



Overstrand Spaza Shop Registration Form

HERMANUS
Ms S Lukas
028-313 8968
slukas@overstrand.gov.za

HANGKLIP-KLEINMOND
Ms K Gerber Du Toit
028-271 8415
kgerberdutoit@overstrand.gov.za

GANSBAAI-STANFORD
Ms S de Villiers
028-384 8364
sdevilliers@overstrand.gov.za

SECTION A: BUSINESS OWNER DETAILS

Full Name and Surname			
Identity Number/Passport number			
Physical Address of Business			
Postal Address of Business			
Cell phone number		Email Address:	
Disability status of business owner			
Nature of goods sold:			

SECTION B: PROPERTY OWNER DETAILS

Full Name and Surname			
Identity Number			
Physical Address			
Postal Address			
Cell phone number		Email Address:	

SECTION C: PROPERTY DETAILS

Erf / Portion and Farm no.		Area	
Extent of Spaza Shop (m ²)			
Description of the nature of the Spaza Shop structure			
Current Zoning		Extent	m ² /ha

SECTION D: CITIZEN STATUS

If the business owner is not a Sout African citizen, the following documentation must be attached to the registration form:

(a)	<i>A copy of Section 22 Asylum Seeker Permit if applicable;</i>
(b)	<i>A copy of the Section 24 Refugee Permit, if applicable;</i>
(c)	<i>A valid visa which permits foreign nationals to conduct business in the Republic of South Africa</i>

ATTACH THE FOLLOWING DOCUMENTATION TO THE REGISTRATION FORM:

1.	An affidavit stating that the business owner is not engaged in the trade of illegal goods, as defined in this By-Law and that their business will operate according to the applicable norms and standards.
2.	Layout plan/ building plan to scale of business license premises (only where applicable)
3.	Power of Attorney from the property owner (only where applicable)

APPLICANT SIGNATURE:

DATE:

