Ref:

T.L.B.2

REPUBLIC OF KENYA

THE TRANSPORT LICENCING ACT (Cap 404)

APPLICATION FOR LICENCE

TO: THE LICENCING AUTHORITY, P.O. BOX 30440, NAIROBI

I/We hereby apply for a licence as under and I/We hereby declare that to the best of my / our knowledge and belief all the statements in the application are true.

Full name of applicant (in BLOCK Letters)

Address Postal Code

(1) Road Service Licences:

(b) <u>The proposed time-table, fare-table and a map approved by the District Commissioner</u> <u>must be submitted with this application.</u>

OR

Signature of Applicant

D.C.s are requested to make their recommendations on page 2 Applicants must not write on page 2 or 3. BUT MUST COMPLETE PAGE 4

				Passenger
		Туре		(excluding driver)
Regn. number		(lorry, tanker,	Tare	or
of vehicle	make	trailer)	weight	loading-carrying capacity

INSTRUCTIONS

If the applicant is not in possession of a vehicle:

(a) The first, second and fourth columns should not be completed as headed but should be used to indicate the number of vehicles applied for:

(b) The third and fifth columns must always be completed.

This space to be left blank for use in Transport Licencing Board Office