

Abridged Personal History Disclosure Form

This document contains the questions (and sub questions) that are in the electronic Abridged Personal History Disclosure Form (“APHDF”) and is meant as a supplementary document to help applicants prepare and obtain the relevant documents prior to filling up the electronic form via the applicant’s portal. It should not be used to replace the electronic APHDF and will not be accepted as part of the application package.

1. Personal Data

Subsection	Question
1A	Name
	Gender
1B	Citizenship
	Singapore NRIC/FIN
	Please declare if you are currently holding a Citizenship / Permanent Residence of another country: • Citizenship • Country • Country Identification Number
	Have you ever been issued with a passport? If yes, please describe. • Passport Number • Name on Passport • Country of Issue • Place of Issue • Date of Issue (DD-MM-YYYY) • Expiry Date
1C	Date of Birth (DD-MM-YYYY)
	Country of Birth
1D	Residential Address

	• Address Type • Blk / House # • Street • Floor • Unit • Building • Zip / Postal Code • Country
1E	Mailing Address Same as Residential Address (to tick) • Address Type • Blk / House # • Street • Floor • Unit • Building • Zip / Postal Code • Country
1F	Home Telephone • Country Code • Area Code • Number
	Mobile Number • Country Code • Area Code • Number
	Office Number • Country Code • Area Code

	• Number • Extension
	Email Address • Personal Email • Work Email
	I understand that the aforementioned email address will be used for electronic service and that it is my responsibility to update the Authority with any changes in the electronic service address.
1G	Race
1H	Have you been known by any other name or names (including maiden name, aliases, nicknames, other name changes, legal or otherwise)? If yes, please describe. • Other Name • Date from • Date to
1I	Do you have any scars, tattoos or other distinguishing marks and/or characteristics? If yes, please describe. • Scars/Marks/Tattoos, Characteristic • Tattoo Pattern • Location • Description

2. Residence Data

Subsection	Question
2A	Provide details of your residences, including residences while attending college or while in military service where you have resided for: (i) a continuous period of at least 6 months, for the past 10 years or (ii) since the age of 18, whichever is lesser. Provide the details in chronological order, beginning with your current residence. Residential details • Address Type • Blk / House# • Street • Floor • Unit • Building • ZIP/Postal Code • Country • State • Date From (MM-YYYY) • Date To (MM-YYYY) • Own/Rent/Parents/Others • If Others • Current Staying (to tick)

3. Family / Social Data

Subsection	Question
3A	What is your current marital status? Details of current marriage (for Married/Separated) • Date of Marriage • Country of Marriage • Details of Spouse ○ Name ○ Singapore NRIC/FIN ○ Country Identification Number ○ Citizenship ○ Date of Birth ○ Country of Birth • Home Address ○ Address Type ○ Blk / House # ○ Street ○ Floor ○ Unit ○ Building ○ ZIP / Postal Code ○ Country ○ Occupation

4. Employment and Licensing Data

Subsection	Question
4A	Provide details of your employment (including any unemployment period, part-time and full-time employment) for the past 10 years or since the age of 18, whichever is lesser. Provide the details in chronological order, beginning with the most recent employment. Please indicate "gambling related" for any casino or gambling related employment. • Employment Date From (MM-YYYY) • Employment Date To (MM-YYYY) • Present (to tick) • Name of Employer • Country of Employer • Title/Position Held • Description of Duties • Is this a gambling related company? • Is this an International Marketing Agent related company?
4B	i. Have you been discharged, suspended or asked to resign from employment? If yes, please describe • Date of Discharge / Suspension / Resignation / Disciplinary Action • Name of Employer • Country of Employer • Reason for Discharge / Suspension / Resignation / Disciplinary Action
	ii. Have you ever been charged with any infraction in relation to any employment which was the subject of any disciplinary action? If yes, please describe. • Date of Discharge / Suspension / Resignation / Disciplinary Action • Name of Employer • Country of Employer

