

APPLICATION FOR GAMING INTEGRITY APPROVAL

PROGRESSIVE CLOSURE

Use this form to apply for approval of a progressive closure or transfer.

Allow 10 LGA business days for processing of a complete application.

1. APPLICANT INFORMATION		
Name:		
Street Address:		
City:	Province:	Postal Code:
2. PROJECT DETAILS		
Project Number:	Project Name:	
Contact Person:		
Phone:	Email:	
3. PREMISES INFORMATION		
Site:		
Contact Person:	Title:	
Phone:	Email:	
4. CLOSURE DETAILS		
Progressive Name:		
Progressive Type:		
Closure Type:		

5. ADDITIONAL INFORMATION				
6. CHECKLIST				
	Attached	Not Applicable		
Progressive Closure/Transfer Form				
Progressive Tracking Spreadsheet				
Disbursement Event Rules Notice to Patrons				
Notice to Patrons				
7 CERTIFICATION				
7. CERTIFICATION				
I certify on behalf of the Manitoba Liquor and Lotteries Corporation that the information provided on and with this application is true and correct and that I have read, understand and agree to comply with the applicable Terms and Conditions.				
Signature:				
Name (Printed) :				
Title:	Date:			