



**MOVEMENT OF GAMING TABLES
NOTIFICATION FORM**

Page No.	Page 1 of 2
Form No.	GLDD – 961
Revision No.	0
Effectivity	September 1, 2019

CRM FORM NO. 3

Use this form to notify PAGCOR regarding movement of gaming tables within the casino’s gaming area. 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 IMPLEMENTED MOVEMENT OF GAMING TABLES IN THE CASINO’S GAMING AREA.

Licensee : _____
Name of Casino : _____ Date : _____
Date of Implementation : _____

SECTION A: PROPOSED MOVEMENT OF GAMING TABLES (TO BE PROVIDED BY LICENSEE)

Please be informed of the movement of gaming tables within the casino’s gaming area as detailed below:

TABLE GAME	FROM		TO	
	TABLE NO.	PIT/AREA	TABLE NO.	PIT/AREA

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

Attached for reference is the revised camera layout for the abovementioned gaming tables that will be subjected to movements.

We confirm and undertake to do the following:

- A stress test shall be conducted on the gaming tables in order to ensure that table 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 gaming tables.
- Pre-approved game mechanics and table limits shall also apply for the said gaming tables.
- Surveillance camera that shall be installed by the Licensee to effectively monitor the abovementioned gaming tables is compliant with Regulation 7 of the Casino Regulatory Manual.
- The abovementioned undertakings shall be carried out in close coordination 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 send this form to GLDD along with the necessary attachments. 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:



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Gaming Licensing and Development Department
Philippine Amusement and Gaming Corporation
12th 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_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.

NOTE: If movement of gaming tables will entail re-designation, please accomplish Gaming Tables Re-Designation Notification Form (FORM NO. 4) and submit the same together with this form.

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

RECEIVED with REFERENCE NO. _____

By: Printed Name: _____ Signature: _____
Position Title: _____ Date: _____