RENEWAL FORM *(Form_D)*

Page No.	1 of __
Form No.	OGLD-176
Revision No.	2
Effectivity	July 18, 2023

Name of Service Provider:

Business Address:

Authorized Representative: ***Contact Number:***

NAME *(FIRST NAME MIDDLE INITIAL, SURNAME)*	CITIZENSHIP	POSITION	DATE OF BIRTH *(eg. July 10, 2020)*	TYPE OF VISA *(for foreign)*	AEP NUMBER	9(G) VISA NUMBER	VISA VALIDITY *(eg. July 10, 2020)*	OGEL NO.	TIN
TOTAL:									

INSTRUCTIONS

1. All names should be typed in uppercase
2. Date of birth and visa validity must be encoded in month-date-year (Ex. July 10, 2020)
4. Positions should be involved gaming operations

CERTIFICATION

This is to certify that:

1. *We have validated and have on record the following documents of each of the above listed employees (**LOCAL** - PSA certified Birth Certificate, Valid NBI Clearance, TIN, 2x2 picture and specimen signature. **FOREIGN** - Photocopy of passport from country of origin, Correct and valid work visa or permit, TIN, 2x2 picture and specimen signature)*
2. *That all information above is true and correct **(Page/s 1 to___).***

Approved by:

(To be filled up by the Authorized Representative. Please attach a copy of your valid ID)

NAME ***DATE***
(Please Sign over Printed Name)