FORM 12
APPOINTMENT IN TERMS OF SECTION 33(1) OR (2) OF THE ACT OF A NATURAL PERSON TO MANAGE AND BE RESPONSIBLE FOR THE BUSINESS TO WHICH THE LICENCE RELATES

**[Reg. 53(1)]**

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| **NORTHERN CAPE LIQUOR ACT, 2008** |
|  | Liquor Board’s Reference no. ….……..................................................... |
| **INDEX** |
| ***Description of document*** | ***Annexure*** |
| Appointment  | Form 12 |
| Form completed by…...………......................................................................................................................... |
| Postal address………....................................................................................................................................... |
| Telephone no. …….......................................................................................................................................... |

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| 1 Under what name is the licensed business conducted?………………………………………………………. |
| 2 In which municipality is the premises referred to in paragraph 1, situated?…………................................. |
| 3 State the following particulars of person whose appointment has been terminated: |
|  *(a)* Full name……................................................................................................................................. |
|  *(b)* Identity number……….................................................................................................................... |
|  *(c)* Date of termination of appointment………….................................................................................. |
| 4 State the following particulars of person now appointed: |
|  *(a)* Full name………............................................................................................................................. |
|  *(b)* Age…….......................................................................................................................................... |
|  *(c)* Identity number……….................................................................................................................... |
|  *(d)* Relationship between him or her and the person who is the holder of the licence…………........... ………………………………………………………………………………………………………………. |
|  *(e) (*i*)* Is he or she a person who - |  |  |  |
|  (*aa*) has in the Republic or elsewhere in the preceding 10 years been sentenced for any offence to imprisonment without the option of a fine? |  |  |  |
|   | Yes |  | No |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  (*bb*) has in the preceding 10 years been convicted of an offence in terms of this Act or the National Liquor Act, irrespective of the sentence imposed, and was within 5 years after the conviction again convicted of an offence in terms of any of the above-mentioned two Acts and was then sentenced therefor to a fine of not less than R200 or to imprisonment without the option of a fine? |  |  |  |
|  | Yes |  | No |
|  |  |  |  |
|  (*cc*) is not domiciled in the Province? | Yes |  | No |
|  |  |  |  |
|  (*dd*) an unrehabilitated insolvent? | Yes |  | No |
|  |  |  |  |
|  (*ee*) is a minor? | Yes |  | No |
|  |  |  |  |
|  (ii) If any of the questions in subparagraph (i) have been replied to in the affirmative, provide full details…………………......................................................................................................(Use an annexure if necessary) |
|  *(f)* Date of appointment………............................................................................................................. |

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| I declare/truly affirm that the information furnished in this Form and in the documents attached to it, is true. |
| Date........................................................................ | ...............................................................................*Signature of the holder of the licence or person authorized to sign Form* |
| I certify that this declaration has been signed and sworn to/affirmed before me at ……..............................this ..................................................................... day of ........................................................... by the holder of the licence/person authorized to sign Form 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……….*.................................................................................................. |