# Provincial Gazette

### **Free State Province**



## Provinsiale Koerant

## Provinsie Vrystaat

**Published by Authority** 

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	PROVINCIAL I	NOTICE	
05 <u>For comment</u> : Fre	e State Liquor Amendment Regulatio	ns, 2022	2

### **PROVINCIAL NOTICE**

[No. 105 of 2021]

### AMENDMENT OF THE FREE STATE LIQUOR REGULATIONS

I, Mr MP Mohale, Member of the Executive Council responsible for Economic, Small Business Development, Tourism and Environmental Affairs in the Province, hereby publish for comment the amendment of the Free State Liquor Regulations, 2011, as set out in the Schedule.

In terms of section 133(4) of the Free State Gambling, Liquor and Tourism Act, 2010 (Act No. 6 of 2010), all interested persons are invited to submit written comments for the attention of Mr KJ Ramatlakane, Director: Legal Services to the address set out hereunder, not later than 15 days from promulgation of this Notice:

113 St Andrews Street BLOEMFONTEIN

<u>or</u>

Private Bag X20801 BLOEMFONTEIN 9300

E-mail: ramatlakanet@destea.gov.za / magashules@fsglta.gov.za / mashininiB@fsglta.gov.za

Comments or representations received after the due date will be disregarded.

### **SCHEDULE**

### **GENERAL EXPLANATORY NOTE:**

[ ]	Words in bold type in square brackets indicate omissions from existing regulations.
	Words underlined with a solid line indicate insertions in existing regulations.

### **Amendment of Regulation 1**

1. Regulation 1 of the Free State Liquor Regulations, 2011 (hereinafter referred to as the "Regulations") is amended by the substitution for the following regulation:

### "Definitions

1. In these regulations, unless the context otherwise indicates, a word or expression to which a meaning has been assigned in the Act, has the same meaning, and -

"Act" means the Free State Gambling, [and] Liquor and Tourism Act, 2010.".

### **Amendment of Regulation 2**

**2.** Regulation 2 of the Regulations is amended by the substitution for the following regulation:

### "Lodgement

2. An application envisaged in section 27 read with section 31 for a registration certificate must be lodged during office hours on the first working Friday of the month, except January of each year to the designated office of the Authority."

### **Amendment of Regulation 3**

- 3. Regulation 3 of the Regulations is amended by the insertion of subregulation (7) after subregulation (6):
  - "(7) Should the local municipality fail to submit the report envisaged in subregulation (4), the board may proceed with adjudication of the said application."

### **Amendment of Regulation 4**

- 4. Regulation 4 of the Regulations is amended by the substitution for subregulation (2) of the following subregulation:
  - (2) Notice of application envisaged in subregulation (1) published in the *Provincial Gazette* and media must include the full names of the applicant, intended trading names, identity number or registration number of the applicant, <u>erf number</u>, full <u>business</u> address and location of the premises, the type of registration certification applied for, names and nature of educational institutions, names of and distance to similar registered premises and places of worship, within 500 meter from the premises."

### **Amendment of Regulation 12**

5. Regulation 12 of the Regulations is amended by the substitution for the following regulation:

### "Lodgement

12. An application for a Special Events Registration in terms of section 54 of the Act must be lodged with the designated office of the Authority at least 21 days before date of event.".

### Amendment of Regulation 61

- **6.** Regulation 61 of the Regulations is amended by the insertion of subregulation (5) after subregulation (4):
  - "(5) An appointment under paragraph (a) -
    - (i) shall be subject to such conditions set out in the appointment as the chairperson of the Board may in his or her discretion impose;
    - (ii) shall not affect any right of a person who has an interest in the business concerned; and
    - (iii) may at any time be withdrawn by the chairperson of the Board.".

### **Amendment of Regulation 69**

- 7. Regulation 69 of the Regulations is amended by -
  - (a) the substitution for paragraph (c) of subregulation (1) of the following paragraph:
    - "(c) proximity of premises to institutions of learning, places of worship and existing outlets within 500 metres from the proposed premises;";
  - (b) the substitution for paragraph (d) of subregulation (1) of the following paragraph:
    - "(d) the number of registration certificates of the same kind already issued [in the near vicinity of the premises] within 500 metres from the proposed premises;";
  - (c) the substitution for paragraph (f) of subregulation (1) of the following paragraph:
    - "(f) information [from Home Affairs] in terms of the suitability of the applicant;"; and
  - (d) the substitution for subregulation (2) of the following subregulation:
    - "(2) The report of the liquor inspector must indicate whether and to what extent he or she has
      - (a) verified information submitted by the local municipality and designated police officer;
      - (b) verified information submitted by the applicant;

- (c) checked issues of public interest which, *inter alia*, could include interviews with surrounding [owners of premises and] <u>businesses</u> or <u>neigbours in accordance with Form FSLA26 in Schedule 1, as well as inputs of governing boards or the Department of Education relating to institutions of learning;</u>
- (d) <u>considered and/or included</u> any other matter which ought to be taken into consideration in respect of the application."; and
- (e) the insertion of subregulation (3) after subregulation (2):
  - "(3) The liquor inspector's report must include pictures of the proposed premises and surrounding area.".

### **Amendment of Regulation 75**

**8.** Regulation 75 of the Regulations is amended by the substitution for the following regulation:

"Fees payable annually in respect of a registration certificate

75. [Subject to Regulation 75C, there must, for the year following the year during which the Act comes into operation and for every calendar year thereafter, be deposited into the account of the Authority, in respect of each registration certificate (excluding a special events registration certificate), the annual fees set out in Part C of Schedule 3 and Part B of Schedule 6 on or before 31 May, annually: Provided that as a transitional measure, the annual fees in respect of Part B of Schedule 6 only applies to 2020/2021.] Subject to Regulation 75C, there must, for the year following the year during which the Act comes into operation and for every calendar year thereafter, be deposited into the account of the Authority, in respect of each registration certificate (excluding a special events registration certificate), the annual renewal fees set out in Part C of Schedule 3 and Part B of Schedule 6 from 1 December until 28 February, annually."

### **Amendment of Regulation 75C**

- **9.** Regulation 75C of the Regulations is amended by
  - (a) the substitution for subregulation (2) of the following subregulation:
    - "(2) The annual renewal fees [for 2021/2022] must be paid in the prescribed manner [on or before 31 May 2021] from the 1<sup>st</sup> of December until 28 February, annually in accordance with Form FSLA27 of Schedule 1."; and
  - (b) the insertion of subregulation (3) after subregulation (2):
    - "(3) As a provisional arrangement the renewal for 2022 will commence from 1 April until 30 June 2022.".

### **Amendment of Schedule 1**

10. Schedule 1 of the Regulations is amended by the substitution of Forms FSLA1, FSLA2, FSLA4, FSLA8, FSLA10, FSLA12, FSLA15, FSLA16, FSLA18, FSLA20, FSLA23, FSLA26 and FSLA27 of the Forms attached hereto.

### Amendment of Schedule 2

**11.** Schedule 2 of the Regulations is amended by the substitution for Schedule 2 of the attached Schedule.

### **Amendment of Schedule 3**

**12.** Schedule 3 of the Regulations is amended by the substitution for Schedule 3 of the attached Schedule.

### **Amendment of Schedule 4**

**13.** Schedule 4 of the Regulations is amended by the substitution for Schedule 4 of the attached Schedule.

### **Amendment of Schedule 6**

**14.** Schedule 6 of the Regulations is amended by the substitution for Schedule 6 of the attached Schedule.

### Short title

15. These Regulations are called the Free State Liquor Amendment Regulations, 2022.

Operations Division
Liquor Processing Sub-Division
Telephone: (051) 404 0300

Email: Reception@fsglta.gov.za Website: www.gla.fs.gov.za





### <u>APPLICATION IN TERMS OF SECTION 27 READ WITH SECTION 31 FOR REGISTRATION CERIFICATE</u>

### FREE STATE GAMBLING, LIQUOR AND TOURISM ACT NO 6 OF 2010 AS AMENDED

Please print clearly or type the information on this application. An application and registration fee are required, please see the schedule fee at your local office. Unfortunately, no money will be accepted at any of our offices or officials, but money must be deposited in our official bank account and receipt must accompany this application. The application fee is non-refundable. Return your completed application, documentation and appropriate fee to your nearest regional office.

