

**REGISTRATION AND LICENSING OF GOVERNMENT OWNED MOTOR VEHICLES**

To: Assistant Director  
 Motor Licensing Bureau (PMB)  
 Private Bag X9036  
 Pietemariitzburg

I.....(proxy / representative)

of the .....have been authorised to license/register the following vehicles:  
*(name of department)*

REGISTRATION NO.	DEPARTMENT	ACTION
_____	_____	#Registration/Licensing
_____	_____	#Registration/Licensing
_____	_____	#Registration/Licensing
_____	_____	#Registration/Licensing
_____	_____	#Registration/Licensing
_____	_____	#Registration/Licensing
_____	_____	#Registration/Licensing
_____	_____	#Registration/Licensing

It will be appreciated if you could register and license the aforementioned vehicles using the following BAS descriptions:

BAS Fund

VOTED FUNDS

BAS Objective

BAS Responsibility Number

BAS Item

MOTOR LICENCE VEHICLE TAXIS

Matching Field 1

Matching Field 2

Once the transaction has been effected please forward the invoice to:

Name of Responsibility Manager: .....

Postal Address: .....

.....

.....

.....

Telephone Number: .....

Signature : ..... Date:.....