



PREMISES:

APPLICANT:

CONSULTANT:

BANK REFERENCE NUMBER:

LODGEMENT DATE:/..... /20.....

SECTION 41 CHECKLIST: NEW APPLICATION

No.	Description	Yes	No	N/A
1.	A duly signed and completed application form initialled on each and every page (in duplicates)			
2.	Proof of payment of the application fee to the allocated reference number			
3.	An original or certified copy of the Broad Based Black Economic Empowerment verification certificate , if the applicant is a legal business entity			
4.	An original or certified copy of the business or trading licence from Municipality			
5.	A certified copy of a title deed or lease agreement or permission to occupy			
6.	An original or certified copy of written consent from the relevant authority for the owner and/or occupier of the premises to trade in liquor			
7.	A Floorplan of the proposed premises as well as colour photographs			
8.	An original or certified copy of a certificate issued by the SAPS valid as at date of lodgement of application for a period in excess of three months from the date of issue by the SAPS;			
9.	A valid and active tax clearance certificate issued by the South African Revenue Services valid for one year from the date of lodgement of the application;			
10.	A detailed security plan			
12.	Declare under oath or truly affirm at the end of the said form that the information contained therein, is true and correct			
13.	Written Representation with a social responsibility plan			
14.	Description of premises (material, demarcations, rooms, measurements etc.)			
15.	An indication of the total occupation capacity of patrons , seated and standing			
16.	Certified copy of Identity document & Company Registration certificate (if applicable)			

This document is to acknowledge receipt of the marked documents submitted. The documents will be forwarded to the processing section for the processing and checking for compliance in the application.

NOTES:

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Signed by:

ANNEXURE A
APPLICATION FORM
 KwaZulu-Natal Liquor Licensing Act, 2010
 (Act No. 6 of 2010)

DATE STAMP
KZN
LIQUOR
AUTHORITY

KZNLA 1

Amount: R

Receipt No.:

Date:

INSTRUCTIONS

1. Read these instructions and every question carefully before answering and follow any specific instruction which may be given in respect of certain questions.
2. Answer every question in full. If you fail to answer any question or give incomplete answers or fail to submit all the additional information and documentation required, your application may be rejected.
3. If a question does not apply to you, write "N/A" (for "Not Applicable") in the space provided. If there is nothing to disclose about a particular question, write "None" in the space provided. If an alteration is made to an answer, sign in full next to the alteration.
4. All answers on the forms, except signatures, must be typed or neatly printed in capital letters in black ink. On completion, each page of this form must be signed in full in the space provided at the bottom of each page.
5. Application forms must be completed by the applicant or a person designated by the applicant.
6. All original completed application forms and all the additional required information and documentation, which must be certified copies plus one copy of all pages, including all supporting documentation, must be submitted.
7. If you need additional space to answer any question, please use additional pages but be sure to indicate the number(s) of the question(s) you are answering on these additional pages and clearly cross reference the additional information with the relevant questions.
8. All dates must be in the following format: Day/Month/Year.
9. All applications must be accompanied by the requisite copy of the payment receipt of the application fee.
10. All applications must be submitted to the following address:

<p>Office of the Chief Executive Officer 22 Dorothy Nyembe Street 1st Floor, The Marine Building Durban 4000 Telephone: (031) 302 0600/38 Fax: 086 627 4734 website: www.kznlqa.co.za</p>
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APPLICATION FOR LICENCE IN TERMS OF SECTION 41(1)

(PART A) On-consumption in terms of section 39(a)	
Off-consumption in terms of section 39(b)	
(PART B) Special events permit in terms of section 39(c)	
(PART C) Micro-manufacturing in terms of section 39(d)	

(Indicate the category of licence application that you intend to apply for by marking the relevant square with an X)

**INDEX
Description of document**

Annexures:

- (i) Application KZNLA 1 Annexure A
- (ii) Comprehensive written representations or motivation in terms of section 41(2) A
- (iii) Plan of the premises with dimensions in terms of section (41)(2)(e) B
- (iv) Description and photographs of the premises C
- (v) Documents required to be attached to application in section (41)(2)(a – l), in terms of regulation 3

Application prepared by:

- 1. **Applicant**
- 2. **Person acting on behalf of the applicant**
(attach Power of Attorney)
- 3. **If number 2 is applicable, please provide the following details:**
 - (a) Name and surname of person:
 -
 - (b) Postal address:
 -
 - (c) Contact details:
 - (d) Cell no.:
 - (e) Landline no.:
 - (f) Fax no.:

(g) Email address:

<u>PARTICULARS OF APPLICANT</u>			
1.(a) Full names and surname of applicant:			
(b) Age of applicant:			
(c) Identity number/Company registration number of applicant:			
(d) Residential address of applicant:			
(e) Business address of applicant:			
(f) Postal Address of applicant:			
(g) District Municipality:			
(h) Local Municipality:			
(i) Business contact details:			
Cell:	Tel.:	Fax:	Email:
<p>2.(a) Is applicant a person who –</p> <p style="margin-left: 40px;">(i) has, in the Republic or elsewhere, in the preceding 10 years been sentenced for any offence to imprisonment without the option of a fine; <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p style="margin-left: 40px;">(ii) has, in the preceding 10 years, been convicted of an offence in terms of the Liquor Act, 1989 (Act No. 27 of 1989), or the KwaZulu-Natal Liquor Licensing Act, 2010 (Act No. 6 of 2010), irrespective of the sentence imposed and was, within three years after the conviction, again convicted of an offence in terms of any of the abovementioned two Acts and was then sentenced therefore to a fine of not less than R200 or to imprisonment without the option of a fine; <input type="checkbox"/> Yes <input type="checkbox"/> No</p>			