Application are 'only' accepted first Friday of Each Month

### **INDEX** (information required at lodgement)

No	Document Description	Annexure
(i)	Application	Form FSLA 1
(ii)	Building plan of the premises approved by municipality	Α
(iii)	Detailed description of external and internal features of premises	В
(iv)	Comprehensive written representations with specific reference to section	С
	31(2)(a) and Regulation 70	
(v)	Proof of notices required by section 31(1)(d)	D
(vi)	Proof of payment of prescribed fee	E:
(vii)	Certified copy of the identity document or certified proof in the case of trust, consortium, partnership or other legal entity	F

To be completed if application is not prepared by applicant	
Name and Surname: ( <i>If applicable</i> )	Law Firm/ Consultant: (if applicable)
Contact Details:	Email Address:

### Part A (Applicant information)

To be completed if applicant is a Natural Person							
Initials:	Full	l Names:		Surname:			
	L.,.						
Birth Date:	Birth Date:   Identity No/Passport		: No:	Age:	Nationality	/:	Gender:
/ /		The state of the s					
Residential Address:			Town:			Po	stal Code:
Contact Details:			Email Add	lress:	-		
( )	<b>)</b>						
Business location information to be provided below							
ERF Number:	Business Street Address: Town/Cit		Town/City:				
Postal Code: Local Municipality:							

To be completed if app	licant is juristic person	
Name of Company:	Registration Date:	Company Registration Number:
	/ /	

Part B					
(a) Is applicant-					
(i) Has the applicant been convicted of a	☐Yes ☐No				
contravention of this Act or any other liquor					
legislation within the three years immediately					
preceding the date of application?					
Has the applicant been convicted, under applicable legislation,					
which are inconsistent with the objects and purposes of this Act and					
(a) after the coming into operation of this Act; and	☐Yes ☐No				
(b) within the three years immediately preceding the	☐Yes ☐No				
date of application					
(ii) Is the applicant an unrehabilitated insolvent?	☐Yes ☐No				
(ii) is the applicant an unrenashitated insolvent:	les livo				
(b) If the applicant is a company, close corporation, partner	ershin or trust, state whether a				
person contemplated in subparagraph (i) –	sistip of crust, state whether a				
(i) has a controlling interest in such a company,	□Yes □No				
close corporation or trust					
(ii) is a partner in such a partnership	□Yes □No				
(iii) is the main beneficiary under such a trust	□Yes □No				
(c) If any of the questions in subparagraphs (a) or (b) have	been replied to in the affirmative,				
provide full details (use an annexure if necessary)	υ				
Part C					
(2) (2) (3)					
(a) State the names, identity number and address of each					
who will have any financial interest in the business and in each case the nature and extent					
of such interest. [If the applicant is a public company, statutory institution or a co-					
operative as contemplated in the Co-operatives Act, 1981 (Act 91 of 1981), it shall be					
sufficient if only the name and postal address of such company, statutory institution or co- operative, as the case may be, the name of each director (if any) thereof and the nature					
and extent of the financial interest of such company, s					
are furnished and not also the interests of individual m					
institution or co-operative (Use an annexure if necessa	•				
(b) State the financial interest in the liquor trade in the Pro					
applicant is a private company, close corporation, part	• •				
shareholder, member or partner thereof or beneficiary	•				
said shareholder member nartner or heneficiary has r	so such interest, this fact must be				

specifically mentioned) (Use an annexure if necessary)Click or tap here to enter text.

Part D (4)	2000 V			
Part D (4)			300	
(a) State the type of registration applied for	- 1	Click or tan	here to enter text.	
, (a) and the type of the grant of the type of type of the type of type of the type of typ				
(b) State what applicant intends selling thereunder/ Click or tap here to enter text.				
what applicant intends to manufacture			83	
		PARTIE S CONTROL OF THE PARTIES.		
Part E (5)				
TARROSS AS A SECOND AS A SECON			P 1	
If application is made for a micro-manufacturer's regis	tration	to produce	e wine only -	
(a) Is applicant- (i) a person who engages in viticulture?			□Yes □No	
(ii) an association of person, most of the mem	hore e	fwhich	□Yes □No	
engages in viticulture	ibeis c	OL WILICII	Lifes LINO	
(iii) a co-operative society, which manufacture	es wine	from	□Yes □No	
grapes produced by members of the co-or				
and of which no other such co-operative s	ociety	is a	,	
member?				
(b) describe the location of the premises where the liquor □Yes □No				
concerned is manufactured with reference to the erf, street or				
farm number				
Mark if part E (5) is not applicable □ Not applicable				
Part F (6)				
raitr (0)				
If applicant is made for a micro-manufacturer's registration-				
(a) is applicant a person who-				
(i) engages in viticulture?			□Yes □No	
(ii) manufactures any other fermented bevera	age?		□Yes □No	
			□Yes □No	
concerned is manufactured with reference to	the erf	, street or		
farm number				
Mark if part F (6) is not applicable			□Not applicable	
Part G (7)	812			
Under what Name is the business to be conducted?	Click	or tan here	to enter text	
Under what Name is the business to be conducted? Click or tap here to enter text.  Will applicant have the right to occupy the premises Click or tap here to enter text.				
referred to in paragraph 8, including such place on				
other premises upon which any approval is to be			4	
exercised, for the purposes of the registration				
applied for?				
In the case of an application for an on-consumption	Click	or tap here	to enter text.	
registration, state in which portion of the premises,				
the sale of liquor is to take place				

Part H (8)				
(a) Is application made in respect of premises which-	·			
(i) Have not yet been erected	☐Yes ☐No			
(ii) Are already erected, but require additions or	□Yes □No			
alterations to make them suitable for the purposes of				
the proposed business?	_			
(iii) are already erected and, in the applicant's opinion, do	□Yes □No			
not require additions or alterations to make them				
suitable for such purposes?				
(b) If paragraph 8(a)(i) or (ii) applies, state-				
(i) The date on which such erection, additions or				
alterations will be commenced with				
(ii) The period which will be required for the erection,	*			
additions or alterations				
0				
Part I (9)				
In the case of a club liquor registration, attach a copy of the rules of	Attached Annexure (If			
the club, certified by the president, chairman or secretary thereof	applicable)			
the class, certified by the president, chairman of secretary thereof	applicable)			
Disclaimer and Signature				
Date:				
Signature of applicant or person authorized to sign				
application				
<i>2</i> 3				
certify that this declaration has been signed and sworn to/affirmed b	efore me at			
his by the applicant/pe	rson authorized to sign			
pplication who acknowledged that -				
-				
i) he/she knows and understands the contents of this declaration				
<ul><li>ii) he/she has no objection to taking the prescribed oath/affirma</li></ul>	ition; and			
iii) he/she considers the prescribed oath to be binding on his/her	conscience, and that the/she			
uttered the following words:				
swear that the contents of this declaration are true, so help me God'	/ / truly affirm that the			
ontents of this declaration are true'.	. / Titaly amiliat the			
officials of this declaration are true.				
Commissioner of Oaths				
ull name:				
usiness address:				
Business address: Designation: Area for which appointment is held:				

# NOTICE OF INTENTION TO APPLY APPLICATION IN TERMS OF SECTION 27 READ WITH SECTION 31 FOR REGISTRATION CERIFICATE

# FREE STATE GAMBLING, LIQUOR AND TOURISM ACT NO 6 OF 2010 AS AMENDED

1	2		m	4
Local Municipality:	Full Names and Surname/ Company Name:	Identity Number/ Company registration number:	Type of Registration applied for:	Type of product to be sold/Manufactured:
	Residential/Postal Address:			
	2			9
Name under which th	Name under which the business is to be conducted:		Name of learning Institution and Distance:	ance:
Full Business Address of Premises:	of Premises:		Name of Place of Worship and Distance:	ice:
			Name of Similar Registered Premises:	
Any person may, within 21 days from objection in writing to the Free State address and telephone number, if any it relates. *The application may be ins Westdene, Bloemfontein, 9301	nin 21 days from to the Free State Liquor Authorit to the Free State Liquor Authorit to number, if any, and where app cation may be inspected at the of tein, 9301	date of publication (date of publication); (address set out hereundlicable, its registration num	n in <i>Provincial Gazette</i> ) lodge in terms o der). The objection must clearly indica iber and address of its office, of the obj ng their office hours. The address of th	Any person may, within 21 days from date of publication in <i>Provincial Gazette</i> ) lodge in terms of section 33 of the Free State Gambling and Liquor Act, 2010 an objection in writing to the Free State Liquor Authority (address set out hereunder). The objection must clearly indicate the full names, identity number, residential address, postal address and telephone number, if any, and where applicable, its registration number and address of its office, of the objector. The objection must also identify the application to which it relates. *The application may be inspected at the offices of the Authority during their office hours. The address of the relevant Office of the Liquor Authority is: 111 Zastron Street, Westdene, Bloemfontein, 9301

Signature of applicant or Person authorized to sign application

Date:

Operations Division
Liquor Processing Sub-Division
Telephone: (051) 404 0300
Email: Reception@fsglta.gov.za

Website: www.gla.fs.gov.za





### APPLICATION IN TERMS OF SECTION 54 FOR A SPECIAL EVENTS REGISTRATION CERIFICATE

### FREE STATE GAMBLING, LIQUOR AND TOURISM ACT NO 6 OF 2010 AS AMENDED

Please print clearly or type the information on this application. An application and registration fee are required, please see the schedule fee at your local office. Unfortunately, no money will be accepted at any of our offices or officials, but money must be deposited in our official bank account and receipt must accompany this application. The application fee is non-refundable. Return your completed application, documentation and appropriate fee to your nearest regional office.

