

EMAIL TO SIMON GRIESZ  
FROM DARREL HENDERY

FAX 93941011

4/18

LIQUOR LICENCE APPLICATION

Simon

Attached is a draft of the information required for Form C, DAE and I note the following.

Form C. - I was aiming to have the licence in the name of ARMA B N<sup>o</sup> 2.

Q11 - I don't know what type of licence is held for the premises

Q12 - Presumably the answer to this question is "yes" but please confirm.

Q16 - ... I am unsure whether transfer of ownership also entails transfer of permits and therefore the answer to this question is "No" please advise.

Q19. Presumably there is some general wording regarding the machines being acquired as part of an asset business sale, please advise.

Form D

Details of the manager have been faxed previously.

Information not previously sent has been marked

with a <sup>u</sup> <sup>4</sup> 0

Q25 & 26

I have inserted the relevant information in these two tables. Presumably they will undertake company searches to verify the information.

Versot has two other shareholders being Dorelan Pty Ltd ATF The Herford Super Fund (DH & HH are the only beneficiaries) and Eutecheera Pty Ltd (DH is the sole shareholder and director)

What is the reference to Certificate of Clearance?

Q27 Refer to query above

Q28 The request in Q26 related to all natural persons who have a direct or indirect financial interest.

However this wording viz "direct or indirect" is not carried over to Q28.

As you will appreciate Dorelan & Versot are beneficiaries via units in the respective Trusts however this section does not contemplate Trusts.

Furthermore the information in the tables is very compressed and I suggest it be set out as annexures.

Q29 I'm not sure of the response.

## FORM C

APPLICATION TO HAVE A LIQUOR LICENCE TRANSFERRED TO YOU  
OR TO A COMPANY

Information for the applicant (see also Fact Sheet 4, available from a Licensing Court Registry):

1. This application consists of this form, forms B, D & E and two direct debit requests for the payment of monitoring fees and gaming duties that are required only where a hotel has gaming machines.
2. The person who is the present holder of the licence must complete form B.
3. Forms C, D & E and each of the two direct debit requests must be completed by the proposed licensee.
4. All four forms must be lodged together with four copies of each. Only copy of each of the direct debit requests is required.
5. Answer all applicable questions and, if not typing, print in block letters.

## WARNING

Making false or misleading statements or omission of any material matter is an offence, with a maximum penalty of \$5,500 or imprisonment for 12 months, or both. It may also lead to refusal of the application or cancellation of the licence. The information you provide will be checked by various agencies.

1. Full name of applicant (if applying for a Corporate Licence use company name and ACN)  
Surname/company name: ARMPOB NO2 PTY LTD  
First name(s): \_\_\_\_\_
2. Address of applicant or registered address (include post code) 9/- WLM PARTNERS  
LEVEL 12, 84 PITT STREET SYDNEY NSW 2000
3. Mailing address, if different from above (include post code) PO BOX 1847  
ARMIDALE NSW 2350
4. Telephone Numbers (02) 95471875 (02) 95471875 [REDACTED]  
(private) (business) (mobile)
5. Facsimile Number (02) 95471893
6. If the applicant is a company, provide the name of a contact person and their telephone number:  
MR DARRELL HEADY ... MOBILE [REDACTED]  
DIRECTOR
7. Name of Solicitor/representative (if applicable) MR GEOFF STEIN  
Name of legal firm/representative BROWN WRIGHT STEIN  
Address LEVEL 6 179 ELIZABETH STREET SYDNEY NSW 2000  
Telephone Number 02 93941010 Facsimile Number [REDACTED]
8. Name of licensed premises: TATTERSALLS HOTEL.
9. Address of licensed premises: 174 BEARDSY STREET ARMIDALE NSW 2350
10. Licence Number: 108451

11. What type of liquor licence is held for the premises? \_\_\_\_\_ X  
(See Fact Sheet 1)

PROVISIONAL TRANSFER

12. Do you seek a provisional transfer of the licence? Answer Yes or No \_\_\_\_\_  
(See Fact Sheet 4)

13. Have you attached the current licence, a copy thereof or a copy of the licence conditions for the premises to the application?