	Reason for Discharge / Suspension / Resignation / Disciplinary Action
4C	Have any of the licences, permits or certifications you have applied for or held, as identified in the previous question, been denied, suspended, revoked or subject to any conditions in any jurisdiction? If yes, please describe. - Type of Licence / Permit / Certificate - Name of Approving Organisation - Country of Approving Organisation - Date of Denial / Suspension / Revocation / Imposition of Condition
4D	Are any of your family members (whether related by blood, marriage or adoption) associated with or employed in any form or type of casino gambling related operation in any jurisdiction? If yes, please describe. - Name of Person - Relationship - Name of Gambling Business - Country of Gambling Business - Title / Position HeldIs this an International Marketing Agent related company?

5. Civil, Criminal and Investigatory Proceedings

Subsection	Question
5	The questions in this section ask about any arrests, charges or offences you may have committed. Prior to answering these questions, carefully review the definitions and instructions which follows. You must answer “YES” and provide all information to the best of your ability EVEN IF: A. You did not commit the offence charged; B. The charges were dismissed or subsequently downgraded to a lesser charge; C. You completed a diversionary programme* in any jurisdictions; *Examples of diversionary programme include but are not limited to : Guidance Programme, Streetwise Programme, Youth Family Care Programme D. You were not convicted; E. You did not serve any time in prison or jail; or F. The charges or offences happened a long time ago.

	IMPORTANT Inquiries will be made to establish whether the applicant has had any involvement with law enforcement agencies. Failure to disclose any such involvement will be taken into account in assessing the applicant's character, honesty and integrity.
5A	Have you ever been arrested or charged with any crime or offence in any jurisdiction? If yes, please describe. • Nature of Charge or Offence • Location of incident • Date of Arrest (DD-MM-YYYY) • Date of Charge or Offence (DD-MM-YYYY) • Name of Law Enforcement Agency or Court Involved • Country of Law Enforcement Agency • Outcome • If Others • Sentence
5B	Have you ever been the subject of an investigation conducted by any government agency / organisation, court, commission, committee, grand jury, the military or investigatory body (local, state, county, provincial, federal, national, etc.) other than in response to a traffic summons? If yes, please describe. • Name of Court or Agency • Country of Court or Agency • Nature of Proceeding or Investigation • Was Testimony given? • Date Testimony was given (DD-MM-YYYY) • Case concluded? • Investigation period from (DD-MM-YYYY) • Investigation period to (DD-MM-YYYY)
5C	i. Have you ever been called to testify, or otherwise been questioned, interviewed, deposed, or requested to take a polygraph exam by any government agency / organisation, court, commission, committee, grand jury or investigative

	body (local, state, county, provincial, federal, national, etc) in any jurisdiction other than in response to a traffic summon? If yes, please describe. • Name of Court or Agency • Country of Court or Agency • Nature of Proceeding or Investigation • Was Testimony given? • Date Testimony was given (DD-MM-YYYY) • Case concluded? • Investigation period from (DD-MM-YYYY) • Investigation period to (DD-MM-YYYY)
	ii. Have you ever been subpoenaed to or testify before a federal, national, state, county grand jury, or other criminal investigatory agency or body, or any board or commission, or any civil, criminal or administrative proceeding or hearing? If yes, please describe. • Name of Court or Agency • Country of Court or Agency • Nature of Proceeding or Investigation • Was Testimony given? • Date Testimony was given (DD-MM-YYYY) • Case concluded? • Investigation period from (DD-MM-YYYY) • Investigation period to (DD-MM-YYYY)
5D	Have you ever received a pardon, or has any government agency / organisation agreed to dismiss, suspend or defer any criminal investigation or prosecution against you for any criminal offence? If yes, please describe. • Date of Pardon / Dismissal / Suspension / Deferral • Type of Action Taken • Name of Government / Organisation • Country of Government / Organisation

