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

**[Reg. 6]**

|  |  |  |
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|  | **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.  ……................................................................................................................................................. |

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| 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* |  |

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