APPLICATION FOR CERTIFICATE OF REGISTRATION FOR SPRAY ROOMS AND BOOTHS

For office use only **Permit No:** **File: 17/2/2**	**Application for Certificate of Registration for Spray Rooms and Booths in terms of Sections 123 of the Saldanha Bay Fire Safety By-Laws**	
Owner's Details		
Name of Owner		
	Tel No	
	Cell No	
Name of Certified Business		
	Tel No	
	Cell No	
Occupancy		
Plot No		
Location of Venue		
Street Address		
Suburb		

Flammable Substance Details		
Manner of Storage	**Itemised quantity of products**	**Product**

Remarks
Signature of Applicant: