

BURS APPLICATION FOR A STAMP IMPRESSION DIE - CIGARETTE MANUFACTURER CE 132

(This form must be completed in quadruplicate. The original and 3 copies must be submitted to BURS)

APPLICANT TRADING PARTICULARS

Business registration name			
Business trading name			
Business registration number			
Business registration number		Importer registration number	
Income Tax registration number		VAT registration number	
Registered address of business			
Physical office address of business			
Postal address of business			
Physical address where there the stamp will be used			
Telephone number(s)		Facsimile number(s)	

APPLICANT'S REPRESENTATIVE

Surname		Botswana ID number	
Full names			
Passport number		Passport country of issue	
Physical residential address of representative			
Relationship to Applicant		Contact details	
Nature of authority to represent Applicant (Mark with "X")		Company: Resolution	Corporation or Partnership: Express written consent
		Delegated officer or an organ of State	

BRAND & VARIANT PARTICULARS

Brand name	
Variant	
Packaging type	

TECHNICAL PARTICULARS

Machine type	
Machine specification	

ORIGINALS OR CERTIFIED COPIES OF DOCUMENTATION TO ACCOMPANY THE APPLICATION

- (a) Resolution/consent or other authority as applicable with regard to the applicant's representative enabling him/her to complete this application.
- (b) Technical drawing to be supplied by the Manufacturer of the positioning of the stamp impression die in the machine.

DECLARATION

Signed at on the day of the month of in the year 2010.

.....
(Signature)

.....
(Capacity)

.....
(Full Names and Surname)

.....
(Witness: Full Names and Surname)

.....
(Signature)

.....
(Witness: Identity/Passport number)

.....
(Witness: Contact number)