 July 2014

Application for a provisional statement under the Gambling Act 2005

PLEASE READ THE FOLLOWING INSTRUCTIONS FIRST

If you are completing this form by hand, please write legibly in block capitals using ink. Use additional

the completed form for your records.					
Where the application is in respect of a vessel, the application should be made on the relevant form for that type of premises or application.					
Part 1 Type of promises license applied	for				
Part 1 – Type of premises licence applied Regional Casino ☐ Large Ca Bingo ☐ Adult Gar Betting (Track) ☐ Betting (C	sino ⊠ ming Centre □	Small Casino Family Entertainment Centre			
Part 2 – Applicant Details If you are an individual, please fill in Section A. If the application is being made on behalf of an organisation (such as a company or partnership), please fill in Section B.					
Section A Individual applicant					
1. Title: Mr Mrs Miss Ms Dr C	Other (please specify)				
2. Surname: Other name(s): [Use the names given in the applicant's operating licence or, if the applicant does not hold an operating licence, as given in any application for an operating licence]					
3. Applicant's address (home or business – [delete as appropriate]):					
Postcode: 4(a) The number of the applicant's operating	licence (as set out in	the operating licence):			
4(b) If the applicant does not hold an operating licence but is in the process of applying for one, give the date on which the application was made:					
5. Tick the box if the application is being made by more than one person. [Where there are further applicants, the information required in questions 1 to 4 should be included on additional sheets attached to this form, and those sheets should be clearly marked "Details of further applicants".]					
Section B Application on behalf of an organisation					
6. Name of applicant business or organisation: Global Gaming Ventures (RP) Limited [Use the names given in the applicant's operating licence or, if the applicant does not hold an operating licence, as given in any application for an operating licence.]					

7. The applicant's registered or principal address:			
11 John Princes Street London			
Postcode: W1G 0JR			
8(a) The number of the applicant's operating licence (as given in the operating licence):			
8(b) If the applicant does not hold an operating licence but is in the process of applying for one, give the date on which the application was made:			
9. Tick the box if the application is being made by more than one organisation.			
[Where there are further applicants, the information required in questions 6 to 8 should be included on additional sheets attached to this form, and those sheets should be clearly marked "Details of further applicants".]			
Part 3 – Premises Details			
10. Proposed trading name to be used at the premises (if known): Mayflower Casino, Royal Pier			
11. Address of the premises (or, if none, give a description of the premises and their location):			
To be located on existing and reclaimed land situated to the south of Town Quay and to the east of Mayflower Park and known as the Royal Pier Waterfront, Southampton			
Postcode: SO14 2AQ			
12. Telephone number at premises (if known):			
13. If the premises are in only a part of a building, please describe the nature of the building (for example, a shopping centre or office block). The description should include the number of floors within the building and the floor(s) on which the premises are located.			
An as yet unbuilt multi storey mixed use premise with the proposed casino being located at the ground floor			
14(a) Are the premises situated in more than one licensing authority area?			
No			

14(b). If the answer to question 14(a) is yes, please give the names of all the licensing authorities within whose area the premises are partly located, other than the licensing authority to which this application is made:					

Part 4 – Times of operation

15(a). Do you want the licensing authority to exclude a default condition so that the premises may be used for longer periods than would otherwise be the case? Yes

15(b). If the answer to question 15(a) is yes, please complete the table below to indicate the times when you want the premises to be available for use under the premises licence.

	Start	Finish	Details of any seasonal variation
Mon	0000	2359	
Tue	0000	2359	
Wed	0000	2359	
Thurs	0000	2359	
Fri	0000	2359	
Sat	0000	2359	
Sun	0000	2359	

16. If you wish to apply for a premises licence with a condition restricting gambling to specific periods in a year, please state the periods below using calendar dates:

Part 5 – Miscellaneous				
17(a) Does the application relate to premises or proposed premises which are part of a track or other				
sporting venue which already has a premises licence? Yes/No				
17(b) If the answer to question 17(a) is yes, please confirm by ticking the box that an application to vary				
the main track premises licence has been submitted with this application.				
18(a). Do you hold any other premises licences that have been issued by this licensing authority? No				
18(b) If the answer to question 18(a) is yes, please provide full details:				
19. Please set out any other matters which you consider to be relevant to your application:				

Part 6 – Declarations and Checklist (Please tick)	
I/ We confirm that, to the best of my/ our knowledge, the information contained in this application is true. I/ We understand that it is an offence under section 342 of the Gambling Act 2005 to give information which is false or misleading in, or in relation to, this application.	\boxtimes
I/ We confirm that the applicant(s) have the right to occupy the premises.	\boxtimes
Checklist:	_
 Payment of the appropriate fee has been made/is enclosed 	\boxtimes
 A plan of the premises or proposed premises is enclosed 	\boxtimes
 I/ we understand that if the above requirements are not complied with the application may be rejected 	
 I/ we understand that it is now necessary to advertise the application and give the appropriate notice to the responsible authorities 	\boxtimes

Part 7 – Signatures						
20. Signature of applicant or applicant's solicitor or other duly authorised agent. If signing on behalf of the applicant, please state in what capacity: Signature:						
BOND DICKINSON LLP						
30 June 2014	Capacity:	Solicitor and authorised agent on behalf of the applicant				
21. For joint applications, signature of 2nd applicant, or 2nd applicant's solicitor or other authorised agent. If signing on behalf of the applicant, please state in what capacity: Signature:						
(dd/mm/yyyy)	Capacity:					
[Where there are more than two applicants, please use an additional sheet clearly marked "Signature(s) of further applicant(s)". The sheet should include all the information requested in paragraphs 20 and 21.] [Where the application is to be submitted in an electronic form, the signature should be generated electronically and should be a copy of the person's written signature.]						
	BOND DICKINSON LLP 30 June 2014 Deplications, signature of 2nd applications, signature of 2nd applicant, plays on behalf of the applicant, plays of the applicant, plays of the should incomplication is to be submitted in a	BOND DICKINSON LLP 30 June 2014 Capacity: poplications, signature of 2nd applicant, or 2nd applications on behalf of the applicant, please state in what capacity: (dd/mm/yyyy) Capacity: (dd/mm/yyyy) Capacity: are more than two applicants, please use an addition icant(s)". The sheet should include all the informatical plication is to be submitted in an electronic form, the				

Part 8 - Contact Details

22(a) Please give the name of a person who can be contacted about the application:

Ewen Macgregor

22(b) Please give one or more telephone numbers at which the person identified in question 23(a) can be contacted: 0845 415 6647

23. Postal address for correspondence associated with this application:

Bond Dickinson LLP 3 Temple Quay Temple Back East Bristol

Postcode:BS1 6DZ

24. If you are happy for correspondence in relation to your application to be sent via e-mail, please give the e-mail address to which you would like correspondence to be sent: ewen.macgregor@bonddickinson.com