

APPLICATION
STREET TRADING PERMIT

SETSOTO LOCAL MUNICIPALITY

LED DIVISION



NAME OF BUSINESS	
NAME OF APPLICANT	
ID/PASSPORT No.	
APPLICANT'S RESIDENTIAL ADDRESS	
APPLICANT CONTACT NUMBER :CELL NO	
PHYSICAL ADDRESS WHERE TRADING IS TAKING PLACE	
STREET NAME	
TOWN	
CODE	
TYPE OF LICENCE APPLIED FOR	HAWKER PERMIT VALID FOR ONE YEAR
NATURE OF BUSINESS	STREET TRADING

GOODS/SERVICES OFFERED

Signature of Applicant: _____ Date: _____

FOR OFFICE USE ONLY	
RECEIPT NUMBER	
SERIAL No	
DATE RECEIVED	
DATE CAPTURED	
FILE NUMBER	
STREET NAME	
BAY NUMBER	
FEES PAYABLE ON APPROVAL ONLY: (R200)	
OFFICIAL :	_____
Signature :	_____

ON APPROVAL

Signature of Director

Date

NB: APPLICANT TO FURNISH:

- 1. CERTIFIED COPY OF ID/ OR PASSPORT AND WORK PERMIT IN CASE NOT SA CITIZEN**
- 2. TWO PASSPORT SIZE PHOTOS**
- 3. ATTACH COPY OF YOUR MUNICIPAL ACCOUNT AS PROOF OF RESIDENCE**
- 4. FOREIGN NATIONALS: A VALID WORK PERMIT ISSUED BY SA HOME AFFAIRS DEPARTMENT**
- 5. IF TRADING ON ANOTHER BUSINESS PREMISES, OBTAIN WRITTEN PERMISSION FROM OWNER**
- 6. RETURN FORM TO SETSOTO LOCAL MUNICIPALITY OFFICES: FICKSBURG/MARQUARD/CLOCOLAN/SENEKAL**
- 7. NO STRUCTURE SHOULD BE ERECTED ON SIDEWALKS AND NO OBSTRUCTION TO PEDESTRIANS SHALL BE ALLOWED**