

## **Statutory Declaration and Notice and Consent**

l,	rinted Name of Applic	cant)	, swear/solemnly declare that all of the answers provided in this application, as
well as all of		•	ocuments and materials submitted with it are, to the best of my knowledge and
In addition, as	required by the <u>Fr</u>	eedom of Informatio	n and Protection of Privacy Act:
it may be nece of the followin agencies, sher institutions, for Freedom of In	essary for the Nova ng domestic and fo riffs' offices, the Re ormer and current nformation and Pro	Scotia Alcohol and Gareign sources: federal gistrar of Bankruptcy, employers and any go	ct, in order to verify the information on this form and to determine eligibility for registration, aming Division (the "Division") to collect and receive additional information from some or all , provincial, state or municipal licensing bodies and police services, other law enforcement credit bureaus, trust companies, banks, professional and industry associations, educational overnment Department, Agency, Board or Division. The Division is required, under the to protect the confidentiality of such information in its possession and control and to use ited.
Information c	ollected may be us	sed and disclosed as f	follows:
1.	To evaluate the applicant, and individuals and corporations identified in connection with the applicant, regarding		
2.	their person, financial, business and criminal history, honesty and business integrity; Information on the applicant, and on individuals and corporations identified in connection with the applicant, may be shared with Government officials who are assisting the Division in the evaluation of applicants for registration;		
3.	The Division ma	ay share informatio	on on the applicant, and on individuals and corporations identified in connection
4.		•	sdictions with which it makes formal agreements; on on the applicant, and on individuals and corporations identified in connection
7.		=	cement agencies for gaming-related investigations or clearances; and
5.	To conduct ong	oing personal histo	ory investigations, including checks for criminal charges outstanding and past cords, during the entire course of the applicant's registration with the Division.
purposes of the direct ar	this application.	I have read and ur tion of information	ted, any additional or written authorization that is required by the Division for the nderstand the above notice, I hereby consent as or on behalf of the applicant to by the Division and consent to the use and disclosure of this information as
A public office	cial who can ansv	ver guestions about	the collection and disclosure of information is:
			ctor of Licensing and Registration
			a Scotia Alcohol and Gaming Division
			rington Place, 780 Windmill Road
			Box 545 tmouth, NS B2Y 3Y8
		Dari	inioutii, NS B21 S16
SWORN/S	OLEMNLY DEC	CLARED BEFORE	ME at
(City/Town)			
(Municipality)			
(State/Province	2)	(Country)	
this	_day of	20_	
			Signature of Applicant

A Barrister, Solicitor, Commissioner of Oaths or Notary Public