

**THE MURANG' AALCOHOLIC DRINKS CONTROL ACT, 2014
APPLICATION FOR A PROVISIONAL ALCOHOLIC DRINKS LICENCE
OR TEMPORARY EXTENSION OF ALCOHOLIC DRINKS LICENCE**

1. Name of Applicant.....

2. Applicant's postal address.....

3. Type and number of licence held.....

4. Type of licence required.....

*5. Address to which temporary licence should be made applicable.....

.....

*6. Period for which temporary licence required.....

*7. Extension times applied for.....

Date.....

Signature of Applicant.....

*Delete where not applicable.