



# CHANGE IN TABLE GAMES NOTIFICATION FORM

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Form No.	GLDD – 967
Revision No.	0
Effectivity	September 1, 2019

CRM FORM NO. 7

(FOR PAGCOR PRE-APPROVED TABLE GAMES ONLY)

*Use this form to notify PAGCOR regarding change in table games in the casino. Please accomplish this form by providing correct and complete information. The Licensee shall submit this form to the PMT prior to implementation.*

**PLEASE NOTE THAT PAGCOR RESERVES THE RIGHT TO CONDUCT POST-AUDIT ON THE CHANGE IN TABLE GAMES IN THE CASINO.**

Licensee : \_\_\_\_\_  
 Casino Location : \_\_\_\_\_ Date : \_\_\_\_\_  
 Date of Implementation : \_\_\_\_\_

**SECTION A: PROPOSED CHANGE IN TABLE GAMES (TO BE PROVIDED BY LICENSEE)**

Please be informed of the change in table games in the casino as detailed below:

LOCATION		FROM		TO	
Zone	Pit	Table Game Name	Table No.	Table Game Name	Table No.

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

We confirm and undertake to do the following:

- Pre-approved game mechanics and betting limits shall apply for each table game change.
- Standard procedures on table closing and opening as well as drop box change shall apply for each table game change.
- The abovementioned undertakings shall be carried out in close coordination with the Compliance Monitoring and Enforcement Department and the PAGCOR Monitoring Team.

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

**SECTION B: SUBMISSION INSTRUCTIONS**

Once Section A is completed, please submit this form to the PMT. Hard copies may be submitted directly to the PMT office. If submission of this notification form is done thru e-mail, the Licensee should ensure that it has been duly received and acknowledged by the PMT. The Licensee shall be notified by the PMT thru e-mail confirming receipt of this notification form. If no e-mail confirmation is received from the PMT, the Licensee should submit the notification form's hard copy directly to the PMT.



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### SECTION C: ACKNOWLEDGEMENT OF NOTIFICATION

(TO BE FILLED UP BY PMT UPON RECEIPT OF THE NOTIFICATION BUT PRIOR TO IMPLEMENTATION THEN FORWARDED TO GLDD)

RECEIVED BY THE PMT

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

### SECTION D: ACKNOWLEDGEMENT OF NOTIFICATION

(TO BE FILLED UP BY GLDD)

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

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