## **ANNEXURE H2**

## APPLICATION IN TERMS OF REGULATION 44 FOR APPOINTMENT OF NATURAL PERSON TO MANAGE AND BE RESPONSIBLE FOR BUSINESS TO WHICH LICENCE RELATES

KwaZulu-Natal Liquor Licensing Act, 2010 (Act No. 6 of 2010)

**KZNLA8** 

A. Application made by:
B. Name of the Licensed Premises and Licence Number:
C. Name of the Metropolitan Municipality/District Municipality/Local Municipality
where the Licensed Premises are situated:
D. Address for service of documents:
E. Contact Details:

F. Documents required to be attached to the application:

(a) Certified copy of identity document.	Yes No			
(b) Police Clearance Certificate (SAPS 69).  Yes  No				
(c) Written contract of employment between the and the prospective manager or a resolution	Yes No			
(d) Valid work permit.	Yes No			
Particulars of the person who is now being approximately (a) Full names and surname:  (b) Identity number:  (c) Relationship between the proposed management of the proposed management	er and the licence holder:			
Is the proposed manager a person who –	<b>-</b>			
(a) is an unrehabilitated insolvent;	If the answer to the above is affirmative kindly provide details.			
(b) is a minor;	Yes No			
(c) is domiciled in the Republic;	If the answer to the above is affirmative kindly provide details.			
(d) has, in the Republic or elsewhere in the preceding 10 years, been sentenced for any offence to imprisonment without an option of a fine; or	Yes No  If the answer to the above is affirmative kindly provide details.			
(e) has, as the proposed manager, in the preceding 10 years been convicted of an offence in terms of the Liquor Act, 1989 (Act	Yes No			

No. 27 of 1989), or the Criminal Procedure Act, 1977 (Act No. 51 of 1977), irrespective of the sentence imposed, and was, within 3 years after the conviction, again convicted of an offence in terms of any of the abovementioned two Acts and was then sentenced therefore to a fine of not less than R200 or to imprisonment without the option of a fine?	If the answer to the above is affirmative kindly provide details.
Date of appointment	
I declare/truly affirm that the information furnish to it, is true and correct.	hed in this form and in the documents attached
Date:	
Signature of holder of the licence or person authorised to sign this form	
I certify that this declaration has been si	igned and sworn to/affirmed before me at
on this	day of, 20
by the holder of the licence/person authorised	to sign the form who acknowledges that –
<ul><li>(a) he/she knows and understands the c</li><li>(b) he/she has no objection to taking the</li><li>(c) he/she considers the prescribed oath</li><li>he/she uttered the following words:</li></ul>	

"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

Full names and surname:	 	
Business address:		
Designation:		
Area for which appointment is held:	 	
Office held if appointment is ex officio:		