



Office of the KwaZulu-Natal Provincial Regulatory Entity

APPLICATION FOR CHARTER SERVICES

1. An operating license may authorise the holder to undertake pre-booked charter Services in the areas or zones as specified by the entity granting the operating license
2. Which may or may not be in addition to other services authorised by that license?
3. If the operating license specifies an area for picking up passengers such a vehicle May:
 - a. Leave the area or zone described in the operating license if, on the return Journey, it is to carry the same passengers that it carries on the outward journey or if the vehicle is to return to that area empty; and
 - b. Pick up passengers outside that area or zone if the fare is pre-booked and the passengers will return to such area.
4. Where application is made for an operating license for vehicle hires with drivers as charter services, the entity granting the operating license must evaluate whether the services should rather be provided as metered taxi services, and, if it grants the application for a charter service, should attach appropriate conditions.

PARTICULARS OF EXISTING OPERATING LICENCE

Operating Licence Number _____

PRE/Board which issued the operating licence _____

Date of Issue _____

Date of Expiry _____

SECTION A: PARTICULARS OF APPLICANT

Name of company, partnership, corporation or other legal entity, or sole proprietor (surname): _____

First names, if sole proprietor (not more than 3) _____

Type of identification document	RSA identity document	<input type="checkbox"/>	Temporary identity	<input type="checkbox"/>
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(tick where applicable and attach relevant document or certified copy)	Passport	Foreign	identity document	<input type="checkbox"/>
	Founding Statement		Certificate of Incorporation	<input type="checkbox"/>

Identity no./business registration number _____

Trade name (if applicable) _____

Type of business _____

Postal address _____

Postal code _____

Street address (if different from postal address) _____

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Postal code _____

Telephone number Code _____ Number _____

Cell phone number _____

Facsimile number (if any) Code _____ Number _____

E-mail address (if any) _____

Tax Clearance Certificate Number: _____

SECTION B: PARTICULARS OF PERSON RESPONSIBLE FOR A JURISTIC PERSON

In the case of a company, close corporation or other juristic person, particulars of the person responsible to represent it must be supplied:

Surname _____

First names (not more than 3) _____

Identity number _____

Type of identification RSA identity document Passport

Telephone number Code _____ Number _____ (tick where

Cell phone number _____ where

Facsimile number (if any) Code _____ Number _____

applicable) Other (specify) _____

E-mail address (if any) _____

Proxy Letter attached

SECTION C: TYPE OF PUBLIC TRANSPORT SERVICE

Type of Service	Scheduled		Mode	Bus		Carrying Capacity	35 +	
Scheduled	Scheduled			Bus				
	Tick type of service. It may be necessary to tick more than one	Unscheduled		Midibus			17 - 35	
		Charter		Minibus Taxi			9 - 16	
		Tourist		Metered Taxi			4 - 8	
	Staff			Other				
	Scholar							
	Courtesy							
	Other (specify)							

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In the case of long-distance services, state why passengers cannot use existing transport services and motivate why the proposed service is necessary (supporting documents may be attached):

SECTION D: PARTICULARS OF VEHICLE

Where the vehicle is not already owned, state next to Vehicle Registration Number, "Still to be acquired". (Applicants are advised to withhold purchase of vehicles until the outcome of the application is known) **Vehicle**

Vehicle Registration Number _____

Chassis (VIN) Number _____

Engine Number _____

Vehicle Make _____

Year of Manufacture _____

Type of Vehicle Motor Car Minibus Midibus

Bus Other Specify _____

Carrying Capacity _____ Roadworthy certificate or COF Number

Expiry Date of Roadworthy Certificate of COF: _____

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SECTION E: PARTICULARS OF ROUTES

In the case of Metered Taxis, please describe the area which will be serviced. If there are more routes, they must be described on a separate sheet of paper. Describe the FIRST route in detail:

Origin (Departure point) _____

Destination _____

Detailed route description (state street names or road numbers and each point where passengers are picked up or set down, and, where applicable, beacons or land marks for each city, town, village or settlement. Vague route descriptions will not be accepted)

Describe the SECOND route in detail:

Origin (Departure point) _____

Destination _____

Detailed route description (state street names or road numbers and each point where passengers are picked up or set down, and, where applicable, beacons or land marks for each city, town, village or settlement. Vague route descriptions will not be accepted)

Describe the THIRD route in detail:

Origin (Departure point) _____

Destination _____

Detailed route description (state street names or road numbers and each point where passengers are picked up or set down, and, where applicable, beacons or land marks for each city, town, village or settlement. Vague route descriptions will not be accepted)

