



**Office of the KwaZulu-Natal Provincial Regulatory Entity**  
**APPLICATION FOR TOURIST OPERATING LICENSE**

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

1. Applicants are advised to withhold purchase of vehicles until the outcome of the application is known.
2. Where different modes are being applied for, separate applications must be completed.
3. Please note that operating licences are granted per vehicle. Therefore, the applicant is required to pay the fee for each vehicle listed in this application.

**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  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 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: 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	
				Other				
	Staff							
	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 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 & 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 or COF: YYYY / MM / DD

**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)

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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)

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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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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)

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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)

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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)

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**SECTION I: 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 affidavit 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 J: 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 YYYY / MM / DD

**For Official Use Only**

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

This operating license 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 LICENSE PARTICULARS** In the case of more operating licences, provide the same particulars on a separate sheet as an attachment.

**Operating License**

Operating License Number: \_\_\_\_\_

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

Captured application details on OLAS/Legitimate: 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 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 – completed and signed by applicant		
2	Certified copy of Identity Document of the applicant		
3	Company registration certificate (in case of a company) <ul style="list-style-type: none"> <li>• Original certified copy of Identity Document of representative</li> <li>• Proxy or proxy letter</li> </ul>		
4	Letter of recommendation from the SA Tourism Services Association (SATSA) or an affiliated Body or		
5	Membership certificate of SATSA or an affiliated Body		
6	Quotation of motor vehicle insurance		
7	Valid tax clearance certificate		
8	Quotation for passenger liability insurance to the value of R1 million/passenger seat		
9	Certificate of registration as Tour Guide or proof of arrangement made with other qualified Tour Guide(s)		
10	Proof of holding area for vehicles (i.e. lease or town planning approval)		
11	Receipt of payment of application		