



Application for a Tourist Enterprise Licence

1. Type of Application *(please tick and provide information as appropriate)*

- New Licence
- Reissue of licence
- Variation of Tourist Enterprise Licence No. _____
(Please specify type of proposed variation): _____

2. Particulars of Applicant

Name	<input type="text"/>		
Nationality	<input type="text"/>		
National Identity Card / Passport Number	<input type="text"/>		
Business Registration Number	<input type="text"/>		
Company Registration Number	<input type="text"/>		
Contact Person	<input type="text"/>		
Postal Address	<input type="text"/>		
Telephone	<input type="text"/>	Email:	<input type="text"/>
Fax:	<input type="text"/>	Mobile:	<input type="text"/>

Important note: Any change in the particulars of the applicant should be notified to the Tourism Authority within 15 days



3. Particulars of Representative *(in case of Company or Society)*

Name: _____

Designation: _____ NIC / Passport No.: _____

4. Type of Tourist Enterprise/Activity

Type of Tourist Enterprise/ Activity	Number of rooms <i>(if applicable)</i>	Number of covers <i>(if applicable)</i>	Number of bicycles/ cars/buses/motor-cycles/ quads <i>(if applicable)</i>	Site of activity w.r.t hawking in front of hotel or tourist guide <i>(if applicable)</i>	Other details <i>(if applicable)</i>

5. Particulars of Business

Business Name/Trade Name of Tourist Enterprise

Address of Tourist Enterprise

Proposed number of Employees: _____

Proposed Investment: Rs. _____

Telephone: _____ Mobile: _____

Fax _____ Email: _____

6. Competences of Promoter

Details of qualifications, knowledge / skills / competence / experience in the proposed activity
(please attach copies of CV, certificate(s) and other supporting documents)



7.	Are you holder of a licence at the Tourism Authority?		<input type="checkbox"/> Yes	
			<input type="checkbox"/> No	
	If the answer is yes to the above, please provide the following details:			
	Type of Licence	<input type="checkbox"/> Tourist Enterprise Licence <input type="checkbox"/> Pleasure Craft Licence		
	Licence Number			
	Expiry date			
	Activity			
	Embarkation Point (PCL) / Address (TEL)			

8.	Have you, any Director, a manager, an officer or the majority shareholder of the company/société been convicted of any offence involving fraud or dishonesty, within the past 3 years?		<input type="checkbox"/> Yes
			<input type="checkbox"/> No
	If the answer is yes to the above, please provide details of the conviction:		

9.	Have you ever been refused a licence by the Tourism Authority?		<input type="checkbox"/> Yes
			<input type="checkbox"/> No
	If the answer is yes to the above, please provide details:		

10.	Had you been holder of a tourist enterprise licence which had been revoked by the Authority within the past 3 years?		<input type="checkbox"/> Yes
			<input type="checkbox"/> No
	If the answer is yes to the above, please provide details:		

11. Declaration

I certify that the above information is true, accurate and correct to the best of my knowledge.

Signature:

Name:

Date:

Company Seal:



Note: The Tourism Authority reserves the right to request the applicant to submit such additional information or documents as it may deem appropriate for the processing of the application.

For Office Use:

Name: _____ Signature: _____

Date: _____