

	APPLICATION FOR THE REFUND OF PERFORMANCE CASH DEPOSIT (PCD)	Page No.	Page 1 of 4
		Form No.	EGLD - 691
		Rev. No.	3
		Effectivity	July 29, 2026

EG Form No. 40

EGLD Reference No.: _____

SECTION A: GENERAL INSTRUCTIONS

1. Print this form and complete the necessary information in the designated spaces. Kindly ensure that all mandatory fields are filled out accurately and comprehensively. Failure to provide all required information may result in the return of your application. The processing of the PCD refund will commence once all the correct documentary requirements have been submitted.
2. Submit the original copy of the duly completed EG Form No. 40, along with the required supporting documentation, to the **Electronic Gaming Licensing Department (EGLD)**.
3. For any query regarding your application, you may call tel. no. 8522-0299, 8522-1357, 8522-1245, 8522-1324 loc 1569 or send an email to eGaming_Forms1@pagcor.ph.

SECTION B: APPLICATION DETAILS

Applicant / Entity Classification

- | | |
|--|---|
| ☐ Gaming Venue Operator | ☐ Support Service Provider |
| ☐ Gaming System Administrator | ☐ Payment Gateway Solution / Payment Channel |
| ☐ Game Affiliate | ☐ Marketing/Promotional Service |
| ☐ Game Aggregator | ☐ Customer Service |
| ☐ Game Content Provider | ☐ KYC / Player Membership System |
| | ☐ Independent Game Testing Laboratory |

1. Name of Applicant: _____
(as provided in the Gaming License / Certificate of Accreditation)

2. Address: _____
(as provided in the Gaming License / Certificate of Accreditation)

3. Gaming License / Accreditation Details:

License / Accreditation No : _____ Validity Date: _____
PTH No. (As Applicable): _____ Validity Date: _____

Game Offering/s: _____

Existing Brand/s: _____

Date of Approval of Revocation of GL / Non-Renewal of GL / Cancellation of Accreditation:

4. Reason for PCD Refund: _____

5. Authorized Representative: _____

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SECTION C: REQUIREMENTS FOR THE APPLICATION OF REFUND OF PCD

C-1 : GAMING VENUE OPERATOR

Submitted
Yes No

Documentary Requirements

- | | | |
|--------------------------|--------------------------|--|
| ☐ | ☐ | 1. Notarized Board Resolution signed by the majority of the Board of Directors signifying the request for refund of PCD and the assignment / appointment of the authorized representative to transact/sign the documents relative thereof. |
| ☐ | ☐ | 2. Original copy of corresponding PCD Official Receipt (O.R.) issued by PAGCOR, if PCD OR is not available, an Affidavit of Loss and a Board Resolution attesting the same shall also be submitted. |
| ☐ | ☐ | 3. Closing Inventory List of Gaming Equipment and Paraphernalia Form (EG Form 37) |
| ☐ | ☐ | 4. Transfer of Gaming Equipment Notification Form (EG Form No. 13) |
| ☐ | ☐ | 5. Notarized Notice of Removal of all related digital assets from all gaming terminals |
| ☐ | ☐ | 6. Notarized Notice of Removal of PAGCOR signages, stickers and marketing collaterals |
| ☐ | ☐ | 7. Notarized sworn affidavit, that the arrears with the Applicant's stakeholders of the gaming venue (i.e., rent, utilities, suppliers, salaries of employees) have been paid. |
| ☐ | ☐ | 8. Copy of latest General Information Sheet (GIS) and Beneficial Ownership Declaration form duly acknowledged by the SEC |
| ☐ | ☐ | 9. Original copy of Gaming License |
| ☐ | ☐ | 10. Copy of Certificate of Incorporation |
| ☐ | ☐ | 11. Other documents specific to the requesting Applicant, if any: _____ |

(To be accomplished
by EGLD)

