

MAQUASSI HILLS LOCAL MUNICIPALITY

APPLICATION FOR BUSINESS PERMIT						
TO: THE CHIEF BUSINESS PERMIT & LICENSING						
BUSINESS TRADE NAME						
TAX PAYER'S NAME (PLEASE PRINT)	LAST NAME		FIRST NAME			
HOME ADDRESS OF BUSINESS OWNER	HOUSE NO		STREET:		TOWN:	
BUSINESS LOCATION:	STREET NO			STREET NAME		
ERF NO		TOWNSHIP:				
TAXPAYER'S IDENTIFICATION NUMBER						
REGISTRATION NUMBER					DATE:	
TELEPHONE NUMBER	FAX NUMBER:				CELL NUMBER:	

NAME & ADDRESS OF AUTHORIZED REPRESENTATIVE	LAST NAME:		FIRST NAME:		
	HOME ADDRESS:				
IF BUSINESS ESTABLISHMENT IS RENTED	SINCE WHEN		IS THE BUSINESS USING A SIGN BOARD	YES	NO
	MONTHLY RENTAL				
	FROM WHOM		AREA OF SIGN BOARD	m ²	
IF YOU HAVE OTHER EXISTING BUSINESS PERMIT/ LICENSE	EXISTING KIND OF BUSINESS	BUSINESS PERMIT NO.	BUSINESS LOCATION		
KIND OR NATURE OF BUSINESS/ ACTIVE APPLIED (PLEASE STATE OF NATURE OF BUSINESS IN ACCORDANCE WITH THE BUSINESS ACTIVITY					

CLASSIFICATION STANDARD)			
<p>THIS APPLICATION AND PERMIT/ LICENSE DOES NOT EXEMPT APPLICANT/ PERMITTEE FROM COMPLYING WITH THE REQUIREMENTS AND / SECURING THE PERMITS/ LICENSES/AUTHORITIES REQUIRED LAWS/ORDINANCE/RULES AND REGULATIONS AND HEREBY UNDERTAKE TO COMPLY THERE WITH.</p> <p>I/WE HEREBY CERTIFY THAT THE STATEMENT /INFORMATION GIVEN ABOVE ARE TRUE AND CORRECT TO MY/ OUR KNOWLEDGE.</p> <p>IN WITNESS WHEREOF, I/WE SET MY/OUR HAND THIS _____ DAY OF _____</p> <p>AT _____</p>			
CLEARANCE FROM RECORDS DIVISION:(TO BE FILLED UP BY RECORDS MANAGER	<p>SIGNED AND SWORN BEFORE ME ON THIS _____ DAY OF _____ AT _____ [PLACE].</p>		
ZONING CLASSIFICATION: (TO BE FILLED UP BY PLANNING OFFICE)	<p>ACTION TAKEN/REMARKS:</p>		
FOR OFFICE USE:			