



**DEPARTMENT OF TRANSPORT
NATIONAL PUBLIC TRANSPORT REGULATOR / PROVINCIAL REGULATORY ENTITY / MUNICIPAL REGULATORY ENTITY
NATIONAL LAND TRANSPORT ACT, 2009 (ACT NO. 5 OF 2009)**

APPLICATION FOR DUPLICATE OPERATING LICENCE, PERMIT OR DECAL

Request for duplicate (Check applicable box):

Operating licence

Permit

Decal

* Attach original operating licence, permit or decal.
* If you are no longer in possession of the operating licence, permit or decal an affidavit must be supplied with the application giving the reasons why you are unable to submit it.

SECTION A

PARTICULARS OF APPLICANT

Name of company, partnership, corporation or other legal entity, or sole proprietor.	<input type="text"/>	
First names, if sole proprietor (not more than 3)	<input type="text"/>	
Postal address and code	<input type="text"/>	
	Postal Code	<input type="text"/>
Street address (if different from postal address) <i>Domicilium citandi et executandi</i>	<input type="text"/>	
	Postal Code	<input type="text"/>
Telephone number	<input type="text"/>	Code <input type="text"/>
Facsimile number (if any)	<input type="text"/>	Code <input type="text"/>
E-mail address (if any)	<input type="text"/>	
Number of operating licence or permit	<input type="text"/>	
Date of expiry of OL or permit	<input type="text"/>	
	Y Y Y Y / M M / D D	
Board/Regulatory Entity that issued operating licence or permit	<input type="text"/>	

SECTION B (Compulsory for all application types)

DECLARATION

I, the undersigned (full name)
certify that the information furnished in this application form is true and correct.
I accept that if information supplied in this application is found to be false, the application will be rejected and I may be disqualified from making an application for an operating licence in the future.

.....
Signature

.....
Date

.....
Name of person

Name of legal entity (if applicable)