C-2 : GAMING SYSTEM ADMINISTRATORS / GAME AGGREGATOR / SUPPORT SERVICE PROVIDER

Submitted
Yes No

Documentary Requirements

- | | | |
|--------------------------|--------------------------|---|
| ☐ | ☐ | 1. Notarized Board Resolution signed by at least the majority of the Board of Directors signifying the request for refund of PCD and the assignment / appointment of the authorized representative to transact/sign the documents relative thereto. |
| ☐ | ☐ | 2. Original copy of corresponding PCD Official Receipt (O.R.) issued by PAGCOR, if PCD OR is not available, an Affidavit of Loss and a Board Resolution attesting the same shall also be submitted. |
| ☐ | ☐ | 3. Notarized sworn affidavit stating the following: |
| ☐ | ☐ | i. That Applicant has notified its contracted PAGCOR-accredited entities on its service decommissioning following the cancellation of its accreditation. |
| ☐ | ☐ | ii. That the Applicant has removed all PAGCOR-related collaterals, including PAGCOR logo, and any displayed copy of accreditation certificate from its office premises. |
| ☐ | ☐ | iii. That the Applicant has removed all gaming-related digital assets from equipment / terminals and full deactivation of the EGS / OGP (for GSA) or service system (for GA and SSP) . |
| ☐ | ☐ | iv. That the arrears with the Applicant's stakeholders (i.e., rent, utilities, suppliers, salaries of employees) have been paid (<i>Not applicable to Payment Channel</i>). |
| ☐ | ☐ | v. That the Applicant acknowledges that the deactivation of EGS/OGP shall not diminish its liability for any unsettled player funds arising from its operations during the period of accreditation, and that it remains fully responsible for such obligations including any subsequently determined claims under applicable Philippine laws (For GSA). |

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☐	☐	4. Copy of latest General Information Sheet (GIS) and Beneficial Ownership Declaration form duly acknowledged by the SEC
☐	☐	5. Copy of Certificate of Incorporation
☐	☐	6. Release, Waiver and Quitclaim
☐	☐	7. Original copy of Certificate/s of Accreditation
☐	☐	8. Other documents specific to the requesting Applicant, if any: _____

(To be accomplished by EGLD)

C-3 : GAME CONTENT PROVIDER

Submitted		Documentary Requirements
Yes	No	
☐	☐	1. Notarized Board Resolution signed by the majority of the Board of Directors signifying the request for refund of PCD and the assignment / appointment of the authorized representative to transact/sign the documents relative thereto.
☐	☐	2. Original copy of corresponding PCD O.R. issued by PAGCOR, if PCD OR is not available, an Affidavit of Loss and a Board Resolution attesting the same shall also be submitted.
☐	☐	3. Closing Inventory List of Gaming Equipment and Paraphernalia Form (EG Form 37)
☐	☐	4. Transfer of Gaming Equipment Notification Form (EG Form No. 13)
☐	☐	5. Notarized sworn affidavit stating the following:
☐	☐	i. That Applicant has notified its contracted PAGCOR-accredited entities on its service decommissioning following the cancellation of its accreditation.
☐	☐	ii. That the Applicant has removed all PAGCOR-related collaterals, including PAGCOR logo, and any displayed copy of accreditation/PTH certificate from its office premises / live gaming studio set-up.
☐	☐	iii. That the Applicant has removed all gaming-related digital assets from equipment / terminals and fully deactivated its service system
☐	☐	iv. That the arrears with the Applicant's stakeholders (i.e., rent, utilities, suppliers, salaries of employees) have been paid.
☐	☐	6. Copy of latest General Information Sheet (GIS) and Beneficial Ownership Declaration form duly acknowledged by the SEC.
☐	☐	7. Copy of Certificate of Incorporation.
☐	☐	8. Release, Waiver, and Quitclaim.
☐	☐	9. Original copy of Certificate/s of Accreditation / Permit To Hold Gaming Equipment and Gaming Paraphernalia, as applicable.
☐	☐	10. Other documents specific to the requesting Applicant, if any: _____

(To be accomplished by EGLD)

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SECTION D: DECLARATION

By signing below, We declare that:

1. The information provided in this application, including all supporting documents, is accurate, truthful, and correct.
2. We agree to adhere to the provisions set forth in the guidelines.
3. We understand that incomplete submission of the requirements will cause the non-processing of the application.

Printed Name: _____ Signature: _____
(Authorized Representative)

Position-Title: _____ Date: _____

SECTION E: ACTION TAKEN (TO BE ACCOMPLISHED BY EGLD)

☐ **RETURNED APPLICATION** due to:

_____ Incomplete information

_____ Applicant has decided to withdraw its application

_____ Non-compliance with the submission of complete documentary requirements

☐ **RECEIVED FOR INITIAL ASSESSMENT**

Printed Name: _____ Signature: _____

Position Title: _____ Date: _____

Remarks:

The application has been received and verified for completeness of the required documentary submissions and is currently subject to initial evaluation. The results of the evaluation will be communicated to the applicant through the registered email address within two to three working days..

☐ **RECEIVED FOR PROCESSING with REFERENCE NUMBER:** _____

Printed Name: _____ Signature: _____

Position Title: _____ Date: _____