Application are accepted 14 days before the date of event

### INDEX (information required at lodgement)

No .	Document Description	Annexure
(i)	Application	Form FSLA 1
(ii)	Comprehensive written representations	Α
(iii)	Proof of Payment of Prescribed fees	В
(iv)	Report from the SAPS if event is less than 2500 patrons	С
(v)	SASREA Report if the event is over 2500 patrons	D
(vi)	Rough drawing of event layout plan	E

To be completed if application is not prepared by applicant	
Name and Surname: (If applicable)	Law Firm/ Consultant: (if applicable)
Contact Details:	Email Address:

### Part A (Applicant information)

To be complete	d if a	pplicant is Natural Pe	rson			
Initials:	Full	Names:		Surname	e:	
Birth Date:	L	Identity No/Passport	t No:	Age:	Nationality	: Sex:
/ /		identity No/ Passport	. 110.	Age.	- Italionanty	
Residential Address:		Town:		Postal Code:		
			F 1 A . 1			·
Contact Details:		Email Add	aress:			
Below indicated	d info	rmation in with the b	usiness wil	l reside		
ERF Number:	Business Street Address:			Town/City:		
Postal Code:		Local Municipality:		_		
				_		

		- 12	FOITIFFEA				
p	olicant is juristic person						
Name of Company:	Registration Date:	Company R	egistration Number:				
	1 / /						
	Part B		CHARLES OF PROPERTY AND PROPERTY AND ADDRESS.				
Provided success in 1	raico	arana					
(a) Is applicant a r	registrant in terms of the F	ree State	☐Yes ☐No				
'''	Liquor Act, 2010?						
(b) If subparagrap	oh (a) has been replied to in	n the affirmat	ive, state -				
(i) The kind o	of registration:						
(ii) The kind of liquor which may be sold thereunder:							
(iii) Under wha	at name the registered bus	siness is cond	ucted:				
	•		registered business is conducted				
with refere	ence to the erf, street or fa	arm number:					
(c) In the case of	an application by the holds	er of a club lic	quor registration certificate, state				
			equired for a <i>bona fide</i> public				
	e premises of the club in re						
	ame, match, competition of		□Yes □No				
	part of the activities norm						
	(Mark the applicable squa						
	ich are not applicable)	, ,					
	or						
	acilities are reasonably avarenises of the club in the		□Yes □No				
· · · · · · · · · · · · · · · · · · ·							
	Part	C					
			6 4 to 5 and and 2				
			te referred to in paragraph 3-				
(i) On be	half of what or who does a	applicant appl	γ.				
(ii) What	position does applicant ho	ld in institutio	on?				
	373-	- CF1.	— 1482 — 9 pg 1 = 2002				
	Part D (4)						
Minner (at I)	1925						
(a) Is applicant a p	person who-						
(i) has be	en convicted of a contrave	ention of [	∃Yes □No				
this Ac	ct or any other liquor legisl	lation					
within	the three years immediat	ely					
preced	ding the date of application	n?	20.00				
(ii) a pers	on who has been convicte	d, under appl	icable legislation, of an offence the				
eleme	nts of which are inconsiste	ent with the c	bjects and purposes of this Act, at				
any tir							
l	coming into operation of th	nis Act;	∃Yes □No				
and							
' '	three years immediately p	preceding	□Yes □No				
_	of application.		7v - 17v -				
ļ	inrehabilitated insolvent?		Yes No				
l (iv) Isami	inor?		∃Yes □No				

(b) If any of the questions in subparagraph (a) have been replied to full details	in the affirmative, provide
Part E (5)	
State the nature of the occasion in respect of which a special events regirequired:	istration certificate is
Describe the situation of the premises where the business is to be conduerf, street or farm number:	ucted with reference to the
(a) Except in the case of an application by the holder of a club liquor registration certificate, has a special events registration certificate previously been granted to the applicant?	
(b) If answer is yes in (a), state the number of days in respect of which such registration was granted since January of the relevant year	
Describe the place or places on the premises in which the sale of liquor	is to take place:
State the dates upon and the hours during which such sale will take place	
Disclaimer and Signature	
declare/truly affirm that the information furnished in this application an to it, is true.	d in the documents attached
Date:	
Signature of applicant or person authorized to sign	
certify that this declaration has been signed and sworn to/affirmed befo	re me at
this day of by the applicant/person	n authorized to sign
<ul> <li>(i) he/she knows and understands the contents of this declaration;</li> <li>(ii) he/she has no objection to taking the prescribed oath/affirmatio</li> <li>(iii) he/she considers the prescribed oath to be binding on his/her couttered the following words:</li> </ul>	
I swear that the contents of this declaration are true, so help me God'. /'contents of this declaration are true'.	l truly affirm that the
Commissioner of Oaths	
Full name:	
Business address:	
Designation:	
Area for which appointment is held:	

Office held if appointment is ex officio:

Operations Division
Liquor Processing Sub-Division
Telephone: (051) 404 0300
Email: Reception@fsglta.gov.za

Email: Reception@fsglta.gov.za Website: www.gla.fs.gov.za



Official Stamp

# APPLICATION IN TERMS OF SECTION 38 TO EFFECT STRUCTURAL ALTERATIONS OR AN EXTENSION OF REGISTERED PREMISES

### FREE STATE GAMBLING, LIQUOR AND TOURISM ACT NO 6 OF 2010 AS AMENDED

Please print clearly or type the information on this application. An application and registration fee are required, please see the schedule fee at your local office. Unfortunately, no money will be accepted at any of our offices or officials, but money must be deposited in our official bank account and receipt must accompany this application. The application fee is non-refundable. Return your completed application, documentation and appropriate fee to your nearest regional office.

### INDEX (information required at lodgement)

No	Document Description	Annexure
(i)	Application	Form FSLA 1
(ii)	Approved plan building plan set out in regulation 23	Α
(iii)	Description of the applicable portion of the premises as set out in regulation	В
	23	
(iv)	Comprehensive written representations	С
(v)	Copy of registration Certificate	D
(vi)	Proof of payment of prescribed fees	E
(vii)	Consent from the relevant municipality	F
(viii)	Certified Copy of Identity Document or Company documents	Н

To be completed if application is not prepared by applicant					
Name and Surname: (If applicable)	Law Firm/ Consultant: (if applicable)				
Contact Details:	Email Address:				

### Part A (Applicant information)

To be complete	d if a	pplicant is Natural Pe	rson			
Initials:	Full	Names:		Surname:	_	
Birth Date:		Identity No/Passport	No:	Age:	Nationality:	Gender:
Residential Address:		Town:		1	Postal Code:	
Contact Details:		Email Add	dress:			
Below indicated	d info	rmation in with the b	usiness wil	ll reside		
ERF Number:	r: Business Street Address:			Town/City:		
Postal Code:	•	Local Municipality:	_			

To be co	ompleted if appli	cant is juristic person	<u></u>
Name o	f Company:	Registration Date:	Company Registration Number:
			35
		Part B	
(a)	drawn up alterat	tion marked with red pen.	ng structure and attach the initial plan with clearly
	Click or tap here		
(b)	Submit compreh this form) Click or tap here		n (attach your motivation on a separate page as annexure on
	Click of tap here	to enter text.	
	-1.00		
		Disclaimer and Signatu	re The Committee of the
I declar	e/truly affirm tha	t the information furnish	ed in this application and in the documents attached
to it, is	true.		
			Sec. Sec.
Ciamatu		—	Date:
applica:		r person authorized to sigi	
I certify	that this declara	tion has been signed and	sworn to/affirmed before me at
this	da	y of	by the applicant/person authorized to sign
	tion who acknow		
(1)	ha/sha knows a	nd understands the conte	ente of this declaration:
(i) (ii)	•		scribed oath/affirmation; and
(iii)		A 20	pe binding on his/her conscience, and that the/she
(1117)	uttered the follo		se small governo, ner conscience, and that she, she
		W	rue, so help me God'. /'I truly affirm that the
	s of this declarat		rue, so help the dod . / I truly allith that the
content	3 Or this accidiat	ion are true.	
		· N	
Commis	ssioner of Oaths		
Full nan	ne:		
Busines	s address:		
-	ition:		
		nent is held:	<del></del>
Office h	eld if appointme	nt is ex officio:	<u> </u>

No

(i)

Operations Division
Liquor Processing Sub-Division
Telephone: (051) 404 0300

Email: <u>Reception@fsglta.gov.za</u> Website: www.gla.fs.gov.za

**Document Description** 

**Application** 



Official Stamp .

Annexure

Form FSLA 1

### **APPLICATION IN TERMS OF SECTION 39 FOR TRANSFER OF REGISTRATION**

### FREE STATE GAMBLING, LIQUOR AND TOURISM ACT NO 6 OF 2010 AS AMENDED

Please print clearly or type the information on this application. An application and registration fee are required, please see the schedule fee at your local office. Unfortunately, no money will be accepted at any of our offices or officials, but money must be deposited in our official bank account and receipt must accompany this application. The application fee is non-refundable. Return your completed application, documentation and appropriate fee to your nearest regional office.

