



Matsapha Town Council
Corner Police College Rd & Airport Rd
Matsapha
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**APPLICATION FOR A HEALTH CLEARANCE CERTIFICATE
IN TERMS OF THE PUBLIC HEALTH ACT 5/1969, PART IV, 26 (4)**

TRADING LICENSE APPLICATION PROFILE

APPLICANT _____

POSTAL ADDRESS: _____

PHYSICAL ADDRESS: STREET: _____ LOT No.: _____
BUILDING NAME.: _____ OFFICE/SHOP No.: _____

CONTACT DETAILS: TELEPHONE: _____ CELL: _____

EMAIL ADDRESS: _____

NAME OF PERSON IN CHARGE OF BUSINESS: _____

OWNER OF PREMISES: _____

PURPOSE OF APPLICATION: GRANT RENEWAL TRANSFER AMENDMENT OTHER(specify)

TYPE OF TRADING LICENSE _____

TRADING NAME/STYLE: _____

DATE APPLICATION FILED: ____/____/____

HEARING NOTICE ATTACHED (Date ____/____/____): YES NO

PROOF OF AGREEMENT WITH OWNER (IF YOU ARE **NOT** THE OWNER): YES NO

PROOF OF OWNERSHIP (IF YOU ARE THE OWNER): YES NO

FULL APPLICANT'S NAME:..... SIGNATURE:..... (Of person filling this Form)

APPLICATION RECEIVED BY: _____ SIGNATURE: _____

LAND-USE PERMITTED: YES NO IF NO, CAN CLIENT APPLIES FOR SPECIAL CONSENT: YES NO

ANY OTHER SPECIFIC CONDITIONS:

SIGNATURE :(Town Planning Unit) DATE: ____/____/____

**NB: No application will be processed without a copy of the hearing notice issued by the Ministry of Commerce Industry & Trade (Licensing Officer)
(A COPY OF THE NEWSPAPER NOTICE WILL BE ACCEPTED)**

APPLICATION PROCESSING FEE

(Refer To Service Charges Bye-Laws)

CATEGORY:	1	2	3	4	5	6	7
FEE:	E0.00	E60.00	E600.00	E200.00	E300.00	E1,100.00	E1, 100.00

RECEIPT No.: _____ DATE: ____/____/____ Signature of Accounts Officer: _____

DEPARTMENTAL ANALYSIS OF PREMISES

2. ENGINEERING DEPARTMENT

TOWN PLANNING SECTION

ZONING: _____

STRUCTURE (PLEASE TICK):

- PERMANENT
- TEMPORARY
- APPROVED
- NOT APPROVED

COMMENTS: _____

RECOMMENDATION: _____

DATE: ____ / ____ / ____ SIGNATURE: _____
TOWN PLANNER

WORKS SECTION

STRUCTURE: NEW OLD
 SOUND UNSOUND

PREMISES WERE ISSUED WITH A FINAL OCCUPATION CERTIFICATE:

YES NO

DATE FINAL OCCUPANCY CERTIFICATE ISSUED: ____ / ____ / ____

COMMENT(S): _____



Applications will only be processed once they have gone through the office of the Licensing Officer at the Ministry of Enterprise & Employment

RECOMMENDATION: _____

DATE: ____ / ____ / ____

SIGNATURE: _____

BUILDING INSPECTOR



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