Answer Yes or No YES

If no, why not? \_\_\_\_\_

14. Have you read and understood the conditions imposed on the licence?

Answer Yes or No YES

QUESTIONS 15-20 ARE ONLY RELEVANT TO AN HOTELIER'S LICENCE

15. I wish to apply for the transfer of the ownership in respect of 15 approved gaming devices on the premises to: \_\_\_\_\_  
(state number)

Delete either (a) or (b), whichever is not applicable.

a) ~~me~~ OR ARMUS NO 2 PTY LTD

b) ~~the persons proposed to be interested in the business or the profits of the business carried on pursuant to the licence as detailed in Question 24, 25 or 29 of Form D~~

16. Do you wish to acquire any poker machine permits from the present holder of the licence?

Answer Yes or No \_\_\_\_\_

If yes, how many do you seek to acquire? \_\_\_\_\_

17. If the answer to Question 16 is yes, you must complete a poker machine permit transfer form and lodge it with this application. NB: You must also produce evidence that stamp duty has been paid on the proposed transfer of the permits or that no stamp duty is payable.

18. Will the acquisition of the permits referred to in Question 16 result in you having more than fifteen (15) permits?

Answer Yes or No NO

19. What is the sale price and terms of purchase of the devices and/or permits?  
\_\_\_\_\_  
\_\_\_\_\_ X

20. Are you aware that non 'X'-standard gaming devices may only be operated in NSW hotels up until 1 January 2001? From this date only 'X'-standard gaming devices may be operated on hotel premises.

If you understand the above statement, please state "I understand". I understand.

AFFIDAVIT

I, DARRELL FREDERICK HENDRY - DIRECTOR ARMPUS NO 2 PTY LTD (full name)  
of [REDACTED] SYDNEY NSW 2221 (address)

do solemnly and sincerely "swear on oath/affirm:

- a) I have made all reasonable inquiries to ascertain the information to permit me to correctly complete the application.
- b) I have personally checked the correctness of all the answers given in this application.
- c) I have read and understood the warning on the first page of this form.
- d) The answers are true and correct and I have not omitted any material matter in providing the answers.
- e) (If the applicant is a company) I am authorised to make this application and affidavit on behalf of the company.

\*SWORN/AFFIRMED AT \_\_\_\_\_

ON THIS \_\_\_\_\_

DAY OF \_\_\_\_\_ 20 \_\_\_\_\_  
(year)

BEFORE ME

\_\_\_\_\_  
Justice of the Peace/Legal Practitioner

\_\_\_\_\_  
Deponent

\* Delete as appropriate and initial.

CHECKLIST

Have you

- 1. Answered every applicable question?
- 2. Attached the current licence for the premises to the application?
- 3. Attached a completed poker machine transfer form and proof of payment of stamp duty, if applicable?

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LIQUOR ACT 1982 NO.147

HOTELIER'S LICENCE

PREMISES LICENCE NUMBER 108451

To the Licensee  
Tattersalls Hotel  
PO Box 53  
UNE ARMIDALE 2351

The Person named in this licence is authorised to sell and dispose of liquor for consumption whether or not on the licensed premises in accordance with the Liquor Act, 1982.

Except during any period of suspension this licence continues in force provided the licence has not been surrendered or cancelled.

Location of Licensed Premises :  
The Mall, 174 Beardy Street ARMIDALE

Date of Grant : 27th September, 1957

Current Holder : Snell Steven John

Date of Appointment of Current Holder : 7th May, 1998

Extended Trading Hours

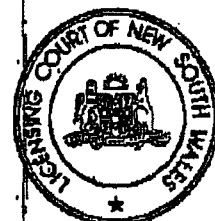
Monday 05:00AM to 03:00AM  
Tuesday 05:00AM to 03:00AM  
Wednesday 05:00AM to 03:00AM  
Thursday 05:00AM to 03:00AM  
Friday 05:00AM to 03:00AM  
Saturday 05:00AM to 03:00AM  
SECTION 23(7) ENDORSEMENT.  
Area: Whole of the licensed premises.  
(Varied on 19 JUL 1999)

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Registry: ARMIDALE

Police District : NEW ENGLAND

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LIQUOR ACT 1982 NO.147

HOTELIER'S LICENCE

PREMISES LICENCE NUMBER 108451

Authorised Areas

Whole of Middle Bar Area.  
(Varied on 14 APR 1998)

Special Conditions

CONDITIONS IMPOSED BY THE COURT ON 28 JUN 2002 AT THE  
REQUEST OF POLICE:

The main entrance doors of the licensed premises to close at  
12.30 am and no person will be permitted entry after that  
time.

Service of all alcoholic drinks to cease at 2.30 am.  
Non-alcoholic beverages and food may still be sold until  
closing time.

The Armidale Licensed Premises "Code of Conduct" to be  
constantly maintained and enforced.

