

Application for a Copyright Music Licence

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

E

| 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

NATURE OF PREMISES (MARK WITH AN X)

| | | |
|----------------------------------|--|--|
| <input type="checkbox"/> CINEMA | <input type="checkbox"/> SKATING RINK | <input type="checkbox"/> CIRCUS |
| <input type="checkbox"/> THEATRE | <input type="checkbox"/> CONCERT VENUE | <input type="checkbox"/> OTHER (specify) _____ |

ESTIMATED GROSS ANNUAL INCOME FROM ADMISSIONS: R _____

FREQUENCY OF PERFORMANCES DAYS PER ANNUM SEATING CAPACITY OF VENUE

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.) _____

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EXISTING FILE YES NO FILE NO.(S) _____ STATUS

NO. OF PREMS. NO. OF LIC. LEVEL DATE FROM _____ TARIFFS

NEW LIC. NO.(S) _____ NEW FILE NO. _____ CAPTURED