



**DEPARTMENT OF TRANSPORT
National Public Transport Regulator
NATIONAL LAND TRANSPORT ACT, 2009 (ACT NO. 5 OF 2009)**

APPLICATION FOR ACCREDITATION AS A TOURIST TRANSPORT OPERATOR

Please tick appropriate box:

Application for accreditation Application to amend conditions of accreditation
 Application for renewal of accreditation

SECTION A

PARTICULARS OF APPLICANT

Name of company, partnership, corporation or other legal entity, or surname in the case of a sole proprietor.

First names, if sole proprietor (not more than 3)

Type of identification	RSA Identity Document	Temporary Identity Certificate	
*(Attach a certified copy)	Passport	Foreign Identity Document	
	Founding Statement	Certificate of Incorporation	
	Memorandum of Understanding	Partnership Agreement	

Identity no. / passport no. / business registration number

Trade name (if applicable)

Type of business

Postal address and code Postal Code

Street address (if different from postal address)
Domicilium citandi et executandi Postal Code

Telephone number (s) Code
 Code

Facsimile number (if any) Code

E-mail address (if any)

Income tax registration number
 [Attach original Tax Clearance Certificate]

*Any recommendations or documentation in support of this application may be attached.

PARTICULARS OF THE CONTACT PERSON BETWEEN THE OPERATOR AND THE NPTR

In the case of a company, partnership, close corporation or other juristic person, particulars of the person responsible to represent it must be given:

Surname

First names (not more than 3)

Identity number

Type of identification

RSA Identity Document	<input type="checkbox"/>	Passport	<input type="checkbox"/>
Other (specify) <input type="text"/>			

Telephone number Code

Cellphone number

SECTION C

VEHICLE PARTICULARS

*The applicant is to attach copies of all operating licences and permits issued for vehicles operated by the applicant. (Except in case of a new operator).

Type:	No.	Seating capacity:	Number of vehicles to be purchased: <input style="width: 50px;" type="text"/>
Motor car	<input type="text"/>	<input type="text"/>	
Minibus	<input type="text"/>	<input type="text"/>	
Midibus	<input type="text"/>	<input type="text"/>	
Bus	<input type="text"/>	<input type="text"/>	
Other	<input type="text"/>	<input type="text"/>	

Vehicle 1:

Vehicle registration number

Vehicle identification number (VIN)

Type of vehicle

Year of manufacture

Make of vehicle

Number of passengers to be carried

Vehicle 2:

Vehicle registration number

Vehicle identification number (VIN)

Type of vehicle

Year of manufacture

Make of vehicle

Number of passengers to be carried

Vehicle 3:

Vehicle registration number

Vehicle identification number (VIN)

Type of vehicle

Year of manufacture

Make of vehicle

Number of passengers to be carried

*Service records to be attached

*In the case of more vehicles provide the same particulars on a separate sheet

VEHICLE MAINTENANCE

Is there an appropriate programme put in place for the maintaining and servicing of vehicles operated or to be operated?

 YES

 NO

If yes, describe:

Are vehicles serviced at a garage or service centre in accordance with the specifications of the vehicle manufacturer?

 YES

 NO

*If yes, provide name and address of garage or service centre:

Are vehicles serviced at in-house facilities?

 YES

 NO

*If yes, provide the address:

*Please note that all vehicles and in-house facilities will be inspected by an official for approval.

*Please attach service records of vehicles.

SECTION E

LIVERY AND SIGNAGE

Description of livery and signage being displayed or to be displayed on vehicle
(Attach photo if available)

SECTION F

CHANGE OF CONDITIONS

In the case of an application to amend conditions of accreditation, describe the conditions to be amended and the reasons thereof:

DECLARATION

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

.....
Name of person

Name of legal entity (if applicable) [Grid]

SECTION H - FOR OFFICIAL USE ONLY

OTHER CONDITIONS IMPOSED BY THE NPTR (If applicable)

This operating licence is issued subject to the following conditions

*Or attach conditions on a separate sheet

[Large empty box for conditions]

Date of issue

[Date grid: Y Y Y Y / M M / D D]

.....
Signature of designated official of Board

FOR OFFICE USE ONLY

Date Application received

[Date grid: Y Y Y Y / M M / D D]

Date referred to Recognised Tourism Authority

[Date grid: Y Y Y Y / M M / D D]

Reference number

[Reference number grid]

Amount Paid

[Amount Paid grid: R]

Official's name

[Official's name grid] [Date grid: Y Y Y Y / M M / D D]

OPERATING LICENCE PARTICULARS

*If more than 3 vehicles, attach these particulars on a separate sheet.

Operating Licence 1

Operating Licence number

Date Application received / /
Y Y Y Y M M D D

Captured application details on OLAS / /
Y Y Y Y M M D D

Reference number

Amount Paid R

Valid from / / Valid to / /
Y Y Y Y M M D D Y Y Y Y M M D D

Official's name

/ /
Y Y Y Y M M D D

Operating Licence 2

Operating Licence number

Date Application received / /
Y Y Y Y M M D D

Captured application details on OLAS / /
Y Y Y Y M M D D

Reference number

Amount Paid R

Valid from / / Valid to / /
Y Y Y Y M M D D Y Y Y Y M M D D

Official's name

/ /
Y Y Y Y M M D D

Operating Licence 3

Operating Licence number

Date Application received / /
Y Y Y Y M M D D

Captured application details on OLAS / /
Y Y Y Y M M D D

Reference number

Amount Paid R

Valid from / / Valid to / /
Y Y Y Y M M D D Y Y Y Y M M D D

Official's name

/ /
Y Y Y Y M M D D

CHECKLIST

A certified copy of one of the following:	RSA Identity Document	
	Passport	
	Temporary RSA Identity Document	
	Foreign Identity Document	
	Partnership Agreement	
	Board Resolution/ Founding agreement	
Valid Tax Clearance Certificate.		
Valid vehicle licence and registration		
Has signed a statement to the effect that he or she or it, will comply with labour laws in respect of drivers and other staff, as well as sectoral determinations of the Department of Labour.		
Copies of operating licences or permits of vehicles operated (if applicable).		
Letter or document of recommendation in support of the application (if any).		

