



LICENSE AMENDMENT REQUEST FORM

Amendment Fee: \$50

Name of Applicant (if different from below): _____

Current Name of Business: _____

Current Business Address: _____

Current Business Type: _____

Position or Post in Company/Business: _____

I am/ We are hereby requesting an amendment to an existing license as follows:

Change/s to:

Shareholder(s) / Licensee(s) ***Due diligence required for new members*

Director ***Due diligence required for new members*

Change of business name

Name to be changed to: _____

Change of Business address: House/Building number: _____

Building Name: _____

Block and Parcel: _____

Street Name: _____

District: _____

Cease License *(Photo ID required: e.g. Passport, Driver's License, Voters ID)*

Note: Administrative fee not applicable for this service

This business is no longer in operation and I would like to cease the current license/certificate effective:

I/we hereby certify that the aforementioned is true.

PRINT NAME

SIGNATURE

DATE

Note:

Commercial location changes require a letter of intent.

**Changes to directors and/or shareholders require registers showing proposed changes. Refer to the checklist for supporting documents