

Gibraltar Regulatory Authority – Gambling Division

Suite 603, Europort Gibraltar. Tel (00350) 20074636 email gambling@gra.gi

Complaint Resolution Request Form.

Gambling operators granted a gambling licence by the Government of Gibraltar are required to demonstrate the highest standards of technical and professional competence, financial resilience and probity. They must conduct their licensed activities in accordance with the Gambling Act 2005 and any Codes of Practice issued by the Gambling Commissioner.

If you wish to make a complaint about a Gibraltar gambling licence holder this form is designed to assist you in obtaining an efficient and fair resolution of your complaint. You must complete this form.

Please ensure that the form is signed and dated by you or the person making the complaint on your behalf.

If you provide any material you believe is confidential and you do not want this information disclosed to the operator, you should make this clear. We cannot guarantee that we will not disclose the information you provide; we will contact you should this be necessary.

We will liaise with the person named in this form as the Contact Person.

The Complaint Resolution Request Form is available at the GRA website <http://www.gra.gi>

The original completed form, printed and signed, should be sent to:

The Gambling Commissioner
Gibraltar Regulatory Authority
Suite 603
Europort
Gibraltar

1. Contact Details of Complainant

Name and Address:

Date of Birth Telephone email

Mobile/Other Contact

Please advise us of any restrictions on the method or times you may be contacted.

Designated Contact Person (if different from above)

Name and Address:

Telephone email

Mobile/Other Contact

Please advise us of any restrictions on the method or times you may be contacted.

2. Contacts with Operator

Operator Name/Website Used

Provide username/account ID, nickname/alias, email address used/registered in your account with the operator

Operator Staff name(s)

Telephone or email addresses used

Any other contact with the Operator: (See also 4 below)

3. Nature of Complaint

Please provide details of the nature of your complaint: 'what, when, how etc.'

Please ensure you include: i) what you think the operator has done wrong, and ii) what you may have done wrong. Please continue on a blank sheet if necessary.

3. Nature of Complaint (continued)

4. Operator's Complaints Procedure

Please provide details of how you have tried to resolve this matter with the operator. Please attach all correspondence and relevant records. All documents you send must be full and clear copies, do not send poor copies or copies that have been altered or edited in any way.

5. Confidential Material

Please indicate here what material if any you do not wish us to discuss with the Operator.

6. Loss and Remedy

Please indicate here the amount you believe you have lost and what remedy you are seeking.

7. Indemnity – You must read and comply with the following section:

I hereby declare that all the information I have provided to the Gambling Commissioner is true to the best of my knowledge and complete to the best of my ability.

In signing this document I am authorising the Gambling Commissioner to liaise as necessary with any regulatory or law enforcement agency associated with this complaint, and to obtain and examine any information held by Gibraltar gambling licence holders that appears relevant to my complaint. This includes all material before and since this complaint arose.

Before signing and submitting this form, please ensure that you have read the Gambling Commissioner’s advice to users of Gibraltar licenced gambling facilities at <http://www.gra.gi> as this information may answer your complaint.

Signed.....Date.....

Full Name (Print).....