



## THE BARBADOS LOTTERY RETAILER APPLICATION FORM

IGT Global Services Limited, Independence Square, Bridgetown 11121  
Customer Service (227-6431/39), FAX (431-9386)  
Visit us at [www.mybarbadoslottery.com](http://www.mybarbadoslottery.com)

The submission of a Retailer Application Form does not guarantee that a terminal will be issued to the applicant. Selection of your business as a Lottery Sales Retailer location is within the discretion of the Barbados Lottery's judgment regarding (1) the volume of expected sales; (2) the financial responsibility and security of the business; (3) accessibility of the place of business to the public and other criteria.

BUSINESS CONTACT INFORMATION			
Applicant (Surname)			
Applicant (Other names)			
National Registration #		Date business commenced	
Company name	<input type="checkbox"/> Sole proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation		
Title			
E-mail			
Registered company address			
Name(s) of directors	1.		
	2.		
	3.		
BUSINESS AND CREDIT INFORMATION			
Postal Code		Bank name:	
How long at current address?		Primary business address	
		Postal Code	
Phone		Phone	
Fax			
E-mail			
BUSINESS/TRADE REFERENCES			
Company name		Phone	
Address		Fax	
Postal Code		E-mail	
Type of account		Other	
Company name		Phone	
Address		Fax	
Postal Code		E-mail	
Type of account		Other	

Company name		Phone	
Address		Fax	
Postal Code		E-mail	
Type of account		Other	

**BUSINESS DETAILS**

**Opening Hours**

Monday	-	Thursday	-
Tuesday	-	Friday	-
Wednesday	-	Saturday	-

**Channel Of Trade**

Grocery   
 Petrol Station   
 Bar & Restaurant   
 Lottery Only   
 Convenience  
 Department Store   
 Other.....

**SIGNATURE & VERIFICATION**

I authorize IGT Global Services Ltd to verify the information provided.

Applicant's Signature	.....
Date	

**INTERNAL USE ONLY**

Application Date			
Received by		Date	
Credit Check Rating (attach report)			
Application Status	<input checked="" type="checkbox"/> Approved	<input type="checkbox"/> Denied	
Retailer #		Reason	<input type="checkbox"/> Unsatisfactory Credit Rating
ATM Card #			<input type="checkbox"/> P.A/B.D.
Account Activated	.....		<input type="checkbox"/> Location (close to existing agent in same channel)
Date			