

## APPLICATION FOR AN EXTRACTIVE INDUSTRY LICENSE

Name:							
Address:							
Tel:	Fax:						
Address of Pro	pose	d					
Excavation:							
Lot No: Loc		Loc No:		Plan No:		CT: Volume	Folio
Owner:							
Address of Owner:							
Occupier of the Land:							
Material to be Extracted:							
Previous Extractive Industry License Issued on:							
Previous Extractive Industry License Expired on:							
Conditions of Previous Extractive Industry License:							
Duration of License Sought:							
Date of Application:							
Signature of Applicant:							
Signature of Owner/Occupier:							
Signature of Existing Licensee (If Applicable):							