



SCHEDULE

Form L.1

BUSINESS ACT, 1991

APPLICATION FOR LICENSE TO CARRY ON A BUSINESS

Submit application per area to (please indicate with x):

HERMANUS Ms M Middleton 028-313 8112 mmiddleton@overstrand.gov.za	HANGKLIP-KLEINMOND Ms K Gerber Du Toit 028-271 8415 kgerberdutoit@overstrand.gov.za	GANSBAAI-STANFORD Ms M Swart 028-384 8331 mswart@overstrand.gov.za
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1. **Name of licensing authority:**

2. **Indicate with an x whether this application is in respect of:**

- (a) a new license
- (b) a relocation of a business
- (c) an alteration of information on existing license

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

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4. **Trade name of business:**

5. **Street address of business premises:**

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6. **Postal address of business:**

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

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8. License(s) applied for:

9. Name and telephone number of contact person:

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10. If the application is for a business included in Item 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:

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.....

11. Was the applicant the holder of a hawker’s license which was withdrawn in the twelve months preceding this application: (Yes / No)

12. I, certify that Information contained in this application is true and correct to the best of my knowledge and belief.

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 make a decision on my application.

Signature of Applicant: Date:

Payment of application fee may be paid in cash at the cashiers’ office in the area as marked above or alternatively an electronic payment to the following bank account *(please send proof of payment to the relevant official for the area as indicated on pg 1):*

ABSA, Public Sector: Western Cape, Universal Branch Code: 632005: Account No. 3220000035. Reference: Applicant Name & Business License

Business License	R1 131.00	2024 0627 099421
Hawkers’ License	R406.00	2024 0627 099421

FOR OFFICIAL USE:

Application Status:

Confirmed	
Yes	No
<i>Mark with X</i>	

Amount paid: R (*Business License*)

R (*Hawkers' License*)

Type of License	Amount	B-Key (Cost Code)
Business License	R1 131.00	2024 0627 099421
Hawkers' License	R406.00	2024 0627 099421

Receipt number:

Hermanus Hangklip / Kleinmond Gansbaai / Stanford

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Divisional Manager: Strategic Support Services

Date: 20.....