STELLENBOSCH MUNICIPALITY

Receipt No_____

Planning and Economic Development

APPLICATION FOR A SPAZA SHOP 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

2. Indicate with an x whether this is a:					
» new application		» relocation of a business		» change of current license information	

3. Full Name of Property Owner (name of individual, company, partnership etc, in whose name the license should be issued)	
Full Name:	
ID Nr	
Contact Nr	
Physical Address	

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/Spaza Shop

5. Erf No and Street Address of Business Premises/ Spaza Shop									
Erf No		Address							
						Code			

6. Street Address where goods are stored					
				Code	

8.Licences(s) applied for:			
	Food Preparation	Specify:	
	Sale of prepacked food and beverage items	Specify:	

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

10. Name of Person who will be in effective control of the business (Shop Manager)

Full Name:														
Id No														
Address														
												Code		

10.1 Details of Assistants

Full Name:														
Id No														
Address														
												Code		

Full Name:														
Id No														
Address														
												Code		

Full Name:	
Id No	
Address	
	Code
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11.1 Is the applicant a holder of a hawker's license?	11.2 IF YES - has your license been withdrawn 12 months preceding this application?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 ☐ No ☐	Yes ☐ No ☐
12.1 Does the applicant have approved building plans?	12.2 IF YES – attach a copy thereof 12.3 IF NO – apply accordingly
Yes ☐ No ☐	Yes ☐ No ☐
13.1 Is the applicant a holder of a zoning certificate not older than 6 months?	13.2 IF YES – attach a copy thereof 13.3 IF NO – apply accordingly
Yes ☐ No ☐	☐ No ☐
14.1 Is the applicant a holder of a fire certificate?	14.2 IF YES – attach a copy thereof 14.3 IF NO – apply accordingly
Yes ☐ No ☐	Yes ☐ No ☐
15.1 Is the applicant a holder of a certificate of acceptability?	15.2 IF YES – attach a copy thereof 15.3 IF NO – apply accordingly
Yes ☐ No ☐	Yes ☐ No ☐
16.1 Is the applicant a holder of a letter of consent if not the property owner?	16.2 IF YES – attach a copy thereof 16.3 IF NO – apply accordingly
Yes ☐ No ☐	Yes ☐ No ☐
17.1 Is the applicant a holder of a South African ID?	17.2 IF YES – attach a copy thereof 17.3 IF NO – apply accordingly
Yes ☐ No ☐	Yes ☐ No ☐
18.1 Is the applicant a holder of a Section 22/24 permit, valid visa, proof of citizenship?	18.2 IF YES – attach a copy thereof 18.3 IF NO – apply accordingly
Yes ☐ No ☐	Yes ☐ No ☐
19.1 Is the applicant a holder of proof of business location (i.e. lease agreement)?	19.2 IF YES – attach a copy thereof 19.3 IF NO – apply accordingly
Yes ☐ No ☐	Yes ☐ No ☐

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