### **INDEX** (information required at lodgement)

		e written representa ribed fees	tions		20	A B	
To be comple	ted if ap	olication is not prepa	red by app	olicant			
Name and Su	rname: (	If applicable)	Law	Firm/ Con	sultant: ( <i>if appi</i>	licable)	
Contact Details:			Email Address:				
		Part /	A (Applica	nt informal	ion who is the	registrant)	-500-
To be comple	ted if ap	plicant is Natural Per	son				
Initials:	Full	Names:		Surname	2:		
Birth Date:		Identity No/Passpor	t No:	Age:	Nationality	: Sex:	
Residential A	ddress:	. 1611	Town:			Postal Code:	
Contact Detai	ls:		Email Ad	ldress:			
Below indicat	ed inforr	nation in with the bu	siness is si	tuated			
ERF Number:	Bus	iness Street Address	:		Town/City:		
Postal Code:		Local Municipality:					

To be completed if applic	cant is juristic person	
Name of Company:	Registration Date:	Company Registration Number:
	/ /	
THE PERSON NAMED IN COMPANY	Part B	
(a) Under what na	me is the registered busin	ess conducted:
(b) What is reason	for transfer of registration	n?
	Disclaimer and Signatur	
I declare/truly affirm tha		ed in Part A and B this application in so far as it
		authorised to sign the application, is true.
, , , , , , , , , , , , , , , , , , , ,		,
	_	Date:
Signature of applicant or application	r person authorized to sign	
I certify that this declara	tion has been signed and s	sworn to/affirmed before me at
this da	y of	by the applicant/person authorized to sign
application who acknow		
(i) he/she knows a	nd understands the conter	nts of this declaration:
		scribed oath/affirmation; and
• •	s the prescribed oath to b	e binding on his/her conscience, and that the/she
'I swear that the content contents of this declarati		ue, so help me God'. /'I truly affirm that the
Commissioner of Oaths		± € ±
Full name:	<u> </u>	
Business address:		
Designation:		
Area for which appointm		<u> </u>
Office held if appointmen	nt is ex officio:	

# Part C (Information relating to the applicant who is the prospective holder of the registration)

Initials:	Full	Names:		Surname	*	
Birth Date:		Identity No/Passport	t No:	Age:	Nationality:	Sex:
Residential	Address:	-811	Town:		į	Postal Code:
Contact Deta	oils:		Email A	Address:		
( ) Relow indica	ted inforr	mation in with the bu	cinaec ie	situated		
ERF Number		iness Street Address		Situateu	Town/City:	
Postal Code:		Local Municipality:				
				*	530	
To be compl	eted if app	plicant is juristic perso				
Name of Cor	npany:	Registration Date	2:	Company Re	gistration Num	ber:
(c) Is ap	plicant-					
(i) I	las the ap	pplicant been convicte	ed of a		□Yes □No	
(	ontraven	tion of this Act or any	other l	iquor		
I	egislation	within the three yea	rs imme	diately		
ļ	receding	the date of application	on?			
Has the appl	icant beer	n convicted, under ap	plicable	legislation, o	f an offence the	elements of which
are inconsist	ent with t	the objects and purpo	ses of th	nis Act, at any	time -	
(a) after	the comi	ng into operation of t	this Act;	and	□Yes □No	
(b) with	n the thre	ee years immediately	precedi	ng the date	□Yes □No	
of ap	plication					
į ė						
(ii) l	s the appl	licant an unrehabilita	ted inso	lvent?	□Yes □No	
		t is a company, close in subparagraph (i) –	•	tion, partners	ship or trust, sta	te whether a perso
		rolling interest in suc		pany. close	□Yes □No	
		on or trust	., = 00111			
(ii) i	s a partne	er in such a partnersh	ip		□Yes □No	,
(iii) i	s the mair	n beneficiary under su	uch a tru	ıst	□Yes □No	
(e) If any	of the a	uestions in subparagr	anhs (a)	or (b) have h	een replied to it	the affirmative
	-	tails ( <i>use an annexur</i>			con replica to li	. are arminingly by

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	U 4		II bii.

(a) Under what Name is the business to be conducted?	
(b) Will applicant have the right to occupy the premises referred to in paragraph 8, including such place on other premises upon which any approval is to be exercised, for the purposes of the registration applied for?	

### Disclaimer and Signature

I declare/truly affirm that the information furnished in this application and in the documents attached to it, is true.

		Date:				
_	ture of applicant or person author cation					
I certi	ify that this declaration has been s	igned and sworn to/affirmed before me at				
this _	day of	by the applicant/person authorized to sign				
applic	cation who acknowledged that –	8 8				
(iv)	he/she knows and understands the contents of this declaration;					
(v)	he/she has no objection to taking the prescribed oath/affirmation; and					
(vi)	he/she considers the prescribe uttered the following words:	d oath to be binding on his/her conscience, and that the/she				
	ear that the contents of this declara	ation are true, so help me God'. /'I truly affirm that the				
Comn	nissioner of Oaths					
Full na	ame:					
	ess address:					
	nation:					
	for which appointment is held:					

Office held if appointment is ex officio:

Operations Division Liquor Processing Sub-Division Telephone: (051) 404 0300

Email: Reception@fsglta.gov.za Website: www.gla.fs.gov.za

**Document Description** 



Official Stamp

Annoviira

# NOTIFICATION IN TERMS OF SECTION 39(3) REGARDING PROCURING OF A CONTROLLING INTEREST OVER THE REGISTRANT

### FREE STATE GAMBLING, LIQUOR AND TOURISM ACT NO 6 OF 2010 AS AMENDED

Please print clearly or type the information on this application. An application and registration fee are required, please see the schedule fee at your local office. Unfortunately, no money will be accepted at any of our offices or officials, but money must be deposited in our official bank account and receipt must accompany this application. The application fee is non-refundable. Return your completed application, documentation and appropriate fee to your nearest regional office.

### **INDEX** (information required at lodgement)

(i) Application	on				Form	FSLA 1
(ii) Compreh	ensive written represen	tations			Α	
(iii) Proof of <sub>I</sub>	payment of prescribed for	ees			В	
To be complete	ed if application is not pr	epared by a	pplicant			
Name and Surr	name: ( <i>If applicable</i> )	Lav	v Firm/ Con	sultant: ( <i>if app</i>	licable)	_
Contact Details		Em	ail Address:		<del></del>	=======================================
	:				,	<u></u>
	Pa	art A (Appli	cant inform	ation)		
3823	- X			118/1		
To be complete	d if applicant is Natural	Person				
Initials:	Full Names:		Surname	H.		
Birth Date:	Identity No/Passpo	ort No:	Age:	Nationality	r: Sex:	
/ /			7.50	, , , , , , , , , , , , , , , , , , , ,	June	
Residential Add	dress:	Town:			Postal Code:	
Contact Details	Email A	drocci				
( )	Elliali At	auress.				
Below indicated	d information in with the	business w	ill reside			
ERF Number:	Business Street Addre	ss:		Town/City		
Postal Code:	Local Municipalit	y:				

To be completed if app	licant is juristic person	
Name of Company:	Registration Date:	Company Registration Number:
		W.
	Disclaimer and Signatur	e managarita (Caranta Antara)
I declare/truly affirm that to it, is true.	t the information furnishe	ed in this application and in the documents attached
		Date:
Signature of applicant or application	person authorized to sign	
I certify that this declara	tion has been signed and	sworn to/affirmed before me at
this da	y of	by the applicant/person authorized to sign
application who acknow	ledged that –	
(ii) he/she has no o	s the prescribed oath to b	nts of this declaration; scribed oath/affirmation; and be binding on his/her conscience, and that the/she
'I swear that the content contents of this declarat		rue, so help me God'. /'I truly affirm that the
Commissioner of Oaths		
Full name: Business address: Designation: Area for which appointme Office held if appointme	nent is held:	

# Part B Information relating to the person who obtained control (applicant)

To be completed if applicant is Natural Person								
Initials:	Full N	Names:		Surna	me:			
2				121	29.			
Birth Date:	lo	dentity No/Passport	No:	Age:		Nationality	<b>/:</b>	Sex:
/ /	1		<b>-</b>				Da	stal Code:
Residential Add	iress:		Town:				PO	stai Code:
Contact Details	•		Fmail 4	Address:		<u> </u>		
( )	•			daress.				
Below indicated	infori	mation in with the b	usiness	will reside		<u></u>		
ERF Number:	Busir	ness Street Address:				Town/City	•	<u> </u>
Postal Code:		Local Municipality:				1		
To be complete	d if ap	plicant is juristic per	rson					
Name of Comp	any:	Registration Date	e:	Company	y Reg	istration Nu	mbe	r:
		1 /				Ø.		
•								
(a) Is applie	cant-							
, ,		oplicant been convid				□Yes □No		
		ition of this Act or a	- 12	•				
_		within the three ye		ediately				
		the date of applicat n convicted, under a		lo logiclati	00.0	f an offence	tho	olomonts of
		t with the objects ar		-				elelilelits OI
		ing into operation o			-	□Yes □No		
		ee years immediate				□Yes □No		
date of		*		J				
								5.1
(ii) Is the applicant an unrehabilit			tated ins	olvent?		□Yes □No		
(b) If the applicant is a company, close corporation, partnership or trust, state whether a								
		mplated in subparag						
1 ' '		trolling interest in su poration or trust	ich a coi	npany,		□Yes □No		
		er in such a partners	hin.			□Yes □No		•
	·	n beneficiary under	<u> </u>	rust		☐Yes ☐No		
<u> </u>								the affirmative
(c) If any of the questions in subparagraphs (a) or (b) have been replied to in the affirmative, provide full details (use an annexure if necessary)								

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	6	F 26	-	rm

- (a) State the names, identity number and address of each person, including the applicant, who will have any financial interest in the business and in each case the nature and extent of such interest. [If the applicant is a public company, statutory institution or a cooperative as contemplated in the Co-operatives Act, 1981 (Act 91 of 1981), it shall be sufficient if only the name and postal address of such company, statutory institution or cooperative, as the case may be, the name of each director (if any) thereof and the nature and extent of the financial interest of such company, statutory institution or co-operative are furnished and not also the interests of individual members of such company, statutory institution or co-operative (Use an annexure if necessary) Click or tap here to enter text.
- (b) State the financial interest in the liquor trade in the Province of the applicant and if the applicant is a private company, close corporation, partnership or trust, also of every shareholder, member or partner thereof or beneficiary thereunder. (If the applicant or the said shareholder, member, partner or beneficiary has no such interest, this fact must be specifically mentioned) (Use an annexure if necessary) Click or tap here to enter text.

