

## Application for a Copyright Music Licence

(THIS APPLICATION WILL BECOME YOUR LICENCE SPECIFICATION - PLEASE PRINT CLEARLY)

D

PHYSICAL ADDRESS	LICENSEE DETAILS	CORRESPONDENCE ADDRESS
VAT Reg No _____	Not registered <input type="checkbox"/>	Applied for <input type="checkbox"/>
Name of owner (Co, CC, etc) _____		
Building/Floor _____		
Street _____		
Suburb _____		
City/Town _____ Postcode _____		Postcode _____
Telephone _____ Telefax _____	Town _____	
Contact person _____	Attention _____	
E-mail _____	Title _____	

PHYSICAL ADDRESS	PREMISES DETAILS	CORRESPONDENCE ADDRESS
Trading name _____	Name _____	
Building/Floor _____		
Street _____		
Suburb _____		
City/Town _____ Postcode _____	Town _____ Postcode _____	
Telephone _____ Telefax _____	Attention _____	
Contact person _____	Title _____	
Website _____		

FOR OFFICE USE ONLY

LYR	AREA	SAL	LAN	TAR	MUS	ORG	AGT	AREA	INS	ESTBL
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

KINDLY COMPLETE EACH SECTION BELOW, WHERE APPLICABLE

**TYPE OF ENTERTAINER** (MARK WITH AN X)  MOBILE DISCOTHEQUE  CHOIR  PROMOTER  OTHER (COMPLETE REMARKS)

ESTIMATED NUMBER OF FUNCTIONS PER ANNUM  ESTIMATED GROSS INCOME PER ANNUM: R

Remarks - Please provide any additional details you wish to bring to our attention: \_\_\_\_\_

I/We hereby declare that all particulars and answers in this application are completed and correct and no material fact has been withheld. (I/We agree that it shall form the basis of the licence issued.)

Name of applicant \_\_\_\_\_ Date \_\_\_\_\_

Signature of applicant \_\_\_\_\_ Capacity \_\_\_\_\_

**AUTHORISED SIGNATORY**

Name \_\_\_\_\_ Capacity (Director, Owner, Proprietor, Member etc.) \_\_\_\_\_

FOR OFFICE USE ONLY

EXISTING FILE	YES	NO	FILE NO.(S)	<input type="text"/>	STATUS	<input type="checkbox"/>			
NO. OF PREMS.	<input type="text"/>	NO. OF LIC.	<input type="text"/>	LEVEL	<input type="text"/>	DATE FROM	<input type="text"/>	TARIFFS	<input type="checkbox"/>
NEW LIC. NO.(S)	<input type="text"/>	NEW FILE NO.	<input type="text"/>	CAPTURED	<input type="checkbox"/>				