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**MBHASHE LOCAL MUNICIPALITY  
 BUSINESS ACT 1991**

**APPLICATION FOR A LICENCE TO CARRY ON A BUSINESS**

1. Name of licencing authority : MBHASHE LOCAL MUNICIPALITY

2. State whether this application is in respect of :

- (a) New licence
- (b) Relocation of business
- (c) Alteration of information on existing licence

3. Full name of applicant (name of individual company, partnership etc. in whose name the licence should be issued) .....

4. Trade name of business .....

5. Street address of business .....

6. Postal address of business .....

7. If the premises are leased, does the applicant have the approval of the landlord to conduct the business on the premises? (Yes/No) .....

8. Street address of the premises where goods will be stored .....

9. Licence(s) applied for .....
- 9.1. .... 9.3. ....
  - 9.2. .... 9.4. ....

10. Name and telephone number of contact person .....

11. If the application is for a business included in Item 1 & 2 of Schedule 1 of the Act, the full name, identification number and residential address of the person who will be in effective control of the business

11.1. Full names: .....

11.2. Address: .....

11.3. Identity Number: .....  
12. Was the applicant the holder of a hawker's licence which was withdrawn in the twelve months preceding this application (Yes/No) .....

13. The following documentation must be submitted with the application form:

13.1 Application for a Certificate of Acceptability from Amathole District Municipality - Environmental Health Services

13.2 Copy of ID Document / Passport

14. Has a liquor license been issued for the premises in question? (Yes/ No / N/A)

15. Has a liquor license been applied for in respect of the premises in question? (Yes/ No / N/A)

16. I, ..... **CERTIFY THAT THE INFORMATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.**

Capacity of Applicant (e.g Owner, Manager, etc.): .....

Signature of applicant ..... Date.....

Mbhashe Local Municipality

Official Stamp

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