(iii) is a South African citizen;

Yes No

(iv) if not, state the country of origin and submit a valid work or business permit

from Home Affairs:

Yes No

(v) is an unrehabilitated insolvent;

Yes No

(vi) is a minor;

Yes No

(vii) is the spouse of a person contemplated in subparagraphs (i), (ii) or (iv); or

Yes No

(viii) has been committed in terms of the Mental Health Act, 1973 (Act No. 18 of 1973), or the Mental Health Care Act 2002, (Act No. 17 of 2002)?

3.(a) If the applicant is a legally registered company, close corporation, partnership, co-operative, association or trust, state whether a person contemplated in subparagraph (a) –

(i) has a controlling interest in such a company, close corporation, co-operative, association or trust;

Yes No

(ii) is a partner in such a partnership; or

Yes No

(iii) is the main beneficiary under such trust?

Yes No

(b) If any of the questions in subparagraph (a) have been replied to in the affirmative, provide the legal documents establishing the specific legal entity referred to in (a) above; together with the resolution signed by all members of such entity authorising this application.

(Use an annexure if necessary)

4.(a) State the name, identity number and address of each person, including the applicant, who will have any financial interest in the business, and in each case the nature and extent of such interest. If the applicant is a public company, statutory institution or a co-operative, as contemplated in The Co-operatives Act, 1981 (Act No. 91 of 1981), it shall be sufficient if only the name and postal address of such company, statutory institution or co-operative, as the case may be, the name of each director (if any) thereof and the nature and extent of the financial interest of such company, statutory institution or co-operative are furnished and not also the interests of individual members of such company, statutory institution or co-operative:

.....
.....

(Use an annexure if necessary)

(b) State the financial interest of the applicant in the liquor trade in the Republic of South Africa and, if the applicant is a private company, close corporation, partnership or trust, also of every shareholder, member or partner thereof or beneficiary thereunder. (If the applicant or the said shareholder, member, partner or beneficiary has no such interest, this fact shall be specifically mentioned.):.....
.....

(Use an annexure if necessary)

PARTICULARS OF APPLICATION

1. Location of premises: physical address or identifiable landmarks:
- (a) Residential:
 - (b) Commercially zoned area:
 - (c) Urban:
 - (d) Rural:

2. State the proximity of the proposed premises in terms of metres to:
- (a) Learning institutions:
 - (b) Religious institutions:
 - (c) Other licensed premises:

3. What is the status of the applicant in terms of BEE rating? (Relevant certificates are to be attached).....
.....

4. Details pertaining to the total number of jobs to be created in terms of the proposed premises to be provided:
.....

5. Provide a description of the social responsibility programs in respect of alcohol consumption to be undertaken by the proposed licence applicant.
.....
.....

6. Proof of a valid and current tax clearance certificate to be attached at the time of submission of this application.

7. Is the application in the public interest? (If yes, provide motivation as contemplated in section 48(6) of the Liquor Act.)

 Yes

 No

.....

.....

8. Is the structure of the premises complete?
(If yes, submit a valid business licence.)

 Yes

 No

9. Do you have lawful occupation of the premises?
(If yes, proof is to be submitted.)

 Yes

 No

10. Are you the owner of the proposed premises from which liquor is intended to be sold?
(If not, consent is required from the owner of the premises or relevant authority to conduct trade in liquor and proof is to be submitted.)

 Yes

 No

11. Do you have a security plan for the proposed premises?
(If yes, attach proof.)

 Yes

 No

12. Have you paid for your application?
(If yes, attach proof.)

 Yes

 No

13. Do you have a detailed sketch plan for the proposed premises, including storage of liquor? (If yes, attach proof.)

 Yes

 No

14. Do you have additional storage?
(If yes, attach a sketch plan with dimensions.)

 Yes

 No

If the premises will be managed by a person other than the applicant, then the application form must be accompanied by an application in terms of section 77(1)(d) and Form KZNLA 8 of Annexure H2.

PART A: CONSUMPTION

ON-CONSUMPTION

OFF-CONSUMPTION

4. DETAILS OF THE PROPOSED PREMISES

(1) The name in which the business is to be conducted:

.....

(2) State the type of premises applied for in terms of section 39(a).

.....

(3) State the physical address of the premises where the business will be conducted or the description of the location of the premises in terms of identifiable landmarks as required in terms of section 41(2)(a).

.....

.....

(4) Describe the situation of the premises where the business is to be conducted by reference to the erf-, street- or farm number.

.....

.....

(5) In which district or metropolitan area is the premises referred to in subparagraph (4) situated?