### Part D (5)

If applic	cation is made for a micro-manufacturer's registration to produc	e wine only -
(a)	Is applicant-	
(i)	a person who engages in viticulture?	□Yes □No
(ii)	an association of person, most of the members of which engages in viticulture	□Yes □No
(iii)	a co-operative society, which manufactures wine from grapes produced by members of the co-operative society and of which no other such co-operative society is a member?	□Yes □No
(b)	describe the location of the premises where the liquor concerned is manufactured with reference to the erf, street or farm number	□Yes □No
Mark if	part E (5) if not applicable	□Not applicable

### Part E (6)

If applicant is made for a micro-manufacturer's registration-	
(a) is applicant a person who-	·
(i) engages in viticulture?	□Yes □No
(ii) manufactures any other fermented beverage?	□Yes □No
(b) Describe the situation of the premises where the liquor concerned is manufactured with reference to the erf, street or farm number	□Yes □No
Mark if part F (6) if not applicable	□ Not applicable

Pa	rt	F	(7
_	_	_	

Under what Name is the business to be conducted?  Will applicant have the right to occupy the premises referred to in paragraph 8, including such place on other premises upon which any approval is to be exercised, for the purposes of the registration applied for?  In the case of an application for an on-consumption registration, state in which portion of the premises, the sale of liquor is to take place  Click or tap here to enter text.  Click or tap here to enter text.		
referred to in paragraph 8, including such place on other premises upon which any approval is to be exercised, for the purposes of the registration applied for?  In the case of an application for an on-consumption registration, state in which portion of the premises,	Under what Name is the business to be conducted?	Click or tap here to enter text.
other premises upon which any approval is to be exercised, for the purposes of the registration applied for?  In the case of an application for an on-consumption registration, state in which portion of the premises,	Will applicant have the right to occupy the premises	Click or tap here to enter text.
exercised, for the purposes of the registration applied for?  In the case of an application for an on-consumption registration, state in which portion of the premises,	referred to in paragraph 8, including such place on	
applied for?  In the case of an application for an on-consumption registration, state in which portion of the premises,	other premises upon which any approval is to be	4
In the case of an application for an on-consumption registration, state in which portion of the premises,	exercised, for the purposes of the registration	
registration, state in which portion of the premises,	applied for?	
	In the case of an application for an on-consumption	Click or tap here to enter text.
the sale of liquor is to take place	registration, state in which portion of the premises,	12
	the sale of liquor is to take place	

Part G (8	-78	70		
	я	IΧ	491	16 A

(a) Is	application made in respect of premises which-	
(i)	Have not yet been erected	☐Yes ☐No
(ii)	Are already erected, but require additions or alterations to make them suitable for the purposes of the proposed business?	□Yes □No
(iii)	are already erected and, in the applicant's opinion, do not require additions or alterations to make them suitable for such purposes?	□Yes □No
(b) If	paragraph 8(a)(i) or (ii) applies, state-	
(i)	The date on which such erection, additions or alterations will be commenced with	□Yes □No
(ii)	The period which will be required for the erection, additions or alterations	□Yes □No

### **Disclaimer and Signature**

I declare/truly affirm that the information furnished in this application and in the documents attached to it, is true.

	Date:
Signature of applicant or person authorized to sign application	
I certify that this declaration has been signed and sworn to/a	ffirmed before me at

(iv) he/she knows and understands the contents of this declaration;

\_\_\_\_\_ day of \_\_\_\_\_

application who acknowledged that - .

- (v) he/she has no objection to taking the prescribed oath/affirmation; and
- (vi) he/she considers the prescribed oath to be binding on his/her conscience, and that the/she uttered the following words:

\_\_ by the applicant/person authorized to sign

'I swear that the contents of this declaration are contents of this declaration are true'.	true, so hel	p me God'. /	"I truly affir	m that the
			(A)	
Commissioner of Oaths				
Full name:				
Business address:				
Designation:				
Area for which appointment is held:				
Office held if appointment is ex officio:				

# NOTICE OF INTENTION TO APPLY APPLICATION IN TERMS OF SECTION 41 FOR TEMPORARY REMOVAL OF REGISTRATION

# FREE STATE GAMBLING, LIQUOR AND TOURISM ACT NO 6 OF 2010 AS AMENDED

1	2		m	4 Transfer of the second secon
Local Municipality:	Full Names and Surname/ Company Name:	Identity Number/ Company registration number:	Type of Registration applied for:	Type of product to be sold/Manufactured:
	Residential/Postal Address:			
	S		•	9
nder which the	Name under which the business is to be conducted:		Name of learning Institution and Distance:	ance:
Full Business Address of Premises:	f Premises:		Name of Place of Worship and Distance:	ice:
			Name of Similar Registered Premises:	

address and telephone number, if any, and where applicable, its registration number and address of its office, of the objector. The objection must also identify the application to which it relates. \*The application may be inspected at the offices of the Authority during their office hours. The address of the relevant Office of the Liquor Authority is: 111 Zastron Street, Signature of applicant or Person authorized to sign application Westdene, Bloemfontein, 9301

Operations Division
Liquor Processing Sub-Division
Telephone: (051) 404 0300
Email: Reception@fsglta.gov.za

Email: Reception@fsglta.gov.za Website: www.gla.fs.gov.za





### APPLICATION IN TERMS OF SECTION 41 FOR THE TEMPORARY REMOVAL OF REGISTRATION

### FREE STATE GAMBLING, LIQUOR AND TOURISM ACT NO 6 OF 2010 AS AMENDED

Please print clearly or type the information on this application. An application and registration fee are required, please see the schedule fee at your local office. Unfortunately, no money will be accepted at any of our offices or officials, but money must be deposited in our official bank account and receipt must accompany this application. The application fee is non-refundable. Return your completed application, documentation and appropriate fee to your nearest regional office.

Application are 'only' accepted first Friday of Each Month

### **INDEX** (information required at lodgement)

No	Document Description	Annexui	re
(i)	Application	Form FS	LA 1
(ii)	Building plan of the premises approved by municipality	Α	
(iii)	Detailed description of external and internal features of premises	В	
(iv)	Comprehensive written representations	С	4.5
(v)	Proof of notices required by section 43(2)	D	
(vi)	Proof of payment of prescribed fee	E	

To be completed if application is not prepared by applicant					
Name and Surname: (If applicable)	Law Firm/ Consultant: (if applicable)				
Contact Details:	Email Address:				

### Part A (Applicant information)

To be complete	d if a	pplicant is Natural Pe	rson		_	
Initials:	Full	Names:		Surname:		8
Birth Date:		Identity No/Passport	No:	Age:	Nationality	: Sex:
Residential Address:			Town: Postal Code:			Postal Code:
Contact Details:			Email Add	dress:		
Below indicated	d info	rmation in with the b	usiness wi	ll reside		
ERF Number: Business Street Address:			Town/City			
Postal Code:	•	Local Municipality:				

To be completed if app	olicant is juristic person							
Name of Company:	Registration Date:	Company Registr	ation Number:					
Under what name is th	na registered husiness Con	ducted?						
Under what name is the registered business Conducted?  Will the name change because of the removal?								
If so, state the new name								
ir 30, state the new har	THC .							
Indicate new business	address							
Erf Number:	Erf Number: Business Street Address:							
Local Municipality:			Postal code:					
	Part I		SERVICE THE PROPERTY OF THE PERSONS					
Manual Control of the Control of the Control								
1000		-						
(a) Will applicant have the right to occupy the premises ☐ Yes ☐ No								
1	paragraph 4(b), including s	•						
1	upon which any approval							
	ed, for the purposes of the							
		•	in on-consumption registration,					
state in which	portion of the premises th	e sale of liquor is to	о таке ріасе:					
A CONTRACTOR OF THE PROPERTY O	and the second of the second o							
	Part H (8)							
V.								
(a) la anniliantian m			_					
	nade in respect of premise et been erected	es wnich-	DV DAt-					
		**************************************	☐Yes ☐No					
1 ' '	y erected, but require add		□Yes □No					
	to make them suitable for sed business?	r the purposes of						
	ed business?  / erected and, in the applic	□Yes □No						
1	e additions or alterations t	•	□ res □ No					
	r such purposes?	o make them						
	a)(i) or (ii) applies, state-							
	n which such erection, add	ditions or						
	will be commenced with							
	which will be required for	the erection.						
	or alterations	•						

### Disclaimer and Signature

I declare/truly affirm that the information furnished in this application and in the documents attached to it, is true.