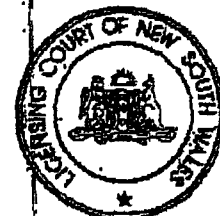
SECTION 25(2) ENDORSEMENT CONDITIONS:

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LIQUOR ACT 1982 NO.147

HOTELIER'S LICENCE

PREMISES LICENCE NUMBER 109451

The licensee shall take all reasonable steps to prohibit or restrict activities (such as promotions or discounting) that could encourage misuse or abuse of liquor (such as binge drinking or excessive consumption).

The licensee is to maintain a register which is to contain a copy of the certificate of the satisfactory completion of the Responsible Service of Alcohol course by the licensee and for employees who have completed the course. The register is to be made available for inspection on request by a police officer or special inspector.

The licensee must as a minimum continually apply the house policies and practices on harm minimisation and responsible service of alcohol tendered to the Court at the time the application was granted. A copy of the house policy is to be maintained in the register in which the certificates of completion of the responsible service of alcohol course are filed. The house policy is to be continually updated by additions that do not diminish from the issues approved by the Court and reflect legislative requirements, court, industry and Department of Gaming and Racing recommendations.

The "No More Its The Law" and four (4) house policy posters developed by the Liquor Industry Consultative Council (available from the Department of Gaming and Racing) must be prominently displayed throughout the premises.

In addition to any other notice required to be displayed there is to be prominently displayed in the premises, the "Intoxication" sign and at each public entrance way to the premises the "Proof of Age" poster (available from the Department of Gaming and Racing).

The Liquor Industry Code of Practice for the Responsible Promotion of Alcohol Products (available from the Department of Gaming and Racing) must be adopted in respect of the premises. A copy of the code must be displayed in a position in the premises where it will be readily available

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LIQUOR ACT 1982 NO.147

HOTELIER'S LICENCE

PREMISES LICENCE NUMBER 108451

to and noticed by all staff involved in the sale and supply of liquor.

Low alcohol beer and non-alcoholic beverages must be available at all times when full strength liquor is available. The pricing structure of low alcohol beverages is to reflect the lower wholesale cost of those beverages.

Food must be available whenever liquor is consumed on the licensed premises.

In respect of all approvals to sell liquor at a function to be held on premises other than the premises to which the licence relates the following additional conditions are imposed:-

All liquor supplied at the function must be opened by staff.

The licensee or a manager who has completed the approved responsible service of alcohol course must be in attendance for the duration of the function to supervise the sale and supply of liquor.

The area subject of the application is only that area of the hotel as shown in red on the plans accompanying the application.

If the number of customers present upon the licensed premises after 12:00 midnight was less than one hundred (100), there would be one (1) staff member who holds a securities licence stationed at the principal entranceway to the licensed premises after 12:00 midnight. There need not be any other security staff or external security personnel.

If the number of patrons present after 12:00 midnight was in excess of one hundred (100) but less than two hundred (200), then there would be one (1) staff member (being the holder of a securities industries licence) stationed at the principal

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HOTELIER'S LICENCE

PREMISES LICENCE NUMBER 10B451

entranceway to the licensed premises after 12:00 midnight together with one (1) licensed security personnel to patrol a defined patrol area.

If the number of patrons present upon the licensed premises after 12:00 midnight was in excess of two hundred (200) then there would be two (2) staff members (each of whom holds a securities industry licence) stationed at the principal entranceway to the licensed premises after 12:00 midnight together with two (2) private security personnel patrolling a defined area.

The defined area over which the private security personnel will patrol will be the Mall, the Cinders Lane Car Park, the area immediately adjacent to the rear of the Armidale City Council building, Kusden Street between Dangar Street and Falconer Street and Falconer Street between Dangar Street and Cinders Lane.

On any night that the hotel trades after 12:00 midnight, the licensee is to arrange a ~~mini bus shuttle~~ service between the hotel and the residential colleges of the University of New England Campus.

The LA10\* noise level emitted from the licensed premises shall not exceed the background noise level in any Octave Band Centre Frequency (31.5Hz - 8kHz inclusive) by more than 5dB between 07:00 am and 12:00 midnight at the boundary of any affected residence.

The LA10\* noise level emitted from the licensed premises shall not exceed the background noise level in any Octave Band Centre Frequency (31.5Hz - 8kHz inclusive) between 12:00 midnight and 07:00 am at the boundary of any affected residence.

