

SCHEDULE 1

(PRESCRIBED FORMS)

Application for Liquor License

(Regulation)

SPECIMAN

1. (a) Type of Liquor License.....
 (b) Application for grant/renewal/removal/transfer/variation/suspension

2. (a) Name of applicant.....
 Address of applicant.....

 Tel: Fax:.....

3. Name (s) of Partners/Directors (if any)

4. Name of Manager:

5. Location of the business:

6. Number of persons employed or to be employed.....

7. Rateable valuable of property.....

8. Seating Accommodation (where required).....

Date..... Signature applicant.....