



ENVIRONMENTAL HEALTH DEPARTMENT

APPLICATION FORM FOR TRADING LICENSE INSPECTION

CATEGORY 5: For outlets that sell non-perishable items and provide non-food related services such as hiring services, dressmaking, shoe repairs, barber or hairdresser, caterer, dealer in livestock, pottery, handcraft, disinfectant/fumigator, dealer in bones and used goods.

DATE: _____

RECEIPT NO: _____

INSPECTION FEE: E75.00

RE-INSPECTION FEE:150.00

COMPANY NAME _____

TRADING NAME/BUSINESS STYLE _____

NAME OF PERSON IN CHARGE OF BUSINESS _____

POSTAL ADDRESS _____

PHYSICAL ADDRESS: _____, STREET: _____, LOT No: _____

BUILDING NAME _____, OFFICE/UNIT No: _____

CONTACT NUMBER: TEL: _____ FAX: _____, CELLPHONE _____

EMAIL ADDRESS: _____

TYPE OF TRADING LICENCE _____

PURPOSE OF APPLICATION: GRANT RENEWAL TRANSFER OTHER

SPECIFY (IF OTHER) _____

DATE OF LICENCE HEARING _____

SIGNATURE OF APPLICANT _____

NB: PLEASE ATTACH

- A copy of your lease agreement
- A copy of hearing notice issued by the Ministry of Commerce
- A copy of a special consent/home occupation permit if in a residential area

FOR OFFICIAL USE ONLY

**PLANNING DEPARTMENT
COMMENTS**.....

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Signature..... Date..... Designation.....

**INSPECTOR OF WORKS
COMMENTS**.....

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Signature..... Date..... Designation.....

**PUBLIC HEALTH AND ENVIRONMENT DEPARTMENT
COMMENTS**.....

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Signature..... Date..... Designation.....