Form R. M. T. 5



ZIMBABWE

APPLICATION FOR OPERATOR'S LICENCE

Made in terms of section 8 of the Road Motor Transportation Act, 1997.

FOR OFFICIAL USE ONLY

This application form must be completed and submitted to the office of the Commissioner of Road Motor Transport for the Province in which the operating base (or principal operating base) is situated. The declaration must be signed before a Commissioner of Oaths or Justice of the Peace.

Operator Ref. No.: .....

Application No.: .....

Licence No.: .....

BEFORE COMPLETING THIS FORM, READ THE NOTES ON PAGE 4.

Insert a tick in the appropriate box.

1. IS THIS A NEW APPLICATION? ☐ OR A RENEWAL? ☐

   If a renewal, give the number of the Operator's Licence being renewed .....

2. FOR WHAT TYPE OF OPERATION IS THIS APPLICATION MADE?

   (a) Goods ☐ Omnibus ☐ Tour Vehicles ☐ Taxi ☐

   (b) Domestic ☐ International ☐ Both ☐

3. PARTICULARS OF APPLICANT

   STATUS (Tick one) Own Account ☐ Co-operative ☐ Partnership ☐

   Private Limited Company ☐

   FULL NAME (in capitals): .....

   TRADING NAME (if different): .....

   PHYSICAL ADDRESS (in full): .....

   .....

   POSTAL ADDRESS: .....

   TELEPHONE NUMBER: .....

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4. OPERATING BASE(S)

State where vehicle(s) will be kept overnight .....

.....

State where vehicle(s) will be maintained .....

5. STATE NUMBER OF VEHICLES FOR WHICH LICENCE IS REQUIRED .....

6. TOTAL NUMBER OF VEHICLES ACTUALLY OWNED .....

7. PARTICULARS OF VEHICLES OWNED (*newest first*).

Year	Capacity Tons/pass.	Number Owned	Year	Capacity Tons/pass.	Number Owned	Year	Capacity Tons/pass.	Number Owned

8. CONVICTIONS (*in the past <u>three years</u>*)

(a) List all convictions of the operator under the Road Motor Transportation Act:

Offence ***Date of conviction*** ***Court***

.....

.....

.....

.....

(b) State <u>number</u> of convictions for offences in terms of the Road Traffic Act or regulations in respect of the operator..... (Details of individual convictions under the Road Traffic Act need not be submitted, but may be called for by the Commissioner.)

9. MANAGEMENT INFORMATION (for any operator with FIVE vehicles or more).
List principal managers and their designations.

Name *Designation*

.....

.....

.....

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10 DECLARATION

I, ...

(Full name of person completing the form)

make this application in my capacity as .....

I hereby make an oath and swear that to the best of my knowledge and belief the information contained in this application is accurate and as complete as I am able to provide

I Sate .....

Signature of person completing application form

Sworn before me at ..... *this* ..... *day of* ..... *, 20*.....

.....

Commissioner of Oaths Justice of the Peace

(BOTH COPIES OF THIS FORM MUST BE SIGNED)

10. DECLARATION

I, ...

(Full name of person completing the form)

make this application in my capacity as .....

I hereby make an oath and swear that to the best of my knowledge and belief the information contained in this application is accurate and as complete as I am able to provide.

Date .....

Signature of person completing application form

Sworn before me at..... *this*.....*day of*..... , *20*.....

.....

Commissioner of Oaths/Justice of the Peace

(BOTH COPIES OF THIS FORM MUST BE SIGNED)

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