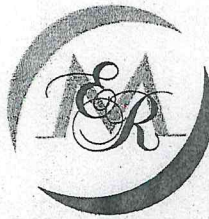


MER Building, First Avenue
Private Bag X 9908,
White River, 1240
Mpumalanga Province,
South Africa



MPUMALANGA
ECONOMIC REGULATOR

Tel: +27 (0)13 750 8000
licensing@mer.org.za
http://www.mer.org.za

APPOINTMENT OF A LICENCED LIQUOR BUSINESS MANAGER
IN TERMS OF SECTION 45 OF THE MPUMALANGA LIQUOR LICENCING ACT, 2006

DETAILS OF THE LICENCE HOLDER


1	Name of the Licence Holder	JACOBUS GERT CORNELIUS EHLERS
2	Licence Number	9-2-1-06950
3	Telephone / Mobile Number	013 244 1829 / 076 220 3689
4	E-Mail Address	freedom@licentia.co.za

DECLARATION BY THE APPOINTED MANAGER

5	Full Names	Nkosi Bonele Nkosi
6	ID Number (attach a copy)	820618 0340 08 0
7	Are you an unrehabilitated insolvent? (Yes/No)	NO
8	Are you the subject of a court order declaring you a person of unsound mind/ mentally disordered/ mentally defective? (Yes/No)	NO
9	Have you been convicted of contravening the Mpumalanga Liquor Licensing Act, 2006 for the past three years? (Yes/No)	NO
10	Have you been convicted of an offence the elements of which are inconsistent with the object of the Mpumalanga Liquor Licensing Act, 2006 for the past three years? (Yes/No)	NO
11	Kindly provide details if the response to any of questions 7, 8, 9 or 10 was "Yes".	
12	Signature	
13	Date	03 / November 2022

APPOINTMENT OF A LICENCED LIQUOR BUSINESS MANAGER
IN TERMS OF SECTION 45 OF THE MPUMALANGA LIQUOR LICENCING ACT, 2006

DECLARATION BY THE PERSON APPOINTING THE MANAGER

14	Is this a compulsory appointment of a Manager by a juristic person? (Yes/No)	NO
15	Is this a voluntary appointment of a Manager by a sole proprietor? (Yes/No)	YES
16	Does this appointment replace a previous Manager? (Yes/No) (If Yes, provide the name or reference number of the previous Manager).	NO
17	Name of the person appointing the Manager (if not the Licence Holder).	N/A
18	Do you have the authority to appoint Managers and terminate services of Managers on behalf of the Licence Holder? (Yes/No)	YES
19	Proof of Payment of Prescribed Fee (attach copy)	Not Applicable
20	Signature	
21	Date	03 November 2022

--- end ---

GEREGISTREERDE WOON- EN POSADRES

waar die bewys van u GEREISTREERDE WOON- EN
RES in hierdie dok is.

en u van adres verander het, of indien besonderhede van u
adres, by. straatnaam en/of -nommer, ens. verander het,
vorm KENNISGEWING VAN ADRESVERANDERING, wat
die agter in die identiteitsdokument is, gebruik word om die
ing aan te meld en moet dit ingedien word by of gepos word
naaste streek- of distrikkantoor van die DEPARTEMENT VAN
HOMSAKE.

REGISTERED RESIDENTIAL AND POSTAL ADDRESS

the proof of your REGISTERED RESIDENTIAL AND
ADDRESS in this pocket.

have changed your address, or, if particulars of your
ss, e.g. name of street and/or street number, etc., have
the NOTICE OF CHANGE OF ADDRESS form in the
back of the identity document must be used to report
and it must be handed in at or posted to the nearest
office of the DEPARTMENT OF HOME AFFAIRS.

1

I.D.No. 820618 0340 08 0



S.A.BURGER/S.A.CITIZEN

VAN/SURNAME

NKOSI

VOORNAME/FORENAMES

NKOSIBONELE

GEBOORTEDISTRIK OF-LAND/
DISTRICT OR COUNTRY OF BIRTH

SOUTH AFRICA

GEBOORTEDATUM/
DATE OF BIRTH

1982-06-18

DATUM UITGEREIK
DATE ISSUED

2000-05-05

UITGEREIK OP GESAG VAN DIE
DIREKTEUR-GENERAAL:
BINNELANDSE SAKKE

ISSUED BY AUTHORITY OF THE
DIRECTOR-GENERAL:
HOME AFFAIRS