5E	Have you ever been barred or otherwise excluded, for any reason, other than for the denial, suspension or revocation of a licence or registration, from any form or type of casino or gambling related operation* in any jurisdiction? If yes, please describe. You must answer "YES" even if the disbarment or exclusion is no longer in effect or has been lifted. • Name of Gambling Agency • Country of Gambling Agency • Date of Exclusion (DD-MM-YYYY) • Reason for Exclusion
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6. Financial Data

Subsection	Question
6A	Has any individual, local, city, county, provincial, state, federal, national, or any other governmental liens / debts been filed against you as an individual, sole proprietor, member of a partnership, or owner of a corporation in any jurisdiction? If yes, please describe. • Nature of Lien / Debt • Date of Filing (DD-MM-YYYY) • Country where Lien / Debt has been filed • Current Status
6B	i. Have you ever been adjudicated bankrupt or filed a petition, or currently in the process of filing for any type of bankruptcy, insolvency or liquidation under any bankruptcy or insolvency law in any jurisdiction? If yes, please describe. • Date of Filing (DD-MM-YYYY) • Docket / Case number • Name of Court • Country of Court • Currently bankrupt / Filed a petition / In the process of filing?

	ii. Are you currently under any Debt Repayment Program* in any jurisdiction? If yes, please describe. Please include the current outstanding balance in Section 7B. • Financial Repayment Institution • Number of months of payment left • Date entered into Program • Name of Program ○ DCP ○ DMP ○ DRS ○ AKPK ○ Others • If Others • Total Payable Amount Outstanding (Principle + interest) (SGD)
6C	For the past 10 years or since the age of 18, whichever is lesser, has any business entity in which you hold a 5% or greater ownership interest, or in which you serve as an officer or director, been adjudicated bankrupt or filed a petition for any type of bankruptcy or insolvency under any bankruptcy or insolvency law? If yes, please describe. • Name of Business Entity • Country of Business Entity • Date of Filing (DD-MM-YYYY) • Docket / Case Number • Name of Court • Country of Court • Name of Filing Party • Case Concluded?
6D	Have you as an individual, member of a partnership, or owner, director, or officer of a corporation ever been in a business entity that has been in liquidation, receivership or been placed under some form of government administration or monitoring? If yes, please describe. • Title / Position Held

	• Name of Business Entity • Country of Business Entity • Date placed under Liquidation, Receivership, etc. (DD-MM-YYYY) • Reason placed under Liquidation, Receivership, etc. • Present Status of Business Entity • If Others
6E	Have your wages, earnings or other income been subject to garnishment, attachment, charging order and voluntary wage executioner for the past 10 years? If yes, please describe. • Date of Filing (DD-MM-YYYY) • Docket / Case Number • Name of Court • Country of Court • Nature of Obligation • Currency • Amount • Exchange Rate • SGD • Name of Holder of Obligation • Are you still currently under such obligation?
6F	Have you had any assets (e.g. vehicles or real estate/land), repossessed by financial institutions in any jurisdiction for the past 10 years? If yes, please describe. • Type of Property • Country of Asset • Date of Repossession (DD-MM-YYYY) • Reason for Repossession
6G	Do you own, hold, or have an interest in any assets in a trust in any jurisdiction? If yes, please describe. • Description of Trust • Country of Trust

	• Name of Entity with Interests in Trust
6H	Do you hold, manage or control in trust, or otherwise, any assets or liabilities for another person or entity in any jurisdiction? If yes, please describe. • Description of Trust • Country of Trust • Name of Entity with Interests in Trust
6I	i. For the past 10 years, have you been the conduit of any cash or asset to anyone on behalf of a third party? • Date Cash / Asset Held (DD-MM-YYYY) • Currency • Amount • Exchange Rate • Total amount (SGD) • Reason for Holding Cash / Asset
	ii. Do you currently hold any assets under your name or any entity you control for the benefit of a third party? If yes, please describe. • Date Cash / Asset Held (DD-MM-YYYY) • Currency • Amount • Exchange Rate • Total amount (SGD) • Reason for Holding Cash / Asset