		Date:
_	ture of applicant or person authoriz cation	ed to sign
l certi	fy that this declaration has been sig	ned and sworn to/affirmed before me at
this _	day of	by the applicant/person authorized to sign
applio	cation who acknowledged that –	
	he/she considers the prescribed uttered the following words:	g the prescribed oath/affirmation; and oath to be binding on his/her conscience, and that the/she tion are true, so help me God'. /'I truly affirm that the
Comn	nissioner of Oaths	
Full n	ame:	
	ess address:	
_	nation:	·
	for which appointment is held: held if appointment is ex officio:	

Operations Division Liquor Processing Sub-Division Telephone: (051) 404 0300

Email: Reception@fsglta.gov.za Website: www.gla.fs.gov.za



Official Stamp

# APPLICATION IN TERMS OF SECTION 27(2) FOR MICRO-MANUFACTURER OR AUTHORISED DEALER OF METHYLATED SPIRITS REGISTRATION CERTIFICATE

### FREE STATE GAMBLING, LIQUOR AND TOURISM ACT NO 6 OF 2010 AS AMENDED

Please print clearly or type the information on this application. **An application and registration fee are required**, please see the schedule fee at your local office. Unfortunately, no money will be accepted at any of our offices or officials, but money must be deposited in our official bank account and receipt must accompany this application. The application fee is non-refundable. Return your completed application, documentation and appropriate fee to your nearest regional office. **Application are 'only' accepted first Friday of Each Month** 

### **INDEX** (information required at lodgement)

No	Document Description	Annexure
(i)	Application	Form FSLA 1
(ii)	Building plan of the premises approved by municipality	Α
(iv)	Comprehensive written representations	С
(v)	In case of authorized dealer an indication where methylated spirits will be held	D
(vi)	Proof of payment of prescribed fee	E
(vii)	Certified copy of the identity document or certified proof in the case of trust, consortium, partnership or other legal entity	F

To be completed if application is not prepared by applicant					
Name and Surname: (If applicable)	Law Firm/ Consultant: (if applicable)				
Contact Details:	Email Address:				

### Part A (Applicant information)

To be complete	d if a	applicant is Natural Pe	rson			
Initials:	Ful	Names:		Surname:		
Birth Date:		Identity No/Passport	: No:	Age:	Nationality	: Sex:
Residential Address:		Town:		V.	Postal Code:	
Contact Details:			Email Add	iress:		
Below indicated	linfo	rmation in with the b	usiness wil	l reside		
ERF Number: Business Street Address:			Town/City:			
Postal Code:		Local Municipality:				
Postal Code:		Local Municipality:				

To be completed if app	licant is juristic person		
Name of Company:	Registration Date:	Company Registration Number:	
	/ /		

75300	Part B						
(a)	Is applicant-	.22					
(i)	Has the applicant been convicted of a	□Yes □No					
	contravention of this Act or any other liquor	***					
	legislation within the three years immediately						
	preceding the date of application?						
1	applicant been convicted, under applicable legislation,						
	re inconsistent with the objects and purposes of this Ac						
	after the coming into operation of this Act; and	☐Yes ☐No					
(b)	within the three years immediately preceding the	☐Yes ☐No					
	date of application						
(ii)	Is the applicant an unrehabilitated insolvent?	☐Yes ☐No					
(b)		ership or trust, state whether a					
4.3							
(i)		∟ Yes ∟ No					
4	<u> </u>						
<u> </u>							
(c)		been replied to in the affirmative,					
	provide full details (use an annexure if necessary)						
	1						
LICE II	Part C	The state of the state of the state of					
8874.4							
(a)	·	•					
	101						
	7/4 11						
		·					
	sufficient if only the name and postal address of such company, statutory institution or co-						
	operative, as the case may be, the name of each director (if any) thereof and the nature						
/h)							
(0)							
(i) (iii) (c)	Is the applicant an unrehabilitated insolvent?  If the applicant is a company, close corporation, partner person contemplated in subparagraph (i) —  has a controlling interest in such a company, close corporation or trust is a partner in such a partnership is the main beneficiary under such a trust  If any of the questions in subparagraphs (a) or (b) have provide full details (use an annexure if necessary)  Part C  State the names, identity number and address of each who will have any financial interest in the business and of such interest. [If the applicant is a public company, soperative as contemplated in the Co-operatives Act, 19 sufficient if only the name and postal address of such company.	Person, including the applicant, lin each case the nature and extent statutory institution or a co-or (if any) thereof and the nature attutory institution or co-or (if any) thereof and the nature teatutory institution or co-or (statutory institution or co-or (if any) thereof and the nature teatutory institution or co-operative tembers of such company, statutory ry)Click or tap here to enter text.					

specifically mentioned) (Use an annexure if necessary)Click or tap here to enter text.

	Form FSLA
Click or tap	here to enter text.
er/ Click or tap	here to enter text.
tration to produc	e wine only -
	☐Yes ☐No
bers of which	□Yes □No
s wine from	□Yes □No
erative society	
ociety is a	4
	☐Yes ☐No
the erf, street or	
	☐ Not applicable
	COLORO CONTRA
ation-	
	☐Yes ☐No
(i) engages in viticulture? (ii) manufactures any other fermented beverage?	
(b) Describe the situation of the premises where the liquor concerned is manufactured with reference to the erf, street or	
ille err, street or	
farm number  Mark if part F (6) if not applicable	
	□ Not applicable
	Addition of the second second second
click or tap here	e to enter text.
	tration to produce the swine from perative society is a me liquor the erf, street or ation—

Click or tap here to enter text.

other premises upon which any approval is to be exercised, for the purposes of the registration

In the case of an application for an on-consumption

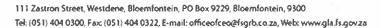
registration, state in which portion of the premises,

the sale of liquor is to take place

applied for?

	Part H (8)	
/a) Is	application made in respect of premises which-	
(i)	Have not yet been erected	☐Yes ☐No
(ii)	Are already erected, but require additions or alterations to make them suitable for the purposes of the proposed business?	□Yes □No
(iii)	are already erected and, in the applicant's opinion, do not require additions or alterations to make them suitable for such purposes?	□Yes □No
(b) If	paragraph 8(a)(i) or (ii) applies, state-	
(i)	The date on which such erection, additions or alterations will be commenced with	□Yes □No
(ii)	The period which will be required for the erection, additions or alterations	□Yes □No
	Part I (9)	
1	e of a club liquor registration, attach a copy of the rules of certified by the president, chairman or secretary thereof	Attached Annexure (If applicable)
urs salarous	Disclaimer and Signature	Charles of the same of the sam
		25
Signature o application	f applicant or person authorized to sign	
I certify tha	t this declaration has been signed and sworn to/affirmed b	efore me at
-	day of by the applicant/perwho acknowledged that –	rson authorized to sign
	she knows and understands the contents of this declaration	
(iii) he/	she has no objection to taking the prescribed oath/affirma she considers the prescribed oath to be binding on his/her ered the following words:	
	t the contents of this declaration are true, so help me God' this declaration are true'.	. / truly affirm that the
Commission	per of Oaths	
Full name:		
	dress:	
	: <u> </u>	
	ich appointment is held:	
Office held i	if appointment is ex officio:	







**ORIGINAL NOTICE** 

### **FORM FSLA20**

### **COMPLIANCE NOTICE**

### FREE STATE GAMBLING, LIQUOR AND TOURISM ACT AS AMENDED

ake notice that the inspector/police officer named below states that you have failed to with the provision of the Free State Gambling and Liquor Act, 6 of 2010, and its regulations at on attached (Annexure).
ake notice that the inspector/police officer named below states that you have failed to with the provision of the Free State Gambling and Liquor Act, 6 of 2010, and its regulations at on attached (Annexure).
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with the provision of the Free State Gambling and Liquor Act, 6 of 2010, and its regulations it on attached (Annexure).
culars of your failure to comply are as set out on the attached sheet (Annexure). hereby required to take the actions, or cease the actions, set out in the attached sheet, at time specified in respect of each of them (Annexure).
o comply with this notice may result in any one or more of the following penalties: ecution in terms of the section 128(2)(e) of the Free State Gambling and Liquor Act, 2010, he offence of failure to comply with this notice, for which the penalty upon conviction is a fining prisonment for a term not exceeding 10 years, or to both a fine and imprisonment.
ecution for an office in terms of section 128 of the Free State Gambling and Liquor Act, for which the penalty upon conviction is a fine or imprisonment for a term not exceeding ears, or to both a fine and imprisonment.
cellation of your registration held under registration numberfor re to comply with this notice, in terms of section 42 of the Free State Gambling and Liquor 2010.