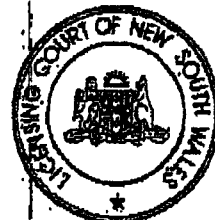
Notwithstanding compliance with the above, the noise from the

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HOTELIER'S LICENCE

PREMISES LICENCE NUMBER 108451

licensed premises shall not be audible within any habitable room in any residential premises between the hours of 12:00 midnight and 07:00 am.

Interior noise levels which still exceed safe hearing levels are in no way supported or condoned by the Liquor Administration Board.

For the purposes of this condition, the LA10 can be taken as the average maximum deflection of the noise emission from the licensed premises.

SECTION 25(7) ENDORSEMENT CONDITIONS:

All doors to the premises to be closed at 12:30 am and no further patrons to be admitted to the premises after that hour.

No alcoholic beverages to be sold to patrons after 02:30 am until closing of the premises.

At any time the gaming room is open for operation at least one (1) bar must also be open elsewhere in the hotel for the sale of liquor. This condition is to apply until 5 March 2000. (Imposed on 19 JUL 1999)

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FORM D

PROBITY PARTICULARS OF PROPOSED LICENSEE/MANAGER

IN RESPECT OF AN APPLICATION FOR -

- A LIQUOR LICENCE
- TRANSFER OF A LIQUOR LICENCE
- APPROVAL TO MANAGE LICENSED PREMISES ON BEHALF OF A CORPORATION
- APPROVAL TO MANAGE A REGISTERED CLUB

Information for the applicant (refer also to the relevant Fact Sheets available from a Licensing Court Registry):

1. Four (4) copies - ie 1 original and 3 photocopies - of this form are to be lodged.
2. Answer all applicable questions and, if not typing, print in black letters.

**WARNING**

Making false or misleading statements or omission of any material matter is an offence, with a maximum penalty of \$5,500 or imprisonment for 12 months, or both. It may also lead to refusal of the application or cancellation of the license/certificate of registration. The information you provide will be checked by various agencies.

1. Full name of applicant (use company name and ACN only if applying for a Corporate Licence)

Surname/company name: Franklin X

First name(s): Phillip Howard X

2. Address of applicant or registered address (include post code) [REDACTED] X

Armidale N-S-W 2350

3. Mailing address, if different from above (include post code) \_\_\_\_\_ X

4. Telephone Numbers [REDACTED] (private) [REDACTED] (business) [REDACTED] (mobile) X

Facsimile Number \_\_\_\_\_

5. Provide the following particulars where the applicant is a natural person:

a) Date of Birth: [REDACTED] / [REDACTED] / [REDACTED] X  
(day) (month) (year)

b) City/Town and Country of Birth: Sydney Australia X

c) Gender: Female  Male  (circle whichever is applicable) X

d) Height: [REDACTED] cm Build: [REDACTED] Complexion: [REDACTED] X

Hair Colour: [REDACTED] Eye Colour: [REDACTED] X

e) Describe any distinguishing features (eg. scars, tattoos, birthmarks, etc): \_\_\_\_\_ X

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6. State any former names which you have used (including maiden name(s) and alias(es) and any change of name by deed poll (if applicable):

None

X

7. Name of proposed/existing licensed premises TATTERSALLS HOTEL

8. Full address of proposed/existing licensed premises 174 BEARDS STREET  
 ARMIDALE NSW 2350

9. Licence Number (if existing licensed premises) 108451

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10. RESIDENTIAL ADDRESS (not applicable if applicant is a company)

Provide the information below in relation to where you have resided for the past 10 years. State your present address FIRST.

ADDRESS	FROM	TO
[REDACTED] Armidale N-S-W 2350	10-9-05	Present
[REDACTED] Armidale N-S-W 2350	1-9-03	10-9-05
[REDACTED] Armidale N-S-W 2350	1-1-96	1-9-03

X

X

11. How long have you continuously resided in Australia? 31 years

X

12. Are you required to lodge a certificate of clearance? (See Fact Sheet 4, page 4).

Answer Yes or No No. If yes, attach to application.

X?

13. Are you an Australian Citizen? Answer Yes or No Yes

X

14. OFFENCES

Have you ever, whether in Australia or overseas, been found guilty of an offence (irrespective of whether a conviction was subsequently recorded) or paid the penalty applicable to an infringement notice?

Answer Yes or No No. If yes, provide the information below in respect of every such instance, unless it is a "spent conviction" within the meaning of the Criminal Records Act 1991.

X

OFFENCE	DATE OF OFFENCE	COURT AND DATE (if applicable)	RESULT OF PROCEEDINGS OR NOTICE

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15. If the licence is in respect of a hotel, restaurant, nightclub, caterers or motel premises, have you or the proposed approved manager for the company, completed the required training course for that class of licence?

