



STELLENBOSCH MUNICIPALITY

Planning and Economic Development

APPLICATION FOR A LICENSE TO OPERATE A BUSINESS IN TERMS OF THE BUSINESS ACT OF 1991:

1. Licensing Authority:	S T E L L E N B O S C H M U N I C I P A L I T Y
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2. Indicate with an x whether this is a:			
» new application	<input type="checkbox"/>	» relocation of a business	<input type="checkbox"/>
» change of current license information	<input type="checkbox"/>		

3. Full Name of Applicant (name of individual, company, partnership etc, in whose name the license should be issued)	
Full Name:	

4. Trade Name of Business

5. Erf No and Street Address of Business Premises				
Erf No		Address		
			Code	

6. Postal Address of Business Premises				
			Code	

7. Street address of premises where goods will be stored				
			Code	

8. Licences(s) applied for:			
<input type="checkbox"/>	Food Preparation	Specify:	
<input type="checkbox"/>	Entertainment	Specify:	
<input type="checkbox"/>	Health Facilities	Specify:	

9. Name and telephone number of contact person			
Tel:		Fax:	
		Cell:	

10. Person who will be in effective control of the business									
Full Name:									
Id No									
Address									
							Code		

11.1 Is the applicant a holder of a hawker's license?				11.2 IF YES - has your license been withdrawn 12 months preceding this application?			
Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>

I, _____, the undersigned certify that the information herewith provided is true and correct to the best of my knowledge and belief.

Signature of applicant _____	Date	D	D	M	M	Y	Y	Y	Y

Capacity of Applicant _____

In terms of Section 3(2) of the business Act, 1991, I hereby agree to an extension of _____ days of the period in which the licensing authority shall take a decision on my application

Signature of applicant _____	Date	D	D	M	M	Y	Y	Y	Y

Receipt No _____