



# Keetmanshoop Municipality

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E-mail: [info@khpmmun.com](mailto:info@khpmmun.com), 37 Hampie Plichta Avenue

## APPLICATION: CERTIFICATION OF FITNESS AND REGISTRATION FOR THE YEAR 2023/2024

1. NAME OF OWNER / MANAGER OF THE BUSINESS: \_\_\_\_\_
2. I.D. NUMBER OF OWNER: \_\_\_\_\_
3. POSTAL ADDRESS: \_\_\_\_\_
4. TELEPHONE / CELLPHONE NUMBER: \_\_\_\_\_
5. NAME OF BUSINESS: \_\_\_\_\_
6. PHYSICAL ADDRESS OF THE BUSINESS: \_\_\_\_\_  
ERF NUMBER: \_\_\_\_\_ TOWN/TSEIBLAAGTE/KRONLEIN/WESTDENE/NOORDHOEK/ILENI
7. REGISTRATION APPLIED FOR / TYPE OF OPERATING BUSINESS: \_\_\_\_\_
8. NUMBER OF EMPLOYEES: \_\_\_\_\_
9. INDICATE WITH AN "X" WHETHER THIS APPLICATION IS IN RESPECT OF:
  - NEW REGISTRATION: \_\_\_\_\_
  - RE- REGISTRATION: \_\_\_\_\_ REF NO: \_\_\_\_\_
  - RELOCATION OF BUSINESS: \_\_\_\_\_
  - ALTERATION OF INFORMATION ON EXISTING REGISTRATION: \_\_\_\_\_
  - BUSINESS CLOSURE: \_\_\_\_\_
9. PRODUCTS OFFERED FOR SALE (**INFORMAL TRADERS/HAWKERS ONLY**):  
\_\_\_\_\_

**[I hereby declare that the information provided by me (the Applicant) in the form is true and without mendacities]**

\_\_\_\_\_  
SIGNATURE OF APPLICANT

\_\_\_\_\_  
DATE

### PLEASE NOTE: ALL APPLICATIONS TO BE SUBMITTED WITH THE FOLLOWING SUPPORTING DOCUMENTS

	New	Re-Registration	Alteration
Building plan (floor layout) of the intended business	*		*
Copy of Owner's ID	*		*
Founding Statement	*		*
Municipal water bill	*	*	*
Medical examination certificate [Food handlers] ( <b>If Applicable</b> )	*	*	
Approved application form from LED office [Home based businesses]	*		
Hawker allocation number from LED office [Hawker/Street vendors]	*	*	*
Deed of Sale ( <b>If Applicable</b> )	*		*
Rental Agreement or Consent to Operate/Register ( <b>If Applicable</b> )	*		*
Shack Number ( <b>Informal Settlement</b> )	*	*	
Proof of payment	*	*	*
Work visa ( <b>If Applicable</b> )	*	*	

- ALL REGISTRATIONS MUST BE DONE BEFORE 31 MARCH EACH YEAR.
- LATE REGISTRATION WILL BE THE NORMAL REGISTRATION FEE PLUS N\$ 15.00 PER DAY
- APPLICANT TO RECEIVE THE FITNESS/REGISTRATION CERTIFICATE WITHIN 10 WORKING DAYS FROM DATE OF SUBMISSION
- APPLICATION AND SUPPORTING DOCUMENTS TO BE SUBMITTED AT THE RECEPTION OR E-MAIL TO [pliyali@khpmmun.com](mailto:pliyali@khpmmun.com) or [ehp@khpmmun.com](mailto:ehp@khpmmun.com) WITH BUSINESS NAME AS SUBJECT

**OFFICE USE ONLY****RECEIPT NO:**

<b>CATEGORY 1</b>	<b>TARRIF INCL 15% VAT</b>	<b>MARK "X"</b>
Hawkers - Designated	N\$ 462.00	
Hawker - Seasonal	N\$ 220.00	
Shebeens	N\$ 1600.00	
Home based business and stalls	N\$ 550.00	
Bottle Collection	N\$ 220.00	
Car Wash	N\$ 750.00	
Beauty Parlour	N\$ 550.00	
Barber Shop	N\$ 350.00	
Food Truck	N\$ 660.00	
<b>CATEGORY 2</b>		
Driving School	N\$ 700.00	
Small General Dealers (<10 Employees)	N\$ 550.00	
Big General Dealers (10 Employees)	N\$1100.00	
Supermarkets and Food Wholesale	N\$2530.00	
Warehouse Industry & Stores	N\$2500.00	
Funeral Homes	N\$1500.00	
Furniture Stores	N\$1725.00	
Restaurant	N\$550.00	
Small Food Outlets	N\$600.00	
Restaurant and bar	N\$2750.00	
Clothing Wholesale	N\$1650.00	
Workshops (Non-Vehicle)	N\$1000.00	
Clothing Retail	N\$550.00	
Gymnasium	N\$550.00	
Cash Loan	N\$935.00	
Bank	N\$2200.00	
Insurance Company	N\$1320.00	
Hotels and Lodges	N\$1650.01	
Guesthouse and B&B	N\$880.00	
Medical Practice/ Medical Laboratory/All other laboratories	N\$2200.00	
Schools (Kinder Garden/Private Schools)	N\$935.00	
Butcheries	N\$990.00	
Service stations, Garage, Workshop and Other Oil Depots	N\$2749.70	
Car Dealership	N\$2200.00	
Car Dealership with Service Centre	N\$2500.00	
Abattoirs	N\$2200.00	
Professional and Other office run Organisations (including SOE's and NGO's)	N\$900.00	
Noxious Industry Business	N\$2750.00	
Bottle Store	N\$2530.00	
Bars	N\$2750.00	
Night Clubs, Lounges, Gambling Houses	N\$2750.00	
Agriculture (Feedlots, Irrigation scheme, Faming business)	N\$880.00	

LATE REGISTRATION: N\$ 15.00 / DAY LIMITED TO THE ACTUAL REGISTRATION AMOUNT

CALCULATION: \_\_\_\_\_ DAYS \* N\$ 15.00 / DAY = N\$ \_\_\_\_\_

PLUS 15% VAT N\$ \_\_\_\_\_

TOTAL N\$ \_\_\_\_\_

**Confirmation of Type of Business:**

Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**REMARKS:**


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