Answer Yes or No No X

If yes, you must attach a copy of the certificate of completion of the course.

If no, on what basis are you qualified to hold the licence sought? I Have been X  
Involved in running of Hotels for the last  
6 years

16. (a) Have you or the proposed manager for the company, completed a Responsible Service of Alcohol course approved by the Liquor Administration Board?

Answer Yes or No Yes . If yes, you must attach a copy of the certificate of completion of the course to this form. X

(b) In the case of an Hoteliers Licence or an approval to manage premises of a registered club, have you or the proposed manager for the company/club completed the Responsible Gaming Course? Answer Yes or No Yes . If yes, you must attach a copy of the certificate of completion of the course to this form. X

17. (a) Have you anywhere ever been granted a liquor licence?

Answer Yes or No No . If yes, provide details below: X

NAME OF LICENSED PREMISES	ADDRESS OF LICENSED PREMISES	PERIOD OF TIME

(b) Have you anywhere ever been refused a liquor licence? X

Answer Yes or No No . If yes, provide details

18. Have you anywhere ever been disqualified or suspended from holding a liquor licence? X

Answer Yes or No No . If yes, provide details

19. Do you presently hold a licence to sell liquor? X

Answer Yes or No No . If yes, provide details

20. Have you ever held any gaming related licences (eg. poker machine technician, seller's or adviser's licence)? X

Answer Yes or No No . If yes, provide details

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21. If you are currently employed, state the name and address of your present employer.

Wicklow Hotel Cnr Marsh St and Dumaresq St X

22. If you are not presently employed, state the name and address of your last employer and period of employment

NOT APPLICABLE O

23. Are you interested in, employed in or conduct any business (other than these licensed premises) which will continue if this application is granted? X

Answer Yes or No NO if yes, provide details

You must satisfy the Court that your involvement in any other business will not prevent you from properly supervising and managing the licensed premises. State your reasons here:

NE Questions 24 to 29 are not applicable in respect of an application to manage a registered club.

**24. INTERESTS HELD BY NATURAL PERSONS** (Not applicable to approved manager's application)

Provide the following information in respect of all persons, including any interest by yourself and any "silent" partners, who have a direct or indirect financial interest in the business or the profits of the business of the licensed premises.

FULL NAME OF PERSON	RESIDENTIAL ADDRESS	DATE & PLACE OF BIRTH	GENDER		PERIOD OF CONTINUOUS RESIDENCY IN AUSTRALIA	NATURE OF INTEREST of Licence/Business Owner
			MALE	OR FEMALE		

If Certificates of Clearance are required for any of the above persons, application for the certificates should be made immediately so that the transfer will not be delayed.

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**25. INTERESTS HELD BY CORPORATIONS** (Not applicable to approved manager's application)

Provide the following information of any corporation that has a direct or indirect financial interest in the business or the profits of the business of the licensed premises:

FULL NAME OF CORPORATION & ACN NO	REGISTERED ADDRESS	NATURE OF INTEREST eg License/Business Owner
DARRELEN PTY LTD ACN 117 664 956	[REDACTED] BLAKEHURST NSW 2221	BUSINESS OWNER
VERLOFT PTY LTD ACN 003 488 640	[REDACTED] BUILDING 6 1-3 RICHARDSON PLACE NORTHRYDE NSW 1670	BUSINESS OWNER

**26. DIRECTORS AND SHAREHOLDERS OF PROPRIETARY COMPANIES**  
(Not applicable to approved manager's application)

Provide the following information in respect of all natural persons who have a direct or indirect financial interest in the business or the profits of the business of the licensed premises.

NAME OF DIRECTOR (D) AND/OR SHAREHOLDER (S) and SPECIFY (D) &/OR (S)	NAME OF COMPANY & ACN NUMBER	RESIDENTIAL ADDRESS OF DIRECTOR/ SHAREHOLDER	DATE & PLACE OF BIRTH	PERIOD OF CONTINUOUS RESIDENCY IN AUSTRALIA
DARRELL FREDRICK HENDRY (D) (S)	DARRELEN PTY LTD ACN 117 664 956	[REDACTED] ST BLAKEHURST NSW 2221	[REDACTED]	54 YEARS
HELEN HENDRY (D) (S)	" " " "	" " " "	[REDACTED]	41 YEARS
JOHN MARCUS CASEY (D) (S)	VERLOFT PTY LTD ACN 003 488 640	[REDACTED]	[REDACTED]	61 YEARS
ANNETTE ROBIN CASEY (S)	VERLOFT PTY LTD ACN 003 488 640	[REDACTED]	[REDACTED]	61 YEARS

If Certificates of Clearance are required for any of the above persons, application for the certificates should be made immediately so that the transfer will not be delayed.

