

Standard report for testing standards for land-based betting

Licensee	Name	Telephone number
	Address	
	Postal code and city	CVR-/SE-no.
	Contact person/E-mail address	

Certification dates	Previous certification	Current certification	Expected date for the <i>next</i> certification

Testing organisation	Name	Telephone number
	Address	
	Postal code and city	CVR-/SE-no.
	Contact person/E-mail address	
	Does the testing organisation have a valid accreditation?	
	Yes ____ No ____	Note: Accreditation documentation must be enclosed. Alternatively, a link to accreditation is added here:
Link to accreditation:		

Testing organisation's supplier

Must only be filled in if the testing organisation is using a supplier to perform the certification.

Name
Address
Postal code and city

The certification must be carried out by employees with sufficient qualifications and to adequate professional standards. The work must be supervised, and the certification report attested. A number of employees who in conjunction meet the requirements can supervise the work and attest the certification together. Fill in the section below with information on a supervisor, who fulfil the requirements for each section (a,b and c). This can be one supervisor fulfilling all the requirements or different employees for each section.

Requirements for supervisor

a) For testing of the Random Number Generator the supervisor shall have a relevant master's or PhD degree or in other ways be able to prove relevant qualifications

Name	Telephone number
E-mail address	
Education	Period
Other relevant qualifications	Period

b) For testing of other gambling functions the supervisor shall have a relevant educational background or in other ways be able to prove relevant qualifications

Name	Telephone number
E-mail address	
Education	Period
Other relevant qualifications	Period

c) Information concerning a supervisor with five years of professional experience in testing gambling systems or a similar closely related subject area for an accredited or certified organisation

Name	Telephone number
E-mail address	
Education	Period
Qualifications and experience with testing gambling systems	Period

Supplier

It is the responsibility of the licence holder that their supplier(s) are certified. The testing organisation shall ensure that the supplier(s) of the licence holder is/are certified to the Danish certification programme in a period covering the previous certification on to the current certification. Fill out the table below with information on any subcontractors' certifications.

Name of suppliers	Are all the requirements met? Yes/No

3 Requirements for the testing of gambling functionality

It shall be recorded whether a requirement has passed testing or not. If the test of the requirement is not passed it must be recorded below and **the appendix must be used**. Here the reason for the failed test must be described and when the failure was or is expected to be remedied. It is important that all failed tests are recorded, even if the failure has been remedied before the submission of the certification report. A description of the requirements can be found in the *Testing Standards for Land-based Betting*.

3.1 RNG requirements

3.1.1 Random Number Generator suitability for generating results

Requirements	Pass	Pass remedied	Pass risk assessment	No	N/A
		If these answers are used, submit the details in the appendix			
3.1.1.1					
3.1.1.2					
3.1.1.3					
3.1.1.4					
3.1.1.5					
3.1.1.6					
3.1.1.7					

3.1.2 Random Number Generator suitability for functionality other than generating results

Requirements	Pass	Pass remedied	Pass risk assessment	No	N/A
		If these answers are used, submit the details in the appendix			
3.1.2.1					
3.1.2.2					
3.1.2.3					
3.1.2.4					
3.1.2.5					
3.1.2.6					
3.1.2.7					

3.1.3 Degrees of freedom and mapping

Requirements	Pass	Pass remedied	Pass risk assessment	No	N/A
		If these answers are used, submit the details in the appendix			
3.1.3.1					
3.1.3.2					
3.1.3.3					
3.1.3.4					
3.1.3.5					
3.1.3.6					
3.1.3.7					

3.1.4 Error control procedures

Requirements	Pass	Pass remedied	Pass risk assessment	No	N/A
		If these answers are used, submit the details in the appendix			
3.1.4.1					
3.1.4.2					

3.1.5 Seeding

Requirements	Pass	Pass remedied	Pass risk assessment	No	N/A
		If these answers are used, submit the details in the appendix			
3.1.5.1					

3.1.6 Security

Requirements	Pass	Pass remedied	Pass risk assessment	No	N/A
		If these answers are used, submit the details in the appendix			
3.1.6.1					

3.2 Game execution

3.2.1 Accurate representation of chance

Requirements	Pass	Pass remedied	Pass risk assessment	No	N/A
		If these answers are used, submit the details in the appendix			
3.2.1.1					
3.2.1.2					
3.2.1.3					
3.2.1.4					

**Further
information**

Other information relevant for the Danish Gambling Authority shall be stated in the appendix.

Declaration and signature

By my signature below I declare that the information supplied in this certification report is correct. I acknowledge that missing information or deliberate misinformation can lead to the certification report being rejected. Any changes in the supplied information shall be forwarded to the Danish Gambling Authority without delay.

Date	Name	Signature
_____	_____

Date	Name	Signature
_____	_____