



**APPLICATION FORM FOR RENEWAL OF PETROLEUM  
RETAIL LICENCE**

**PETROLEUM ACT (CHAPTER 13:22) SECTION 29 LICENSING REQUIREMENT**

<b>INSTRUCTIONS</b> 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)	<b>OFFICIAL USE ONLY</b> DATE RECEIVED: RECEIVED BY:
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1. Previous License number:

Site ID Number:

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2. Renewal year being applied for:

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3. Trade name in full e.g. ABC SERVICE STATION


4. Name of fuel 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) All information provided herein is to the best of my knowledge true and correct.

Signed at..... (Place) on this .....day of .....

(Month)..... (Year)

.....  
Signature

I certify that the applicant –

(a) Has acknowledged that he/she knows and understands the contents of this application form and its conditions, that he/she considers the oath binding on his /her conscience; and

(b) has in the prescribed manner sworn that the contents of this application form and its conditions are true and signed before me at .....(place) on this.....day of.....(month).....year.

.....  
**COMMISSIONER OF OATHS**

## APPLICATION CHECKLIST

This checklist is intended to help and guide you in your application. It has been created based on the most common mistakes that ZERA has encountered in past applications. Therefore, going through this checklist may help you to prevent common mistakes.

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	
Weekly returns summary for previous year	
Certified copy of lease agreement or title deed	

I have attached all of the documents listed above.

Signed: \_\_\_\_\_

Date: \_\_\_\_\_