

Office of the KwaZulu-Natal Provincial Regulatory Entity APPLICATION FOR AMENDMENT OF AN OPERATING LICENSE CHANGE OF SPECIFIED VEHICLE ON A PERMANENT BASIS (COV)

[In terms of Section 73 of the National Land Transport Act, 2009 (Act No.5 of 2009)]

SECTION A: PARTICULARS OF APPLICANT

Name of company, partnership	o, corporation or other legal entit	ty, or sole proprietor (surname):
First names, if sole proprietor	(not more than 3)	
Type of identification	RSA identity document	Temporary identity document
tick where applicable and attach	Passport	Foreign identity document
relevant document or certified copy)	Founding Statement	Certificate of Incorporation
Identity no./business registrati	ion number	
Trade name (if applicable)		
Type of business		
Postal address		
		Postal code
Street address (if different from	m postal address)	
		Postal code
Telephone	CodeNumber	
Cell phone number	Number	
Facsimile number (if any)	CodeNumber	·
E-mail address (if any)		
Tax Clearance Certificate Num	ber:	

SECTION B: PARTICULARS OF PERSON RESPONSIBLE FOR A JURISTIC PERSON

In the case of a company, close corpora	ation or other juristic person, particulars of the person responsible to represent it	
must be supplied:		
First names (not more than 3)_		
Identity number		
Type of identification	RSA identity document Passport	
(tick where applicable)	Other (specify)	
Telephone	CodeNumber	
Cell phone number	Number	
Facsimile number (if any)	CodeNumber	
E-mail address (if any)		
Letter of Proxy from Juristic per	son attached	
SECTION C: PARTICULARS OF EX	KISTING OPERATING LICENSEAND REASONS FOR AMENDMENT	
Operating License Number		
PRE/Board which issued the ope	erating licence	
Date of Issue YYYY / MM /	DD Date of Expiry YYYY / MM / DD	
State the reasons for changing t	he vehicle:	
Change in Carrying Capacity		
Other:		
	ges, please enclose written authorisation from the relevant planning port, in particular with reference to the potential impact these anking and terminal facilities.	
SECTION D: PARTICULARS OF C	URRENT VEHICLE	
Vehicle to be replaced		
Vehicle Registration Number		
Chassis (VIN) Number		
Engine Number		
Vehicle Make & Model		
Year of Manufacture		
Type of Vehicle Motor O	Car Minibus Midibus Bus pecify	
Carrying Capacity	Roadworthy certificate or COF Number	
Expiry Date of Roadworthy Cert	ificate of COF: YYYY / MM / DD	

Vehicle to replace the abovementioned ve	ehicle	
Vehicle Registration Number		
Chassis (VIN) Number		
Vehicle Make & Model		
Year of Manufacture		
Type of Vehicle Motor Car Other Specify	Minibus	Midibus Bus
Carrying Capacity Roadw	orthy certificate or COF	Number
Expiry Date of Roadworthy Certificate of Co	OF: YYYY / MM /	<u>DD</u>
SECTION E: PARTICULARS OF CONTRACT (i	n the case of a contrac	<u>eted service)</u>
Type of Contract: Commercia	al Service Contract	Subsidised Service Contract
Negotiated		
Contract Reference Number:		
Name of Parties to the Contract: 1		
2		
Address of Parties to the Contract: 1		
		Code:
2		
		Code:
Name of Sub-Contractor (if applicable)		
Address of Sub-Contractor		
		Code:
Duration of Contract: From YYYY / M	M/DD to YYYY/	MM / DD
SECTION F: DECLARATION OF COMPLIANCE	E WITH LABOUR LAWS	1
l,		
declare that in the conduct of the public tra with labour laws in respect of drivers and of Department of Labour.	•	
Signed:	D	Date: YYYY / MM / DD

We, (a)	(full names),
ID Number:	
(b)	(full names),
ID Number:	
(c)	(full names),
ID Number:	
the undersigned, duly authorised representat	tives of the
	(taxi association), hereby declare that the
Executive Committee of said association agreemember in this application.	es to and endorses the amendment sought by our
Signature (a)	Date YYYY / MM / DD
Signature (b)	Date YYYY / MM / DD
Signature (c)	Date YYYY / MM / DD

STAMP

SECTION H: AFFIDAVIT REGARDING PREVIOUS CONVICTIONS

[In term:	of Section 57(2)(b)(iv) of the National Land Transport Act, 2009 (Act No.5 of 2009) and Regulation 18		
I, the ur	dersigned,(full names)		
hereby	make oath/affirmation and say:		
I have/h	ave not* been convicted of any of the following offences (state date of conviction and the		
court in	volved):		
•	• An offence under the National Land Transport Act, 2009 (Act No.5 of 2009) or any releva		
	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:		
	dersigned (full name) certify information furnished in this application affidavit is true and correct.		
Signatu	eDate <u>YYYY / MM / DD</u>		
Signed a	nd sworn to/affirmed before me at on this		
	_ day of by the deponent who		
acknow	edged that he/she knows and understands the contents of this affidavit.		
First Na	me (s) Surname		
	Force Number		
Physical	address of Police Station		

SAPS Commissioner of Oaths

^{*}Delete whichever is not applicable.

SECTION I: DECLARATION BY APPLICANT	
I, the undersigned (full name)	certify
that the information furnished in this application	ion form is true and correct. I accept that if
information supplied in this application is four	nd to be false, the application will be rejected and I
may be disqualified from making an application	on for an operating license in the future.
Signature	Date YYYY / MM / DD
FOR OFFICE USE ONLY OTHER CONDITIONS IMPOSED BY THE REGUL	LATORY ENTITY (if applicable)
This operating license issued subject to the fol	llowing conditions (or attach conditions imposed as a
schedule):	
Date of issue: YYYY / MM / DD	
Signature of designated official of the KwaZulu-Natal Pro	ovincial Regulatory Entity
OPERATING LICENSE	
OF ENATING EIGENGE	
Operating License Number:	
Valid from: YYYY / MM / DD Valid	
Captured application details on OLAS/ Legiti-m	mate: YYYY / MM / DD
Date submitted to publications:	YYYY / MM / DD
Date referred to Planning authorities	YYYY / MM / DD
Date application received	YYYY / MM / DD
Reference Number	
Receipt Number	
Amount Paid: R	

Official's name ___

CHECKLIST OF REQUIRED DOCUMENTS

No.	Form Required	Yes	No
1	Application form – fully completed and signed by applicant		
2	Valid original permit / Operating License (OL)		
3	Original certified copy of Identity document of Applicant		
4	Company registration certificate (in case of a Juristic person)		
	 Original certified copy of Identity Document of representative 		
	Proxy letter		
5	Original certified copy of rank permit from municipality or in case of private		
	property a original certified copy of letter from the landlord (not older than 3		
	months)		
6	Valid tax clearance certificate		
7	Original certified copy of valid COR/COF (corresponding with logbook)		
8	Original certified copy of vehicle registration document / logbook		
9	Original certified copy of Professional Driver's Permit (PrDP)		
10	Written authorization from the planning authorities regarding their support of		
	the application, with particular emphasis on the potential impact on existing		
	ranking and terminal facilities		
11	Quotation (or purchase invoice) for Passenger liability Insurance to the value of		
	R1 million per passenger per seat.		

Date	Name and Surname of Verifier	Signature