FORM 4  
APPLICATION IN TERMS OF SECTION 18 OF THE ACT FOR AN OCCASIONAL LICENCE

**[Reg. 6]**

|  |  |  |
| --- | --- | --- |
|  | **Date-stamp of Board** |  |
|  |  | **For official use** |
|  |  | Amount R ……………................................ |
|  |  | Receipt no. …………….............................. |
|  |  | Date ……………......................................... |

|  |  |
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| **NORTHERN CAPE LIQUOR ACT, 2008** | |
| **INDEX** | |
| ***Description of document*** | ***Annexure*** |
| (i) Application | Form 4 |
| (ii) Comprehensive written representations [Reg. 8(2)] | A |
| Application prepared by………......................................................................................................................... | |
| Postal address………....................................................................................................................................... | |
| Telephone no. …….......................................................................................................................................... | |
| 1 *(a)* Full name of applicant……….......................................................................................................... | |
| *(b)* Age…….......................................................................................................................................... | |
| *(c)* Identity number or in the case of a company or close corporation, its registration number  ………………………………………………………………………………………………………….…… | |
| *(d)* Residential address or address of registered office……………...................................................... | |
| *(e)* Business address and location of the premises to which the application relates (place where the occasion is to take place)  ………………………………………………………………………………………………...................... | |
| *(f)* Postal address………..................................................................................................................... | |
| *(g)* Business telephone number…………............................................................................................. | |
| [Delete *(b)* if applicant is not a natural person] | |
| 2 State the dates upon and hours during which such sale will take place  ……...............................................................................................................................................………... | |
| 3 State the date or dates in the current year during which an occasional licence was granted –  (a) in respect of the premises concerned;  …….................................................................................................................................................      (b) to the applicant.  ……................................................................................................................................................. | |

|  |  |
| --- | --- |
| I declare/truly affirm that the information furnished in this application is true. | |
| Date.................................................................. | ............................................................................ *Signature of applicant or person authorized to sign application* |
| I certify that this declaration has been signed and sworn to/affirmed before me at……………..................this ...................................... day of..........................................................by the applicant/person authorized to sign application who acknowledged that – | |
| (i) he/she knows and understands the contents of this declaration; | |
| (ii) he/she has no objection to taking the prescribed oath/affirmation; and | |
| (iii) 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* |  |

|  |
| --- |
| Full name…….................................................................................................................................................. |
| Business address……….................................................................................................................................. |
| Designation……............................................................................................................................................... |
| Area for which appointment is held………....................................................................................................... |
| Office held if appointment is *ex officio……….*.................................................................................................. |