7. Assets & Liabilities

Subsection	Question
7A	Assets
	Latest Month Gross Salary *Excluding bonuses (SGD): <\$>
	Cash • Cash on Hand: <\$> • Cash in Bank • Name of Bank • Amount in Account (SGD) • % Attributable to you • Account Type ○ Savings ○ Joint ○ Fixed Deposit ○ Current Account • Amount (SGD) • Sub Total: <\$>
	Real Estate • Property Type ○ Government Housing ○ Condominium ○ Landed ○ Shop House ○ Others • Estimated Market Value (SGD) • Ownership % • Description

	• Amount (SGD) • Sub Total: <\$>
	Vehicle • Vehicle Type • Description • Amount (SGD) • Sub Total: <\$>
	Investment • Investment Type • Description • Amount (SGD) • Sub Total: <\$>
	Others • Description • Amount (SGD) • Sub Total: <\$>
	Total Assets (SGD): <\$>
7B	Liability
	Debt Repayment Program (Please refer to information provided under Financial Data, Question 6B ii) • Name of Bank • No of months of payment left • Date entered into Program (DD-MM-YYYY) • Name of Program ○ DCP ○ DMP ○ DRS ○ AKPK ○ Others • If Others

	• Total Payable Amount Outstanding (Principle + interest) (SGD) • Sub Total: <\$>
	Borrowings from Licensed Money Lenders Do you currently have any loans from any licensed money lenders? • Name of LML • Loan Start Date (DD-MM-YYYY) • Loan Tenure / Total number of Months for Repayment • Total Amount Borrowed (SGD) • Outstanding Amount Payable (SGD) • Sub Total: <\$>
	Borrowings from Unlicensed Money Lenders Do you currently have any loans from any unlicensed money lenders? • Name of UML • Loan Start Date (DD-MM-YYYY) • Loan Tenure / Total number of Months for Repayment • Total Amount Borrowed (SGD) • Outstanding Amount Payable (SGD) • Sub Total: <\$>
	Credit Card • Name of Bank and last 4 digits of your account number • Type of Debt (Outstanding Carried Forward, Instalment Plan, etc) • No. of Instalments Paid (Months) • Total No. of Instalments (Months) • Outstanding Amount Payable (SGD) • Sub Total: <\$>
	Overdraft • Name of Bank and last 4 digits of your account number

	• No. of Instalments Paid (Months) • Total No. of Instalments (Months) • Outstanding Amount Payable (SGD) • Sub Total: <\$>
	Mortgage Loan • Type of Property • Outstanding Amount Payable (SGD) • % Attributable to you • Outstanding Amount Attributable to you (SGD) • Sub Total: <\$>
	Vehicle Loan • Type of Vehicle • Type of Loan ○ Fully Paid ○ Bank Loan ○ In House Loan • Total Amount Outstanding (SGD) • Sub Total: <\$>
	Renovation Loan • Name of Bank / Credit Company • No. of Instalments Paid (Months) • Total No. of Instalments (Months) • Outstanding Amount Payable (SGD) • Sub Total: <\$>
	Study Loan • Name of Bank / Credit Company • No. of Instalments Paid (Months) • Total No. of Instalments (Months) • Outstanding Amount Payable (SGD) • Sub Total: <\$>
	Other Loans

	• Loan Description • Amount Outstanding (SGD) • Sub Total: <\$>
	Total Liabilities (SGD): <\$>
	Date of Declaration

8. Acknowledgement

Subsection	Question
	I consent to electronic service of all correspondences including, but no limited to, summons, notices, orders, or any documents from the Authority. (to tick) Electronic service shall be made to <i>[user to select email address used for electronic service based on previous inputs on email addresses in the earlier part of the form]</i>
	I understand that the aforementioned email address will be used for electronic service and that it is my responsibility to update the Authority with any changes in the electronic service address. (to tick)
	I agree to provide acknowledgement of receipt for every instance of correspondence received. (to tick)