Date received	
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Date Processed	

# Namibia Tourism Board

# **APPLICATION FOR RENOVATIONS – REBUILDING**

#### INSTRUCTIONS FOR THE COMPLETION OF THIS FORM

- a) Complete the form in full and answer all questions.
- b) Write in CAPITAL block letters.
- c) Where choices are given, mark only the appropriate box with an X.
- d) A prescribed application fee (in crossed postal orders or cheques made out to the Namibia Tourism Board) must accompany this application. An application not accompanied by the prescribed application fee, relevant documents and which is incomplete will NOT BE PROCESSED.
- e) All information will be treated confidentially as prescribed by the Namibia Tourism Board Act 2000 (Act 21 of 2000).
- f) Submission of this application does not guarantee immediate approval. Final approval will depend on comprehensively completed application form, attachment of all relevant documentation and compliance with the minimum requirements as detailed in the Registration Regulations.
- g) Application form must be submitted to:

	The Chief Executive Namibia Tourism Private Bag 132	Board 244
	Windhoek, Nam For Attention: HEA	
Receipt number:		
NTB registration number:		

Head Office Namibia – Windhoek Channel Life Building Floor M2-2nd Post Street Mall Tel: +264 61 290 6013 Fax: +264 61 25 4848 Private Bag 13244, Windhoek info@namibiatourism.com.na www.namibiatourism.com.na



#### **1. DETAILS OF THE APPLICANT**

Trading name / Name:		
Date established:		
NTB registration number (if applicable):		
Physical address business:		
(Please specify Street Name and/or Road Number)		
Postal address business:		
City / Town:		
Region :		
Telephone number: Fax numb	ber:	
Mobile number:		
E-mail address:		
Website:		
GPS Co-ordinates:		
2. DETAILS OF RENOVATIONS – REBUILDING		
2. DETAILS OF RENOVATIONS - REDUILDING		
DECLARATION		
I hereby certify that to the best of my knowledge the information fur	rnished herein is true and correct.	
Place	Data	
Place:	_ Date:	
Signature of applicant:		

## FOR OFFICE USE ONLY

	Date	Initials of Data Capturer	
Date received			
Date captured			
Date approved / rejected			
Date issued			

## RECOMMENDATION

Recommended for approval		Rejected		
APPLICABLE CONDITIONS:				
SIGNATURE	RANK		DA	ATE
APPROVAL				
Approval granted:	Yes 🗆		No	0 🗆
APPLICABLE CONDITIONS:				
SIGNATURE	RANK		DA	ATE

