

REPUBLIC OF BOTSWANA

APPLICATION FOR INDUSTRIAL LICENCE

(INDUSTRIAL DEVELOPMENT ACT. 1988)

The Secretary,
Industrial Licensing Committee,
Private Bag 0014, Gaborone
Botswana

Application is hereby made for Industrial Licence/ Renewal of Industrial Licence:

1. PARTICULARS OF APPLICANT(S)

NAME OF APPLICANT/COMPANY:.....
(In block letters)

.....

COMPANY'S REGISTRATION NO.DATE:

a) OWNERSHIP:

PARTICULARS OF SHARE HOLDERS:

NAMES	NATIONALITY	NO. OF SHARES
1.....
2.....
3.....
4.....

b) MANAGEMENT:

PARTICULARS OF DIRECTORS:

NAMES	NATIONALITY	DESIGNATION
1.....
2.....
3.....
4.....

c) CONSULTANTS:

PARTICULARS OF COMPANY'S SECRETARY/ATTORNEY (IF ANY):

NAME:.....

POSTAL ADDRESS:.....

TELEPHONE:.....TELEX:.....

d) ASSOCIATION:

PARTICULARS OF OTHER ASSOCIATED COMPANIES (IF ANY)

NAME AND ADDRESS OF PARENT/HOLDING CONTROLLING COMPANY:

.....
.....

NAMES OF SISTER COMPANIES WITH THEIR LICENCE PARTICULARS:

NAME	ADDRESS	LICENCE HELD
1.
2.
3.
4.

2. TRADE NAME (IF OTHER THAN COMPANY'S NAME):

.....

3. LOCATION OF MANUFACTURING ESTABLISHMENT:

PLOT NO. TOWN/VILLAGE:.....

4. COMMUNICATION ADDRESS:

POSTAL ADDRESS:.....

TELEPHONE NO: TELEX:.....

5. PRODUCTS TO BE MANUFACTURED: (PLEASE GIVE DETAILS)

- | | |
|---------|---------|
| 1..... | 2..... |
| 3..... | 4..... |
| 5..... | 6..... |
| 7..... | 8..... |
| 9..... | 10..... |
| 11..... | 12..... |

6. PRODUCTION CAPACITY (PER SHIFT):

PRODUCTS	UNIT	QUANTITY
1
2.....
3.....
4.....
5.....
6.....
7.....
8.....
9.....
10.....
11.....
12.....

7. EMPLOYMENT (PER SHIFT):

PROJECTED (FOR COMING YEAR): TOTAL:

ACTUAL (PREVIOUS YEAR: 19.....): TOTAL:

a) PROJECTED FIGURES (FOR COMING YEAR)

CADRE	CITIZENS	NON-CITIZENS	TOTAL
MANAGERS/SUPERVISERS
SKILLED STAFF
UNSKILLED WORKERS
OTHERS
TOTAL

b) ACTUAL FIGURES (PREVIOUS YEAR:.....)

CADRE	CITIZENS	NON-CITIZENS	TOTAL
MANAGERS/SUPERVISERS
SKILLED STAFF
UNSKILLED WORKERS
OTHERS
TOTAL

.....
.....
.....
.....
.....
.....
.....
.....

b) MACHINERY:

DETAILS OF MACHINERY	SOURCE OF SUPPLY			VALUE
	LOCAL	IMPORTED	COUNTRY	IN 000 PULA
.....
.....
.....
.....
.....
.....

11. MARKETING:

a) LOCAL BUYERS/TRADERS NAMES WITH ADDRESSES:

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b) BUYERS IN OTHER COUNTRIES WITH ADDRESSES:

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.....

.....

Water (000 Litres)
Gas (cu/ft)
Fuels:					
SOLID (Tonnes)
LIQUID (000 L)
TRANS (Tonnes)
OTHERS

14. INVESTMENT

a) FIXED ASSETS:

DETAILS	UNIT	QUANTITY	VALUE
LAND	Hectares	.....	.....
BUILDINGS (INDUSTRIAL)	Sq. Metres	.....	.....
RESIDENTIAL BUILDINGS	Sq. Metres	.....	.....
PLANT/MACHINERY	Number	.....	.....
VEHICLES	Number	.....	.....
OTHERS	.....	.....	.....

b) WORKING CAPITAL:

DETAILS	VALUE
STOCKS OF RAW MATERIAL
STOCKS OF FINISHED GOODS
STOCKS OF SPARE PARTS FOR MACHINERY
CASH AND OTHER LIQUID ASSETS
AMOUNT OWING FROM DEBTORS
GROSS WORKING CAPITAL: (i)
AMOUNT OWING TO CREDITORS: (ii)
NET WORKING CAPITAL (Deduct (ii) from (i))

c) SOURCES OF FUNDS:

DETAILS	VALUE
PERSONAL CAPITAL
PRIVATE BORROWINGS IN BOTSWANA
PRIVATE BORROWINGS OUTSIDE BOTSWANA

LOANS FROM COMMERCIAL BANKS	.....
ADVANCES FROM BANKS	.....
CREDITS FROM SUPPLIERS	.....
LOAN FROM NATIONAL DEVELOPMENT BANK	.....
BOTSWANA DEVELOPMENT CORPORATION'S LOAN/EQUITY	.....
GRANTS UNDER GOVERNMENT SCHEME	.....
TOTAL FUNDS AVAIABLE (= a+b)	.....

15. OTHER INFORMATION:

- a) Has any director or shareholder been convicted within or outside Botswana of any serious criminal offence involving dishonesty?
 If so, give details:.....

- b) Has any director or shareholder been sequestrated or declared bankrupt within or outside Botswana?
 If so, give details:.....

- c) Have you acquired premises for your manufacturing enterprise? If not, What steps have been taken to acquire such premises?
 Give details:.....

- d) Have you already started your manufacturing operations?
 If so, give date of commencement of your operations:

- e) If you are planning to set up a new operation, when do you expect to commence your manufacturing operations?
 Give expected date:.....

16. DECLARATION:

I solemnly declare that information given in the application is correct to the best of my knowledge and I have not tried to conceal anything.

DATE OF APPLICATION:	SIGNATURE OF APPLICANT
.....

Copy for information to: The Central Statistics Office, P/Bag 0024, Gaborone Botswana	NAME:.....
	DESIGNATION:.....
	ADDRESS:.....

Note: If you also want to be considered for Financial Assistance Policy (Automatic), Please apply in triplicate.

FOR OFFICIAL USE ONLY

1. RECEIPT OF APPLICATION:

FILE NO.:

DATE:..... APPLICATION FEE RECEIPT NO:.....

SIGNATURE OF LICENSING OFFICER:.....

2. REVIEW OF APPLICATION:

OFFICER'S NAME:.....

REMARKS:.....

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SIGNATURE:..... DATE:.....

3. PUBLICATION OF ADVERTISEMENTS:

DATE OF DESPATCH TO ATTORNEY GENERAL'S OFFICE:.....

DATE OF FIRST PUBLICATION:.....

DATE OF SECOND PUBLICATION:.....

4. OBJECTIONS (IF ANY):

NAME OF OBJECTING COMPANIES

GROUNDS OF OBJECTIONS

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5. DATE OF INDUSTRIAL LICENSING AUTHORITY-S MEETING:.....

6. DECISION OF THE INDUSTRIAL LICENSING AUTHORITY:.....

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SIGNATURE OF THE CHAIRMAN INDUSTRIAL LICENSING AUTHORITY:.....

7. COMMUNICATION OF DECISION:

LETTER NO :..... DATE:.....

8. LICENCE NO :..... DATE:.....