



ER2/R

APPLICATION FORM FOR RENEWAL OF LIQUEFIED PETROLEUM GAS (LPG) RETAIL LICENCE

IN ACCORDANCE WITH PETROLEUM ACT (CHAPTER 13:22) SECTION 29 AND STATUTORY INSTRUMENT 57, LPG REGULATIONS, 2014

INSTRUCTIONS 1. COMPLETE THE FORM FULLY (INCOMPLETE FORMS WILL NOT BE ACCEPTED) 2. USE CAPITAL LETTERS 3. USE A SEPARATE FORM FOR EACH LICENSE APPLICATION (LICENSE IS SITE SPECIFIC) 4. A VALID EMAIL ADDRESS IS MANDATORY	OFFICIAL USE ONLY DATE RECEIVED: RECEIVED BY:
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1. Previous License number:

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Renewal year being applied for:

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2. Trade name in full e.g. ABC GAS

4. Name of LPG supplier

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5. Physical address (where retailing operations are/will be carried out)

Stand Number	
Street name	
Location/Suburb	
Town/City	
Province	

6. Contact Person:

Full Name	
Job Title	
Cellphone number(s)	
Email address	

Have there been any changes to the particulars of the premises since the last licence was granted? e.g. ownership or shareholding

If **Yes** please supply details below:

Yes

No

Have there been any alterations to the premises or storage arrangements?

If **Yes** please supply details below:

Yes

No

SECTION C: DECLARATION

I (full names) hereby declare that all information provided herein is within my personal knowledge and that –

- (a) I am duly authorized to make this declaration;
- (b) I am the designated person responsible for this Licence and any conditions attached thereto;
- (c) I have read and understood the regulations related hereto, with specific reference regarding to any false declaration; and
- (d) I understand the consequences of making a false declaration.

.....
Signature

.....
Date

APPLICATION CHECKLIST

Please tick to show that the required document is attached. After finalizing, please date and sign this checklist and send together with your application.

Local Authority permit/licence	
Fire Brigade certificate	
EMA Hazardous Substance Storage and Use Licence	
Certified copy of lease agreement or title deed	

I have attached all of the documents listed above.

Signed: _____

Date: _____