111 Zastron Street, Westdene, Bloemfontein, PO Box 9229, Bloemfontein, 9300
Tel: (051) 404 0300, Fax: (051) 404 0322, E-mail: officeofceo@fsgrb.co.za, Web: www.gla.fs.gov.za

### **ANNEXURE "A"**

<b>.</b>		
Registratio	on number:	
Date	: <u> </u>	
. 1		
I. You ha	ave failed to comply with the provision of the Free State	Gambling and Liquor Act, 2010 and
	tions as set out in:	
*******		
2. You ha	ave failed to comply in that you have:	
**		
	-	
3. <u>You ar</u>	e hereby instructed:	
		₩
76.00°0,00°380		
	within	, from the
date of	this notice.	

## **FSGLTA**

Operations Division
Liquor Processing Sub-Division
Telephone: (051) 404 0300

Email: Reception@fsglta.gov.za Website: www.gla.fs.gov.za





# APPLICATION IN TERMS OF REGULATION 61 OF A NATURAL PERSON TO MANAGE AND BE RESPONSIBLE FOR THE BUSINESS TO WHICH THE REGISTRATION RELATES

## FREE STATE GAMBLING, LIQUOR AND TOURISM ACT NO 6 OF 2010 AS AMENDED

Please print clearly or type the information on this application. An application and registration fee are required, please see the schedule fee at your local office. Unfortunately, no money will be accepted at any of our offices or officials, but money must be deposited in our official bank account and receipt must accompany this application. The application fee is non-refundable. Return your completed application, documentation and appropriate fee to your nearest regional office.

**INDEX** (information required at lodgement) **Document Description** Annexure No Form FSLA 1 (i) Application To be completed if application is not prepared by applicant Law Firm/ Consultant: (if applicable) Name and Surname: (If applicable) **Contact Details: Email Address:** Part A (details of Manager Appointed) To be completed if applicant is Natural Person Initials: **Full Names:** Surname: **Birth Date:** Identity No/Passport No: Nationality: Sex: Age: Residential Address: **Postal Code:** Town: **Contact Details: Email Address:** Below indicated information in with the business will reside **Business Street Address:** Town/City: **ERF Number:** Name of Outlet: **Postal Code:** Local Municipality: Part B (a) Is applicant-□Yes □No (i) Has the applicant been convicted of a contravention of this Act or any other liquor legislation within the three years immediately preceding the date of application?

			Form F
Has t	he applicant been convicted, un	der applicable legislatio	on, of an offence the elements of
whicl	are inconsistent with the object	cts and purposes of this	Act, at any time -
(:	a) after the coming into operati	on of this Act; and	□Yes □No
(	<ul> <li>within the three years immed date of application</li> </ul>	diately preceding the	□Yes □No
	i) Is the applicant an unreh	abilitated insolvent?	□Yes □No
	Domiciled in the Republic of		□Yes □No
<u> </u>	d) Date of Appointment		
	<u> </u>	× ±:	5
	Disclaimer a	nd Signature	
			•
			Date:
<i>applice</i> I certif	y that this declaration has been	signed and sworn to/af	ffirmed before me at
this	day of =	by the appli	icant/person authorized to sign
	tion who acknowledged that –		
(i)	he/she knows and understand	ds the contents of this d	declaration;
(ii)	he/she has no objection to tal	king the prescribed oath	h/affirmation; and
(iii)	he/she considers the prescribe uttered the following words:	ed oath to be binding o	on his/her conscience, and that the
	r that the contents of this decla its of this declaration are true'.	ration are true, so help	me God'. /'I truly affirm that the
· ·			
	issioner of Oaths		
	me:		1.
Busine	ss address:		10
Busine Design	ss address:ation:		10
Busine Design Area fo	ss address: ation: or which appointment is held:		•
usine esign rea fo	ss address:ation:		





111 Zastron Street, Westdene, Bloemfontein, PO Box 9229, Bloemfontein, 9300 Tel: (051) 404 0300, Fax: (051) 404 0322, E-mail: officeofceo@fsgrb.co.za, Web: www.gla.fs.gov.za

## **Pre-inspection Community Interview Form FSLA 26**

		Insp	ectors Details	
Name of Reg	gion:		Date:	Time:
Inspector Na	ime:			
		Inte	erview Details	
			020	
Name and su	ırname:			
Title:		_	Contact D	etails:()
Residential A	Address:		9	
Email addres (Optional):	ss		t)	
(Optional).	(C)			
			s to Ask Interviewer	
0			cant) has applied to the board	for a liquor license (Type) in
Question:	(Business A	address)?		
	98			
2250				ď
Notes:				
	- 0.00			
Question:	Do you thin	nk that there is a deman	d for that type of business in y	our area?
Notes:				
	Are there	uny institution of learning	ig in your area? If yes, what is/a	are the names and estimate
Question:		e from the proposed bu		are the names and estimate
77411				
			.15	
Notes:				

Question:	Are there any places of worship in your area? If yes, what is/are the names and estimate the distance from the promised premises			
Notes:				
Question:	Are there any liquor registration in your area? If yes, what	t is/are the names		
Notes:				
Question:	Do you think there is an over proliferation of liquor outlet explanation.	500		
Notes:				
	*	(i)		
	Do you think that if the Board were to grant the registration public?	n, would it be in the interest of th		
lotes:				
Question:	do you then recommend that the board approve or refuse to	the application?		
Notes:				
Question:	Is there any other thing you would like to bring to the atter	ntion of the board?		
lotes:				
erviewees s	signature	Date		





## Form FSLA 27

Please advise the registration holder to check the details that appear on the registration/ licence certificate are correct, be advised that any deficiency in the control document or failure to obtain the supporting document will delay the correction of the renewal certificate.

LEGISLATIVE INSTRUCTION: SECTION 36, 42 / REGULATION 75 / SCHEDULES 3 & 6

The following documents are required to be sul	bmitted by all liquor registration holder:			
☐ Copy of Renewal Certificate ()				
☐ Copy of Registration Certificate				
☐ Proof of payment				
☐ Copy Identity Document/ Company Registrat	ion			
☐ Copy of death Certificate (If registrant if dece	ased)			
If applicable, submit the following				
☐ Notice of appearance if an attorney or representative is renewing on behalf of the registrant ☐ if the trading name/ registrant detail has changed since the last renewal period, registrant must provide letter of approval from the Authority or Copy of transfer certificate.				
ALL SECTIONS MUST BE COMPLETED BEFOR	E THE RENEWAL CERTIFICATE IS PROVIDED			
Licensed prem	ises information			
Is your licensed premises currently operating?   YES  NO  Is the applicant represented?  YES  NO				
Licensed Premised Name:	License Number:			
Register	red Details			
Title:	Date of Birth:			
Name of Registrant: Identity Number:				
Company Name (if applicable):	Company Registration Number (If Applicable):			
Address of the licensed premises				
Business Address:	Town/ City			
Postal Code:	Email Address *Required:			
Contact Details:				





If the Business Address has changed because of application for removal, provide a copy of the removal certificate.

removal certificate.	
	toca (If different them business address)
Postal Address:	ress (If different than business address)  Town/ City
1 0 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	town, and
Province:	Postal Code:
Signature of	f the registrants or Authorized person
Signature:	Date:
	For Office use only
Comments:	0 3
	å.
	-
Renewal Received and processed by	<u> </u>
	100
Official Stamp	
	10

# SCHEDULE 2 FEES PAYABLE IN RESPECT OF APPLICATIONS

No	Part A	Part B
	Nature of application	Fees Payable R
	ication in terms of section 23 read with section 27 for registro t and methylated spirit registration)	ation (Excluding a special
1	Accommodation establishment: Except Guesthouse	917
2	Accommodation establishment: Guesthouse	917
3	Restaurant	2294
4	Club	1377
5	Tavern	1377
6	Night Club	1835
7	Gambling Establishment	3204
8	Liquor Store	2294
9	Grocer's Wine	2294
10	Micro- Manufacturing of liquor	2294
11	Application in terms of section 54 for special events registration	1200
12	Special Events Registration (Per day) after approval	300
13	Application in terms of section 37 for variation of conditions of registration	580
14	Application in terms of section 38 for alteration or extension of registered premises	580
15	Application in terms of section 39(3) to procure a controlling interest in the business to which the registration relates	580
Appl	cation in terms of section 39 or 41 for transfer and removal of re	gistration
16	Accommodation establishment: Except Guesthouse	2753
17	Accommodation establishment: Guesthouse	1020
18	Restaurant	1653
19	Club	1653
20	Tavern	1377
21	Night Club	1400
22	Gambling Establishment	1400
23	Liquor Store	1653
24	Grocer's Wine	2753

25	Micro- Manufacturing of Liquor	2753
26	Application in terms of section 40(3) for the appointment of a person to conduct registered activities pending appointment of administrator	300
27	Application in terms of section 27(2) for registration as micro manufacturer of methylated spirits	1653
28	Application in terms of section 27(2) for registration as authorized dealer of methylated spirits	1653
29	Application in terms of regulation 61 of a natural person to manage and be responsible for the business to which the registration relates	150
30	Request for Registration certificate reissue/duplication	100

