



SENQU LOCAL MUNICIPALITY

**ANNUAL APPLICATION FOR A LICENSE TO CARRY ON A BUSINESSES
IN TERMS OF THE BUSINESS ACT NO. 71 OF 1991**

(a) New License <input type="checkbox"/>	(b) Relocation of Business <input type="checkbox"/>	(c) Renewal of Business License <input type="checkbox"/>
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(a) Micro <input type="checkbox"/>	(b) Small <input type="checkbox"/>	(c) Medium <input type="checkbox"/>
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SECTION A	
Customer Type	Informal Business <input type="checkbox"/> Registered Business <input type="checkbox"/>
Company Name	
Company Registration Number	
Sector	
Services Offered	
SECTION B	
Title	
Surname	
Name(s)	
Nationality	South African <input type="checkbox"/> Non-South African <input type="checkbox"/>
Identity Type	ID Book/Smartcard <input type="checkbox"/> Passport/Permit <input type="checkbox"/>
Identity Number	
Passport/Asylum seeker permit number	
Passport/Asylum seeker permit expiry date	

SECTION C	
Personal Contact Number	
Business Contact Number	
Email Address	
Home Address	
Town	
Postal Code	
SECTION D	
BUSINESS INFORMATION	
Business Name	
Business Address	
Erf Number	
Suburb/Village	
Town	
Postal Code	
Property Ownership	Owner <input type="checkbox"/> Tenant <input type="checkbox"/>
If Tenant, Indicate Owner Details	
Do you have a title deed/lease agreement?	Yes <input type="checkbox"/> No <input type="checkbox"/>
SECTION E	
Business License Type	Food <input type="checkbox"/> Entertainment <input type="checkbox"/> Accommodation <input type="checkbox"/> Health and Wellness <input type="checkbox"/> Hawker <input type="checkbox"/> Cosmetic Services
Food License Options	Fast Food <input type="checkbox"/> Catering <input type="checkbox"/> Liquor <input type="checkbox"/> Other: <input style="width: 100%;" type="text"/>
Specify Sector and Services	

APPLICATION DETAILS

Date Of Submission	
Applicant Name and Surname	
Applicant Contact Number	
Signature	

I _____ hereby agree to abide by all legislation requirements and am aware my license may be revoked on failure to do so with no compensation of any fees paid. I, being the legal owner or acting as the legal consent of the owner certify that the information contained in this application is true and correct to the best of my knowledge and belief. I am also aware that if there are any outstanding service or rates accounts on my name, the Senqu Municipality reserves the right to approve this application subject to these accounts being paid in full.

Signature: _____ Date: _____

FOR OFFICE USE ONLY

Date received: _____ Received by (Name) _____

Area name: _____ Proof of Payment(R) _____

Is erf no correct: _____ is zoning correct: _____

All documents received:

Yes	NO
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Indicate outstanding documents:

CONFIRMATION OF LAND USE RIGHTS

Current Zoning	
Additional use rights	
Floor area of the proposed establishment	
Is the proposal in line with the current land use rights?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Recommendations, in cases where the proposal does not align with current land use rights	
Official Responsible	
Signature and Date of Submission	

COMPLIANCE WITH NATIONAL BUILDING REGULATIONS AND BUILDING STANDARDS ACT 103 OF 1977 AS AMENDED.

Structural Condition / Approved Building Plan, where applicable.	
Approved Signage, where applicable.	
Fire Requirements Compliance	
Electrical Requirements Compliance	
Health Requirements Compliance	
Approved/ Not Approved	
Official Responsible	
Signature and Date of Submission	

FINANCE REVENUE COMPLAINE

Account Balance	
Account Overdue Period	30 days <input type="checkbox"/> 60 days <input type="checkbox"/> 90 days + <input type="checkbox"/>
Does the business have a signed payment arrangement with Senqu Revenue?	
Recommendation	
Official Responsible	
Signature and Date of Submission	

REQUIRED DOCUMENTS CHECKLIST

➤	A certified copy of Identification document /Passport and a permit if you are not a South African citizen
➤	CIPC Company Registration Certificate
➤	Proof of ownership of business premises/Lease Agreement / Title Deed
➤	Confirmation of Land Use Rights
➤	Proof of Address
➤	Latest municipal rates account/ proof that a repayment agreement / Cllr letter indicating that rates are not applicable.
➤	Approved Environmental Health Report (If applicable)
➤	Eastern Cape Liquor Board License (If applicable)
➤	Completed Business Licensing Application Form
➤	Proof of Payment

Table 2: The South African definition of SMMEs

Column 1	Column 2	Column 3	Column 4
Sectors	Size or class of enterprise	Total full-time equivalent of paid employees	Total annual turnover
Agriculture	Medium	51-250	< 35.0 million
	Small	11-50	<17.0 million
	Micro	0-10	<7.0 million
Mining and Quarrying	Medium	51-250	<210.0 million
	Small	11-50	<50.0 million
	Micro	0-10	<15.0 million
Manufacturing	Medium	51-250	<170.0 million
	Small	11-50	<50.0 million
	Micro	0-10	<10.0 million
Electricity, Gas and Water	Medium	51-250	<180.0 million
	Small	11-50	<60.0 million
	Micro	0-10	<10.0 million
Construction	Medium	51-250	<170.0 million
	Small	11-50	<75.0 million
	Micro	0-10	<10.0 million
Retail, motor trade and repair services	Medium	51-250	<80.0 million
	Small	11-50	<25.0 million
	Micro	0-10	<7.5 million
Wholesale	Medium	51-250	<220.0 million
	Small	11-50	<80.0 million
	Micro	0-10	<20.0 million
Catering, Accommodation and other Trade	Medium	51-250	<40.0 million
	Small	11-50	<15.0 million
	Micro	0-10	<5.0 million
Transport, Storage and Communications	Medium	51-250	<140.0 million
	Small	11-50	<45.0 million
	Micro	0-10	<7.5 million
Finance and Business Services	Medium	51-250	<85.0 million
	Small	11-50	<35.0 million
	Micro	0-10	<7.5 million
Community, Social and Personal Services	Medium	51-250	<70.0 million
	Small	11-50	<22.0 million
	Micro	0-10	<5.0 million