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|  | Licence Requirements for Retail of Petroleum Products | Doc. Type. | Form |
| | | Doc. No. | LN.FM-012 |
| | | Issue Date | 2024-01-26 |
| | | Revision No. | 00 |
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| Licensing | | | |

*This **Checklist** should be completed and submitted together with “Form I – Application Form”*

This licence involves engaging in entrepreneurial activities relating to retail of petroleum Products

Instructions

1. Read Energy Regulation (General) Regulations 2023 before completing this form
2. Use capital letters and where applicable mark with ☒
3. This checklist has eight (8) parts.
 - a. For initial application, applicants must complete parts: **A,B(I),C,D,G&H**
 - b. For amendment to licence, applicants must complete parts: **A, B(I),C, E, G&H**
 - c. For renewal application, applicants must complete parts: **A,B(II), C,D,F, G&H**
4. Use a separate application form for each project.

A. Application Particulars

Name of Applicant _____

Please mark with ☒ to select type of entity or specify in “other”

- Limited Liability Company
 Partnership
 Sole Trader
 Body Corporate
 Trust
 Other (please specify)

Company/Entity’s Registration Number _____


ZRA Taxpayer Identification Number (TPIN) _____

ERB (application fee) Receipt Number _____

Please mark with ☒ to select type of application

- Initial
 Amendment
 Renewal

Note *If the selected type of application is “Amendment” please complete “Part B(i), “Part D” and go to “Part F”*
If the selected type is “Renewal” please “Part B(II), “part C”, “Part D”, “Part E” and go to “Part G”

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B. Financial Information

I. Initial Application –Cost of Investment


Please provide the projected total cost of investment in the activities to be Licenced

| | |
|-------------------|--|
| Amount in Figures | |
| Amount in Words | |

| Proof of funds for working capital | Mark <input checked="" type="checkbox"/> where applicable |
|---|---|
| Line of credit from a financial institution | <input type="checkbox"/> |
| Letter of sponsorship/financing | <input type="checkbox"/> |
| Latest Bank statement (Not later than 3 months) | <input type="checkbox"/> |
| Grants | <input type="checkbox"/> |
| Other (specify) | <input type="checkbox"/> |

II. Renewal Application – Determination of Net worth - (Use audited financial statements not older than 2 years)

| Non-Current Assets (A) (ZMW) | Current Assets(B) (ZMW) | Current Liabilities(C) (ZMW) | Net Worth (D)= A+B-C | Proportion of Licenced Activity to entire Business (%) |
|---------------------------------|----------------------------|---------------------------------|-------------------------|--|
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D. Permission from other Authorities

| Requirement | Issue date | Expiry date | Reference No. |
|--|------------|-------------|---------------|
| Local Authority (Valid Fire Certificate) | | | |
| Valid ZMA certification | | | |

E. Application for Amendment

Name of facility _____

Licence Number _____


| |
|--|
| Outline of proposed amendments to licence, |
| |

| |
|---|
| Attach relevant supporting documents (including a “Cover Letter” justifying the proposed amendment) |
| |

F. Application for Renewal (should be submitted at least 3 months before expiry of existing licence)

| | |
|--|--|
| Please provide the following details of the current licence | |
| Current Licence No | |
| Issue Date | |
| Expiry Date | |

| | |
|---|--|
| Are there any outstanding liabilities on the current licence? | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| If yes, please specify. | |

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G. Declaration by Applicant

I (full name in block letters) _____
 declare that the particulars, details and information given in this checklist are true and correct to the best of my knowledge

Signature **Date**

H. Appendices *(Please attach the following to your application where applicable)*

| Requirement | YES | NA |
|---|--------------------------|--------------------------|
| Letter stating cost of investment <ul style="list-style-type: none"> • Bill of Quantity signed by qualified Quantity Surveyor (Initial application only) • Cost of purchase and/or cost of rebranding | <input type="checkbox"/> | <input type="checkbox"/> |
| Proof of ownership or lease of retail site | <input type="checkbox"/> | <input type="checkbox"/> |
| Valid fire certificate issued by Local authority | | |
| Completion Certificate by an engineer registered by the Engineering Institution of Zambia (applicable to new Retail Sites (Greenfield) and only applicable to brownfield projects that have not been in operation for a period of six months or more and require works to comply with the regulations, standards and codes of practice) | | |

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|----------------------------------|
| Review of the Application |
| |

Recommendation Approval Reject Request for additional information

| |
|---|
| Reason(s) or Condition(s) for the Recommendation |
| |

Reviewed by _____ **Sign** _____ **Date** _____

Checked by _____ **Sign** _____ **Date** _____

Approved by _____ **Sign** _____ **Date** _____