



**Office of the KwaZulu-Natal Provincial Regulatory Entity**

**APPLICATION FOR CONVERSION OF A PERMIT**

(In terms of Section 54 of the National Land Transport Act, 2009 (Act No.5 of 2009) read with Regulation 6)

**PARTICULARS OF EXISTING PERMIT TO BE CONVERTED**

Permit Number \_\_\_\_\_

PRE/Board which issued the permit \_\_\_\_\_

Date of Issue YYYY / MM / DD

Date of Expiry YYYY / MM / DD

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

Identity no./business registration number \_\_\_\_\_

Trade name (if applicable) \_\_\_\_\_

Type of business \_\_\_\_\_

Postal address \_\_\_\_\_

\_\_\_\_\_ Postal code \_\_\_\_\_

Street address (if different from postal address) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ Postal code \_\_\_\_\_

Telephone number Code \_\_\_\_\_ Number \_\_\_\_\_

Cell phone number 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  
 (tick where applicable)  Other (specify) \_\_\_\_\_

Telephone number Code \_\_\_\_ Number \_\_\_\_\_

Cell phone number Number \_\_\_\_\_

Facsimile number (if any) Code \_\_\_\_ Number \_\_\_\_\_

E-mail address (if any) \_\_\_\_\_

Letter of Proxy from Juristic Person attached

**SECTION C: PARTICULARS OF CURRENT VEHICLE**

**Vehicle to be replaced**

Vehicle Registration Number \_\_\_\_\_

Chassis (VIN) Number \_\_\_\_\_

Engine Number \_\_\_\_\_

Vehicle Make & Model \_\_\_\_\_

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: YYYY / MM / DD

**SECTION D: TYPE OF PUBLIC TRANSPORT SERVICE**

Type of Service Scheduled	Scheduled		Mode	Bus		Carrying Capacity	35 +	
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)							

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 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)

---

---

---

---

---

---

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)

---

---

---

---

---

---

Describe the SEVENTH 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 EIGHTH 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 NINTH 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)

---

---

---

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**SECTION F: PARTICULARS OF CONTRACT (in the case of a contracted service)**

A certified copy of the contract is to be attached. (Note: Only contracts with National, Provincial or Local spheres of government.)

Type of Contract:     Commercial Service Contract     Subsidised Service Contract  
                               Negotiated Contract

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 / MM / DD to YYYY / MM / DD

**SECTION G: TIME TABLES AND FARE TABLES (in the case of a contracted, scheduled service)**

The applicable (proposed) time tables and fare tables must be attached as an annexure.

**SECTION H: DECLARATION OF COMPLIANCE WITH LABOUR LAWS**

I, \_\_\_\_\_ (name of operator), hereby  
 declare that in the conduct of the public transport services for which I am responsible, I will comply  
 with labour laws in respect of drivers and other staff, as well as sectoral determinations of the  
 Department of Labour.

Signed: \_\_\_\_\_

Date: YYYY / MM / DD

**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) \_\_\_\_\_

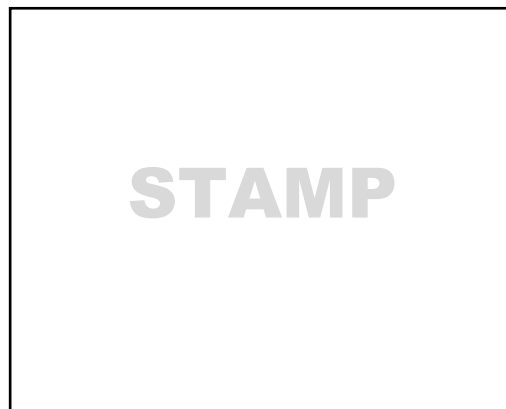
Date YYYY / MM / DD

Signature (b) \_\_\_\_\_

Date YYYY / MM / DD

Signature (c) \_\_\_\_\_

Date YYYY / MM / DD



**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), eg. 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: \_\_\_\_\_  
 \_\_\_\_\_

I, the undersigned (full name) \_\_\_\_\_ certify  
 that the information furnished in this application form is true and correct.

Signature \_\_\_\_\_ Date YYYY / MM / DD

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 \_\_\_\_\_  
 \_\_\_\_\_

\_\_\_\_\_  
 SAPS Commissioner of Oaths

\*Delete whichever is not applicable.



**SECTION K: 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 licence in the future.

Signature \_\_\_\_\_

Date YYYY / MM / DD

For official use only

**OTHER CONDITIONS IMPOSED BY THE REGULATORY ENTITY (if applicable)**

This operating licence is issued subject to the following conditions (or attach conditions imposed as a schedule): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date of issue: YYYY / MM / DD

\_\_\_\_\_

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

**OPERATING LICENCE PARTICULARS** In the case of additional operating licences, provide the same particulars on a separate sheet as an attachment.

**Operating Licence 1**

Operating Licence Number: \_\_\_\_\_

Valid from: YYYY / MM / DD Valid to: YYYY / MM / DD

Captured application details on OLAS/Legiti-mate: YYYY / MM / DD

Date submitted to publications: YYYY / MM / DD

Date referred to Planning authorities YYYY / MM / DD

**FOR OFFICE USE ONLY**

Date application received YYYY / MM / DD

Captured application details on OLAS/Legiti-mate YYYY / MM / DD

Reference Number \_\_\_\_\_

Receipt Number \_\_\_\_\_

Amount Paid: R \_\_\_\_\_

Official's name \_\_\_\_\_

**CHECKLIST OF REQUIRED DOCUMENTS**

<b>NO</b>	<b>COMPULSORY DOCUMENTS TO BE INCLUDED</b>	<b>YES</b>	<b>NO</b>
1	Application form – fully completed and signed by applicant		
2	Original certified copy of Identity Document of the applicant		
3	Company registration certificate (in case of a Juristic person) <ul style="list-style-type: none"> <li>• Original certified copy of Identity Document of representative</li> <li>• Proxy or proxy letter</li> </ul>		
4	Valid / original permit / Route Annexure (Annexure 1) and decal		
5	Original certified copy of COR/COF		
6	Original certified copy of vehicle registration document / logbook		
7	Original certified copy of Professional Driver's Permit (PrDP)		
8	Original certified copy of rank permit from municipality or in case of private property an original certified copy of letter not older than 3 months		
9	Original valid tax clearance certificate		
10	Letter from association allocating routes (if annexure 1 not available)		