

**ANNEXURE W1  
APPLICATION FOR  
TEMPORARY AMNESTY REGISTRATION**  
KwaZulu-Natal Liquor Licensing Act, 2010  
(Act No. 6 of 2010)

**KZNLA 23**

<b>DATE STAMP</b>
<b>KZN LIQUOR</b>
<b>AUTHORITY</b>

Amount: R .....

Receipt No.: .....

Date: .....

**APPLICATION IN TERMS OF REGULATION 47  
FOR AMNESTY REGISTRATION**

APPLICATION PREPARED BY:

1. Applicant:

2. Person acting on behalf of the applicant:   
**(attach Power of Attorney)**

3. If 2 above is applicable, provide the following details in respect of the person acting on behalf of the applicant:

(a) Name and surname of person:  
.....  
.....

(b) Postal Address: .....  
.....

(c) Contact details of applicant or person acting on behalf of applicant:

Cell:	Tel.:	Fax:	Email:
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<b><u>PARTICULARS OF APPLICANT</u></b>
<b>(a) Identity number (individual):</b>
<b>(b) Registration number (entity):</b>
<b>(c) Residential address:</b>

<b>(d) Business address:</b>			
<b>(e) Postal address:</b>			
<b>(f) CONTACT DETAILS:</b>			
Cell:	Tel.:	Fax:	Email:

<b>PARTICULARS OF BUSINESS</b>	
1.	Under what name is the business conducted?
2.	Since what date has the abovementioned business been conducted?

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I declare/truly affirm that the information furnished in this application and in the documents attached to it, are true and correct.

.....  
Date

.....  
*Signature (of applicant or person authorised to sign application)*

I certify that this declaration has been signed and sworn to/affirmed before me at..... on this ..... day of....., 20.....

by the applicant/person authorised to sign application who acknowledged that –

- (a) he/she knows and understands the contents of this declaration;
- (b) he/she has no objection to taking the prescribed oath/affirmation; and

(c) he/she considers the prescribed oath to be binding on his/her conscience, and that he/she uttered the following words –

“I swear that the contents of this declaration are true, so help me God.”/“I truly affirm that the contents of this declaration are true”.

.....

*Commissioner of Oaths*

.....

*Affirmation*

Full names and surname: .....

Business address: .....

Designation: .....

Area for which appointment is held: .....

Office held if appointment is *ex officio*: .....