SCHEDULE 3
FEES PAYABLE IN RESPECT OF REGISTRATION CERTIFICATES

No	Registration	Part A	Part B	Part C
		· ·	Fees payable in respect of transfer and removal of registration	Annual registration fees
		R	R	R
1	Accommodation establishment, Except Guesthouse	7 342	1 377	3 345
2	Accommodation establishment Guesthouse	7 342	1 605	4 063
3	Restaurant	13 767	917	1 621
4	Club	9 178	917	1 561
5	Tavern	9 178	917	1 280
6	Night Club	11 014	917	4 395
7	Gambling Establishment	18 356	1835	9 178
8	Liquor Store	9 178	2 295	2 226
9	Authorized dealer of methylated spirits	2 753	1 377	917
10	Grocer's Wine	13 767	2 294	2 803
11	Micro- Manufacturing of Liquor/ Methylated Spirits	13 767	2 294	4013
12	Special Events Registration	1 200		1
13	Special Events Registration (Per day) after approval	300	-	

## SCHEDULE 4

## TIMES OF BUSINESS

Type of Business	Business Hours	Days
Accommodation	10:00am - 00:00am	Monday- Sunday
establishment, Except		
Guesthouse		
Accommodation	10:00am - 00:00am	Monday- Sunday
establishment Guesthouse		
Restaurant	10:00am - 02:00am	Monday- Sunday
Club	10:00am - 02:00am	Monday- Sunday
Tavern	10:00am - 02:00am	Monday- Sunday
Night Club	18:00pm - 04:00am	Monday- Sunday
Gambling Establishment	08:00am - 06:00am	Monday- Sunday
Liquor Store	08:00am – 20:00am	Monday- Sunday
Grocer Wine	08:00am - 20:00am	Monday- Sunday
Special Event	As Determined in registration	Monday- Sunday
	certificate	_

# SCHEDULE 6 TRANSITIONAL CLAUSE FEES PAYABLE IN RESPECT OF REGISTRATION CERTIFICATES AND BUSINESS TIMES APPLICABLE

No	Registration	Part A	Part B	Part C	
		GERMANN CHO. ANY CHOICE CO.	Annual Renewal fees for	Authorised Business Hours	Authorised Days on which liquor may be sold
		R	R		
	On consumption				
	Hotel Liquor Licence	2294	3345	10:00-00:00	Monday-Sunday
	Wine House	917	732	10:00-02:00	Monday-Sunday
	Restaurant Liquor Licence	1377	1621	10:00-02:00	Monday-Sunday
	Club Liquor Licence	1377	1621	10:00-02:00	Monday-Sunday
	Sorghum beer (on consumption)	459	180	08:00-20:00	Monday-Sunday
	Special (Employers)	1376	1815	10:00-02:00	Monday-Sunday
	Special (Tavern)	1147	1280	10:00-02:00	Monday-Sunday
	Special (Accommodation)	1605	4063	10:00-00:00	Monday-Sunday
	Special (Eating House)	1147	362	10:00-02:00	Monday-Sunday
	Special (other)	1377	2006	10:00-02:00	Monday-Sunday
	Sportsground	1377	1210	10:00-02:00	Monday-Sunday
	Theatre Liquor	1377	1210	10:00-02:00	Monday-Sunday
7/8	Off consumption				HAR IN A HINE
	Brewer's licence	2294	4013	08:00-20:00	Monday-Saturday
	Liquor store	1377	2226	08:00-20:00	Monday-Sunday
	Grocer's wine	2295	2803	08:00-20:00	Monday-Sunday
	Wine farmers'	917	362	08:00-20:00	Monday-Saturday
	Sorghum beer brewers	2295	3631	08:00-19:00	Monday-Sunday
	Sorghum beer (off consumption)	1653	605	08:00-20:00	Monday-Saturday
	Producers	917	363	08:00-20:00	Monday-Saturday

## FREE STATE PROVINCIAL GAZETTE

## (Published every Friday)

All correspondence, advertisements, etc. must be addressed to the Officer in charge of the Provincial Gazette, P.O. Box 517, Bloemfontein, Tel.: (051) 403 3139. Free Voucher copies of the Free State Provincial Gazette or cuttings of advertisements are NOT supplied. The **cost per copy** of the Provincial Gazette is as follows:

EMAIL	R	10.00
COLLECTION	R	23.00
POST	R	35.00

## SUBSCRIPTION RATES (payable in advance)

The subscription fee for the Provincial Gazette (including all Extraordinary Provincial Gazettes) is as follows:

6 MONTHS, EMAIL	R 280.00
12 MONTHS, EMAIL	R 560.00
6 MONTHS, COLLECTION	R 500.00
12 MONTHS, COLLECTION	R 1 000.00
6 MONTHS, POST	R 870.00
12 MONTHS, POST	R 1740.00

## CLOSING TIME FOR ACCEPTANCE OF ADVERTS

All advertisements must reach the Officer in Charge of the Provincial Gazette not later than 12:00 (Tuesday), three workings days prior to the publication of the Gazette. Advertisements received after 12:00 on the Tuesday of the publication week, will be held over for publication in the issue of the following week, or if specifically requested by the advertiser, will be published as a "Special Publication". In such cases, the advertisement must be delivered to the Officer in Charge not later than 12:00 on the Thursday preceding the publication of the Gazette and double rate will be charged for that advertisement. Advertisements received for publication on the same day, will be charged at triple the normal rate.

A "Late Advertisement" will not be inserted as such without definite instructions from the advertiser.

## **ADVERTISEMENT RATES**

Notices required by Law to be inserted in the Provincial Gazette: R 66.00 per centimeter or portion thereof.

Advertisement fees are payable in advance to the Officer in charge of the Provincial Gazette, P.O. Box 517, Bloemfontein, 9300, Tel.: (051) 403 3139.

## **NUMBERING OF PROVINCIAL GAZETTE**

You are hereby informed that the numbering of the Provincial Gazette /Tender Bulletin and notice numbers will from 2010 coincide with the relevant financial year. In other words, the chronological numbering starting from one will commence on or after 1 April of every year.

## Printed and published by the Free State Provincial Government

### VRYSTAAT PROVINSIALE KOERANT

## (Verskyn elke Vrydag)

Alle korrespondensie, advertensies, ens. moet aan die Beampte Belas met die Provinsiale Koerant, Posbus 517, Bloemfontein, Tel.: No. (051) 403 3139 geadresseer word. Gratis eksemplare van die Vrystaat Provinsiale Koerant of uitknipsels van advertensies word NIE verskaf nie. Die **koste per kopie** van die Provinsiale Koerant is soos volg:

E-POS	R	10.00
AFHAAL	R	23.00
POS	R	35.00

## INTEKENGELD (vooruitbetaalbaar)

Die intekengeld vir die Provinsiale Koerant (insluitend alle Buitengewone Provinsiale Koerante) is soos volg:

6 MAANDE, E-POS	R 280.00
12 MAANDE, E-POS	R 560.00
6 MAANDE, AFHAAL	R 500.00
12 MAANDE, AFHAAL	R 1 000.00
6 MAANDE, POS	R 870.00
12 MAANDE, POS	R 1740.00

### SLUITINGSTYD VIR DIE AANNAME VAN ADVERTENSIES

Alle advertensies moet die Beampte belas met die Provinsiale Koerant bereik nie later nie as 12:00 (Dinsdag), drie werksdae voordat die Koerant uitgegee word. Advertensies wat na 12:00 op die Dinsdag van die publikasie week ontvang word, word oorgehou vir publikasie in die uitgawe van die volgende week, of as die adverteerder dit verlang, sal dit geplaas word in 'n "Buitengewone Koerant". In sulke gevalle moet die advertensie aan die Beampte oorhandig word nie later nie as 12:00 op die Donderdag voordat die Koerant gepubliseer word en dubbeltarief sal vir dié advertensie gevra word. 'n Drievoudige tarief sal gevra word vir advertensies wat ontvang is vir publikasie op die selfde dag.

'n "Laat Advertensie" sal nie sonder definitiewe instruksies van die Adverteerder as sodanige geplaas word nie.

## **ADVERTENSIETARIEWE**

Kennisgewings wat volgens Wet in die Provinsiale Koerant geplaas moet word: R 66.00 per sentimeter of deel daarvan.

Advertensiegelde is vooruitbetaalbaar aan die Beampte belas met die Provinsiale Koerant, Posbus 517, Bloemfontein 9300, Tel.: (051) 403 3139.

## NOMMERING VAN PROVINSIALE KOERANT

U word hiermee in kennis gestel dat die nommering van die Provinsiale Koerant / Tender Bulletin en kennisgewingnommers vanaf 2010 met die betrokke boekjaar sal ooreenstem. Met ander woorde, die kronologiese nommering beginnende met een, sal op of na 1 April van elke jaar begin.

Gedruk en uitgegee deur die Vrystaatse Provinsiale Regering