

TOURIST PERMIT APPLICATION COVERSHEET



Name on Business Licence _____

Other Trading Names (if applicable) _____

Address of Business _____

Village/Town/Suburb, Island, Province

Business Licence Category(s) _____

For each Business Licence you require, please specify Business Licence Category and Sub-Category as per 2015 Business Licence Act, and complete the relevant Self-Assessment Form for each

Business Licence Issuing Office _____

Tourism Association Membership _____

Please write name of Association in full

Contact Person _____

Contact Phone _____

Contact Email _____

For Office Use

Received Date:

Approved:

Permit Number: