



**INSTALLATION AND/OR OPERATION OF  
ELECTRONIC GAMING MACHINES  
NOTIFICATION FORM**

Page No.	Page 1 of 2
Form No.	GLDD-974
Revision No.	0
Effectivity	September 1, 2019

CRM Form No. 13

Use this form to notify PAGCOR regarding operation of Electronic Gaming Machines (EGMs) in the casino. Please accomplish this form by providing correct and complete information. The Licensee shall submit this form to GLDD at least **one (1) business day** prior to intended date of implementation.

**PLEASE NOTE THAT PAGCOR RESERVES THE RIGHT TO CONDUCT POST-AUDIT OF THE EGMs WHICH HAVE BEEN INSTALLED AND LAUNCHED INTO OPERATION IN THE CASINO.**

Licensee : \_\_\_\_\_  
 Casino Location: \_\_\_\_\_ Date : \_\_\_\_\_

Check the applicable box. If notification involves installation of EGMs, fill up Item A of Section A. If notification involves launching of EGMs into operation, fill up Item B of Section A.

**SECTION A: OPERATION OF EGMs (TO BE PROVIDED BY LICENSEE)**

**A. Installation of the following EGMs in the casino as detailed below:**

SM NO.	SERIAL NO.	TYPE (Link/SA)	Game Theme	Location	NUMBER OF EGMs		
					Current Qty. of EGMs in the Casino (a)	Qty. of New/Add'l. EGMs (b)	Total EGMs in the Casino After Installation (a+b)

*(Note: Please use additional sheet/s if the space provided above is not sufficient.)*

Installation date: \_\_\_\_\_

**B. Launching of the following EGMs into operation in the casino as detailed below:**

SM NO.	SERIAL NO.	TYPE (Link/SA)	Game Theme	PAGCOR Tag No.	Location in the Casino

*(Note: Please use additional sheet/s if the space provided above is not sufficient.)*

Launching date: \_\_\_\_\_

This is to certify that the stress test conducted on the above EGMs yielded favorable results.

\_\_\_\_\_  
 Signature over Printed Name  
 (PMT Representative)

\_\_\_\_\_  
 Date



**INSTALLATION AND/OR OPERATION OF  
ELECTRONIC GAMING MACHINES  
NOTIFICATION FORM**

Page No.	Page 2 of 2
Form No.	GLDD-974
Revision No.	0
Effectivity	September 1, 2019

We confirm and undertake to do the following:

- A stress test shall be conducted on the EGMs in order to ensure that actual machine settings will reflect the approved parameter settings and EGM transactions are captured by the Casino Management System. Stress test shall be conducted based on a test script which shall be prepared by the Licensee. The results of the stress test should be favorable prior to commercial operation of the EGMs.
- Surveillance camera that shall be installed by the Licensee to effectively monitor the abovementioned EGMs is compliant with Regulation 7 of the Casino Regulatory Manual.
- The installation of the EGMs is compliant with the gaming capacity ratio for EGMs which is three (3) slot machines for every two (2) Standard Rooms and Standard Room Equivalents and three (3) terminals for every Standard Rooms and Standard Room Equivalents for ETG machines.
- The installation and launching of the EGMs into operation shall be closely coordinated with Compliance Monitoring and Enforcement Department and the PAGCOR Monitoring Team.

**Name of Requestor:** \_\_\_\_\_ **Signature:** \_\_\_\_\_  
**Position Title:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**SECTION B: SUBMISSION INSTRUCTIONS**

Once Section A is completed, please submit this form to GLDD. Hard copies may be submitted directly to the GLDD office or scanned copies of the documents may be emailed using the e-mail address of the concerned licensed casino indicated below:

Gaming Licensing and Development Department  
 Philippine Amusement and Gaming Corporation  
 12<sup>th</sup> Floor, iMET BPO Tower, CBP-1A Metropolitan Park, Roxas Blvd, Pasay City  
 Tel. No. (02) 755-3199 / 755-3299 / 755-3999  
 E-mail addresses: gldd\_resortsworldmanila@pagcor.ph / gldd\_widuscasino@pagcor.ph  
 gldd\_oxfordprincesscasino@pagcor.ph / gldd\_fontanacasino@pagcor.ph  
 gldd\_casablancacasino@pagcor.ph / gldd\_bloomberryresorts@pagcor.ph  
 gldd\_fiestacasino@pagcor.ph

If submission of this notification form is done thru e-mail, the Licensee should ensure that it has been duly received and acknowledged by GLDD. The Licensee shall be notified by GLDD thru e-mail confirming receipt of this notification form. If no e-mail confirmation is received from GLDD, the Licensee should submit the notification form's hard copy directly to GLDD.

**SECTION C: ACKNOWLEDGMENT OF NOTIFICATION (TO BE FILLED UP BY GLDD)**

RECEIVED with REFERENCE NO. \_\_\_\_\_

**By:** **Printed Name:** \_\_\_\_\_ **Signature:** \_\_\_\_\_  
**Position Title:** \_\_\_\_\_ **Date:** \_\_\_\_\_