RELEASE AUTHORISATION

To All Courts, Probation Departments, Selective Service Boards, Employers, Educational Institutions, Banks, Financial and

Other Such Institutions, and all Governmental Agencies - federal, state, provincial and local, without exception, both foreign and domestic: On behalf of (NAME OF BUSINESS ENTITY) have I, (NAME OF PERSON SIGNING FORM) authorized the Jamaica Casino Gaming Commission to conduct a full investigation into the background of said Business Entity. Therefore, you are hereby authorized to release any and all information pertaining to the said Business Entity, documentary or otherwise, as requested by any employee, agent or representative of the Casino Gaming Commission, provided that he or she certifies to you that said Business Entity is subject to the Casino Gaming Commission's casino gaming licensing procedures under the Casino Gaming Act and the rules and regulations of the Casino Gaming Commission. This authorisation shall supersede and countermand any prior request or authorisation to the contrary. A photostatic copy of this authorisation will be considered as effective and valid as the original. SIGNATURE DATE Subscribed and sworn to before me this _____ day of_____, 20__

NOTARY PUBLIC

CONSENT TO INSPECTIONS, SEARCHES AND SEIZURES

On behalf of	
(NAME OF BUSINES	S ENTITY)
I,	, hereby consent to all inspections, searches
(NAME OF PRESIDENT, CHIEF EXECUTIVE OFFICER OR EQU	
and seizures as authorized by the Casino Gaming Act and by the rules an	de regulations of the Cashio Gaining Commission.
DATE	SIGNATURE
Subscribed and sworn to	
before me this day	
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NOTARY PUBLIC	

WAIVER OF LIABILITY

behalf of	ž			
(NAME OF BUSINESS ENTITY)				
OTHER OF PREGIDENT CHIEF EXECUTIVE OFFICER OF FOLINIAL ENT OFFICER)	31			
(NAME OF PRESIDENT, CHIEF EXECUTIVE OFFICER OR EQUIVALENT OFFICER)	res			
hereby waive liability as to the Minister of Finance and the Casino Gaming Commission and their respective agents for any damages				
resulting to the said Business Entity from any disclosure or publication of information acquired during the licensing process or during				
any inquiries, investigations or hearings where such disclosure is permitted under the Casino Gaming Act or the rules and regulations				
he Casino Gaming Commission.				
DATE				
oscribed and sworn to				
ore me this day				
,20				
NOTARY PUBLIC				

ATTACHMENT 1B ORGANIZERS/INCORPORATORS

NAME	LAST KNOWN ADDRESS	OCCUPATION(S)	DATE OF BIRTH
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