



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

**APPLICATION FOR RENEWAL OF AN OPERATING LICENCE**

[In terms of Section 58 of the National Land Transport Act, 2009 (Act No.5 of 2009),  
read with Regulation 6 and Regulation 25]

1. The applicant must apply for renewal of the Operating Licence not later than 30 days before expiry of the licence.
2. Where different modes are being applied for, separate applications must be completed.

**PARTICULARS OF EXISTING OPERATING LICENCE**

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

PRE/Board which issued the operating licence \_\_\_\_\_

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 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 (if applicable)**

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 Code \_\_\_\_\_ Number \_\_\_\_\_

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

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

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

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

Letter of Proxy from Juristic person attached

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

Type of Service Scheduled ( tick type of service. It may be necessary to tick more than one)	Scheduled	Mode	Bus	Carrying Capacity	35 +
	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):

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

**Comment [m1]:** Why – just renewing this not necessary

In the case of renewal, have the services been provided continuously for a period of 180 days prior to the date of application?

**Comment [m2]:** Separate process should this be removed

If no, give reasons: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

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

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

If a revision of time tables and/or fare tables is required in conjunction with this renewal, please enclose a copy of the revised time tables and fare tables.

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

I, \_\_\_\_\_ (name of operator), hereby declare that in the conduct of the public transport services covered by this application, I will continue to 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 G: 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 amendment sought by our  
member in this application.

Signature (a) \_\_\_\_\_

Date YYYY / MM / DD

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

Date YYYY / MM / DD

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

Date YYYY / MM / DD



**SECTION H: 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

First Name (s) \_\_\_\_\_ Surname \_\_\_\_\_

Rank: \_\_\_\_\_ 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 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 OFFICE 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**

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

\_\_\_\_\_

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	Original certified copy of Identity Document of applicant or proxy		
3	Certified letter of authority or executorship (in case of deceased transfer)		
4	Company registration certificate (in case of Juristic Person) <ul style="list-style-type: none"> <li>• Original certified copy of Identity Document of representative</li> <li>• Proxy letter</li> </ul>		
5	Certified copy of Valid / Active original permit / Operating Licence (OL) and Route Annexure (Annexure 1)		
6	Valid copy of COR/COF corresponding with logbook		
7	Original certified copy of vehicle registration document / logbook		
8	Original certified copy of Professional Driver's Permit (PrDP)		
9	Original certified copy of rank permit from municipality or in case of private property an original certified copy of letter from the landlord (not older than 3 months)		
10	Certified original copy of renewed contract		
11	Original valid tax clearance certificate		
12	Original certified copy of Death or Marriage Certificate		

Comment [m3]: Twice

Date

Name and Surname of Verifier

Signature