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Describe the FOURTH route in detail:

Origin (Departure point) _____

Destination _____

Detailed route description (state street names or road numbers and each point where passengers are picked up or set down, and, where applicable, beacons or land marks for each city, town, village or settlement. Vague route descriptions will not be accepted)

Describe the FIFTH route in detail:

Origin (Departure point) _____

Destination _____

Detailed route description (state street names or road numbers and each point where passengers are picked up or set down, and, where applicable, beacons or land marks for each city, town, village or settlement. Vague route descriptions will not be accepted)

Describe the SIXTH route in detail:

Origin (Departure point) _____

Destination _____

Detailed route description (state street names or road numbers and each point where passengers are picked up or set down, and, where applicable, beacons or land marks for each city, town, village or settlement. Vague route descriptions will not be accepted)

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SECTION I: DECLARATION BY ASSOCIATION (Where the applicant is a member of a taxi association)

We, a) _____ (full names),

ID Number: _____

b) _____ (full names),

ID Number: _____

c) _____ (full names),

ID Number: _____

the undersigned, duly authorised representatives of the _____
_____ (taxi association), hereby declare

that the Executive Committee of said association agrees to and endorses the application sought by our member in this application and have provided a letter stating routes to be allocated.

Signature(a) _____ Date _____

Signature (b) _____ Date _____

Signature (c) _____ Date _____

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SECTION J: AFFIDAVIT REGARDING PREVIOUS CONVICTIONS

[In terms of Section 57(2)(b)(iv) of the National Land Transport Act, 2009 (Act No.5 of 2009) and Regulation 18]

I, the undersigned, _____ (full names), hereby make oath/affirmation and say:

I have/have not* been convicted of any of the following offences (state date of conviction and the court involved):

- An offence under the National Land Transport Act, 2009 (Act No.5 of 2009) or any relevant provincial legislation: _____
- An offence under the National Road Traffic Act, 1996 (Act No.93 of 1996) or the Road Traffic Act, 1989 (Act No.29 of 1989) or a provincial road traffic act: _____
- An offence listed in Schedule 1 to the Criminal Procedure Act, 1977 (Act No.51 of 1977), e.g. Murder, rape, etc: _____
- Possession of an unlicensed firearm or dangerous weapon as defined in the Dangerous Weapons Act, 1968 (Act No.71 of 1968), or illegal possession of explosives: _____

Signed and sworn to/affirmed before me at _____ on this _____ day of _____, 20_____ by the deponent who acknowledged that he/she knows and understands the contents of this affidavit.

First Name (s) _____ Surname _____

Rank: _____ Force Number _____

Physical address of Police Station:

I, the undersigned (full name) _____ certify that the information furnished in this affidavit is true and correct.

Signature _____ Date _____

SAPS Commissioner of Oaths

*Delete whichever is not applicable.



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SECTION K PROTECTION OF PERSONAL INFORMATION ACT, OF 2013

By signing this document, I/we hereby grant my/our voluntary consent that my/our personal information may be processed, connected, used and disclosed in compliance with the Protection of Personal Information Act, of 2013. I/we furthermore agree that my/our personal information may be used for the lawful and reasonable purpose in as far as the Provincial Regulatory Entity, in executing its functions in line with the National Land Transport Act, must use my/our information in the performance of its public legal duty. I/We understand that my/our personal information may be disclosed to a third party in as far as the application in terms of the NLTA read with its Regulations in fulfilling its public legal duty. I/we furthermore understand that there are instances in terms of the above-mentioned Act where my express consent is not necessary to permit the processing of personal information, which may be related to litigation or when the information is publicly available.

Signature _____ Date YYYY / MM / DD

SECTION L: DECLARATION BY APPLICANT

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 LICENSE in the future.

Signature _____ Date _____

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OTHER CONDITIONS IMPOSED BY THE REGULATORY ENTITY (if applicable)

This operating License is issued subject to the following conditions (or attaches conditions imposed as a schedule):

Date of issue: _____

Signature of designated official of the KwaZulu-Natal Provincial Regulatory Entity

OPERATING LICENSE PARTICULARS In the case of more operating LICENSEs, provide the same particulars on a separate sheet as an attachment.

Operating LICENSE

Operating LICENSE Number: _____

Valid from: _____ Valid to: _____

Captured application details on OLAS/Legiti-Mate: _____

Date submitted to publications: _____

Date referred to Planning authorities _____

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Date application received _____

Captured application details on OLAS _____

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Date Received _____

Signature: _____

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