.....

(6) State on which portion of the premises the sale of liquor is to take place.

.....

(7) Is application made in respect of premises which –

(a) have not yet been erected;

 Yes No

(b) are already erected, but require additions or alterations to make them suitable for the purposes of the proposed business;

 Yes No

(c) are already erected and, in the applicant's opinion, do not require additions or alterations in order to make them suitable for such purposes; or

 Yes No

(d) a business licence from the relevant local authority is attached where proposed premises will be physically located?
(proof to be submitted)

 Yes No

(8) If paragraph 7(a) or (b) applies, state –

(a) the date on which such erections, additions or alterations will be commenced

with:

and

(b) the period which will be required for the erection, additions or alterations:

.....

(9)(a) Is application made for any determination, consent, approval or authority which may be granted by the KwaZulu-Natal Liquor Authority (e.g. other business or tasting facilities)?

 Yes No

(b) If so, give full particulars with reference to the section in terms of which application is made.

.....

.....

(Provide comprehensive motivation – Use an annexure)

(10) In the case of an on-consumption licence in respect of premises of a club, attach a copy of the rules/constitution of the club, certified by the president, chairman or secretary.

I declare/truly affirm that the information furnished in this application and in the documents attached to it, is true and correct.

.....
Date Signature (of applicant or person authorised to sign application)

I certify that this declaration has been signed and sworn to/affirmed before me at on this day of, 20..... by the applicant/person authorised to sign the application and who has acknowledged that –

- (a) he/she knows and understands the contents of this declaration;
(b) he/she has no objection to taking the prescribed oath/affirmation;
(c) he/she considers the prescribed oath/affirmation 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

.....
Affirmation

Full names and surname:

Business address:

.....

Designation:

Area for which appointment is held:

Office held if appointment is *ex officio*:

ex officio:

**FORM TO BE COMPLETED WITH RESPECT TO THE PROXIMITY OF PROPOSED
PREMISES TO ANY LEARNING OR RELIGIOUS INSTITUTION
OR PLACE OF WORSHIP
(NUMBERS 2 AND 6 OF THE INSTRUCTIONS APPLY)**

Name of the Institution: specify whether a Learning/ Religious Institution or a Place of Worship	Physical Address	Contact Details	Proximity to the proposed or completed premises

**APPLICATION IN TERMS OF SECTION 41 FOR LIQUOR LICENSE
(The name of your store)**

WRITTEN PRESENTATION

1. NAME OF APPLICANT

Who is the applicant? Who have the controlling interest, what is the residential address.

2. TYPE OF LICENSE

What kind of license? Is it on/off consumption?

3. PREMISES ADDRESS

4. OWNERSHIP OF THE LAND

Are you leasing the property or is it yours. If you are leasing it - for how long

5. PREVIOUS APPLICATIONS

Is this your first application, if not mention your previous applications.

6. SCHOOLS AND PLACES OF WORSHIP

Are there any schools/churches and how far are they from your outlet

7. UNDESIRABLE CONDITIONS

In your knowledge, do you think granting of this liquor license will not cause problems in the area - motivate here (Exceptional circumstances)

8. HARMFUL MONOPOLISTIC CONDITIONS

Do you have any other financial interests in the liquor trade, if yes mention them

9. PUBLIC INTEREST

Is there a need of this liquor outlet - elaborate on how the public will benefit from your liquor outlet?

10. OTHER SIMILAR PLACES

Are there other similar liquor outlets in the vicinity, mention names and distances from yours?

11. A DETAILED SOCIAL RESPONSIBILITY PROGRAM (what/ how are you going to give back to the community/ies affected by alcohol abuse) how does it address these issues.

12. TOTAL CAPACITY OF PATRONS (SEATED AND STANDING)

13. TOTAL NUMBER OF EMPLOYMENT OPPORTUNITIES (How many people are going to employ in your business?)

14. ARE YOU QUALIFIED TO HOLD A LICENCE IN TERMS OF SECTION 40 OF THE LIQUOR ACT (ACT 6 OF 2010)

Motivate

15. CONCLUSION

Please note that this is just a guide, therefore you are not by any means limited to the above, and you can add more.

ANNEXURE T
SECURITY PLAN
 KwaZulu-Natal Liquor Licensing Act, 2010
 (Act No. 6 of 2010)

KZNLA 20

The Security Plan is to **include** the following –

No.	Security Plan	Check Box	
1.	The floor plan of the proposed site or area.	Yes	No
2.	The access point (entry and exit).	Yes	No
3.	The entry/exit point to be manned at all times. Monitoring within 5 meters circumference outside premises	Yes	No
4.	Patrons to be searched at point of arrival and departure.	Yes	No
5.	Storage facilities for licensed firearms to be provided.	Yes	No

6.	The point of sale to be cordoned off (indicated on the floor plan submitted).	Yes	No
7.	The restricted part for consumption of liquor to be cordoned off (to be indicated on the floor plan submitted).	Yes	No
8.	Parking to be provided.	Yes	No
9.	Ablution facilities for males and females to be provided.	Yes	No

Dated at on this day of, 20.....

.....Applicant