

## APPLICATION FOR CHIBUKU PERMIT FOR 2015

NAME OF APPLICANT .....

POSTAL ADDRESS (IF ANY) .....

RESIDENTIAL ADDRESS .....

NAME OF TAVERN .....

SITUATED AT .....

NATIONAL REGISTRATION CARD .....

DATE OF BIRTH .....

IF RENEWAL, STATE CURRENT CHIBUKU PERMIT NUMBER

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

I .....

Hereby declare as follows;

That the information, given in this application is true and correct to the best of my knowledge and belief.

Date : .....Signature of applicant.....