

PART I: PARTICULARS OF APPLICANT

MAJLIS BANDARAYA KUCHING SELATAN

COUNCIL OF THE CITY OF KUCHING SOUTH

DEWAN BANDARAYA KUCHING SELATAN, JALAN PADUNGAN, 93675 KUCHING, SARAWAK, MALAYSIA TEL.: 082-354200 / 242311 FAX: 082-240686

FORM C THE ENTERTAINMENT BY-LAWS,2001

APPLICATION FOR RENEWAL OF LICENSE

1.	Nam	ne of Applicant	•						
2.	Iden	tity Card No.	:			3.	Passport No. :		
4.	Nationality		:						
5.	Add	ress (Home)	:						
6.	Telephone No. :								
7.	If applicant is a Company / Organization, state:								
	a.	Name of Company	/ / Organization	:					
	b.	Total Capital (if ap	plicable)						
	c.	Address of Compa	ny/Organization						
	d.	Registration No. of Business/Company (if applicable) :							
	e.	Date of Registration		:					
	f.	Date of Expiry		:					
	g.	Telephone No.		:					
PAR	T II: D	ETAILS OF APPLICA	ANT						
A. A	PPLIC	ATION FOR RENEW	AL OF LICENSE TO	OPER	ATE A PLA	CE O	F ENTERTAINMENT		
1.	Add	ress	:						
2.	Floo	r Area	:						
3.	Owr	nership	: Owner	•	Ten	ant			
4.		e of Entertainment	:		<u></u>				
5.		e of Operation	· From				+0		
6.		ation of License	•						

B. APPLICATION FOR RENEWAL OF ENTERTAINMENT LICENSE

No.		Name/Place of Entertainment	Type of Entertainment									
			Music	Singing	Dancing	Exhibition of Cinematography film	Others (State)					
1.	Is ar	ny foreign artiste to										
		es, a copy of visa/worl wak to be supplied w			tiste and the a	pproval of the State So	ecretary					
2.	Tota	l number of rooms	umber of rooms (if any) : Seating capacity :									
3.	No.	of karaoke machine	s/kiddy rides/	video machii	nes :							
4.	Peri	od of Entertainmen	ainment (Dates) : From to									
5.	(i)	Times of entertain	iment :	From		to						
						to						
	to											
	(ii)	Number of entertainment per day / per night / per month :										
	(iii)		ckets for sale / complimentary tickets :									
		Tickets for sale	tickets									
6.	Purp	oose of entertainme	ent :									
	(i)	Commercial	Ye	es	No							
	(ii)	Non-commercial	Ye	es	No							
	If for non-commercial purpose, state full name and address of proposed recipient and letter of Certification of proposed recipient.											
	Name :											
	Add	ress :										
PART	ΓIII: I	DECLARATION										
I/W	'e											
Ident	tity c					lare all the informati	on given above					
is co	rrect	and true.										
Date	:					(Applicant	t's Signature)					

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