

When to use this form

You should use this form to give us the address of each of the premises you operate which contains machines liable for Machine Games Duty (MGD) for which you do not hold a relevant licence or permit.

Please write clearly in black ink and use capital letters.

If you need any help you can phone our helpline on **0845 010 9000** or go to **hmrc.gov.uk** and enter *Machine Games Duty* in the *Search* facility.

Send your completed form(s) to:

HMRC
National Registration Unit
Portcullis House
21 India Street
GLASGOW
G2 4PZ

To find out what you can expect from us and what we expect from you go to **www.hmrc.gov.uk/charter** and have a look at *Your Charter*.

Details of premises

1	Name of the business registered for MGD <input type="text"/>
2	Your acknowledgment reference or MGD registration number <i>Your MGD acknowledgement reference will be provided to you when/if you applied for MGD registration online</i> <input type="text"/>

<p>Address 1</p> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<p>Address 4</p> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
<p>Address 2</p> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<p>Address 5</p> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
<p>Address 3</p> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<p>Address 6</p> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

Details of premises *continued*

Address 7

Postcode

Address 11

Postcode

Address 8

Postcode

Address 12

Postcode

Address 9

Postcode

Address 13

Postcode

Address 10

Postcode

Address 14

Postcode

Declaration

I declare that to the best of my knowledge and belief the information I have given on this form and any accompanying documents is complete and correct.

Name

Signature

--

Date *DD MM YYYY*

--	--	--	--	--	--	--	--