27. Are you required to lodge a certificate of clearance for any of the above directors or shareholders?  
(See Fact Sheet 4, page 4).  
Answer Yes or No \_\_\_\_\_ If yes, application for the Certificates of Clearance should be made immediately so that the transfer will not be delayed



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**28. WHO WILL OWN THE FREEHOLD OF THE PREMISES IF THIS APPLICATION IS GRANTED?**

State full details including names, dates and places of birth, gender, addresses, former names and date of arrival in Australia, if applicable. In the case of a proprietary company the above details must be supplied for each director and shareholder.

FULL NAME OF PERSON OR COMPANY NAME & ACN NUMBER (if applicable)	FULL NAME OF PERSON (IF DIRECTOR (D) OR SHAREHOLDER (S) OF COMPANY IN FIRST COLUMN SPECIFY (D) OR (S))	RESIDENTIAL ADDRESS	DATE & PLACE OF BIRTH	GENDER MALE OR FEMALE	PERIOD OF CONTINUOUS RESIDENCY IN AUST.
DARLEEN PTY LTD ACN 1124956	DARLEEN FREDERIC HENRY (D) (S)	[REDACTED]	[REDACTED]	M	54 YEARS
" " " "	HELEN HENRY (D) (S)	" " " "	[REDACTED]	F	41 YEARS
VERDOT PTY LTD ACN 003458660	JOHN MARCUS CASSIDY (D) (S)	[REDACTED]	[REDACTED]	M	61 YEARS
" " " "	ANNETTE REGIN CASSIDY (S)	[REDACTED]	[REDACTED]	F	61 YEARS

If Certificates of Clearance are required for any of the above persons, application for the certificates should be made immediately so that the transfer will not be delayed.

29. Are you required to lodge a certificate of clearance for any of the above directors or shareholders? (See Fact Sheet 4, page 4).

Answer Yes or No           . If yes, application for the Certificates of Clearance should be made immediately so that the transfer will not be delayed

30. Have you previously in the last 10 years had a financial interest in any licensed premises?

Answer Yes or No   No  . If yes, provide details below:

NAME OF LICENSED PREMISES	ADDRESS OF LICENSED PREMISES	PERIOD OF TIME

31. Have you ever become bankrupt or resorted to the laws relating to bankruptcy or insolvency?

Answer Yes or No   No  . If yes, provide details including the date entered into, the circumstances and the date and evidence of discharge (if applicable):

32. Are you currently, or have you ever been, a director, an officer, or directly or indirectly concerned in the management of a company which has been placed into liquidation, receivership, scheme of arrangement, or under formal insolvency administration, or for which an agent for the mortgagee has been appointed?

Answer Yes or No   No  . If yes, provide details including the date entered into, the circumstances and the outcome:

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33. Are you currently, or have you ever been, a director, an officer, or directly or indirectly concerned in the management of a company for which an investigation into the affairs of that company has been authorised by the Australian Securities & Investments Commission, its predecessors or equivalent body in any other jurisdiction?

Answer Yes or No No If yes, provide details including the date of investigation, the circumstances and the outcome: X

34. Are there any matters pending in relation to liquidation, scheme of arrangement or other circumstances as described in the two preceding questions above?

Answer Yes or No No If yes, provide details including the dates, the circumstances and the current status: X

AFFIDAVIT

I, Phillip Howard Franklin (full name)

of [REDACTED] N-S-W 2350 (address)

do solemnly and sincerely \* swear/affirm:

- a) I have made all reasonable inquiries to ascertain the information to permit me to correctly complete the application.
- b) I have personally checked the correctness of all the answers given in this application.
- c) I have read and understood the warning on the first page of this form.
- d) The answers are true and correct and I have not omitted any material matter in providing the answers.
- e) (If the applicant is a company) I am authorised to make this application and affidavit on behalf of the company.

\*SWORN/AFFIRMED AT ARMIDALE  
ON THIS 9<sup>th</sup>  
DAY OF January  
BEFORE ME 20 06  
(Year)

[Signature]  
Justice of the Peace/Legal Practitioner

P-Franklin  
Deponent

JP114629

\* Delete as appropriate and initial.