

Stream



OKAHAO TOWN COUNCIL

PO BOX 699
 OKAHAO
 OMUSATI REGION

TEL: +264-65-252204/5
 FAX: +264-65-252201

APPLICATION FOR RENTAL SPACE: OKAHAO TECHNICAL BUSINESS CENTRE

NOTE: **CERTIFIED COPIES OF THE FOLLOWING DOCUMENTS OF THE APPLICANT MUST BE SUBMITTED WHERE APPLICABLE:**

1. *ID document*
2. *Companies or Close Corporation registration certificate*

1. PERSONAL DETAILS OF APPLICANT

- A. Surname and Full names of the Applicant: _____
- B. ID or passport number of the Applicant: _____
- C. Nationality: _____
- D. Gender: _____
- E. Marital Status: _____
- F. Residential Address: _____
- G. Contact No 1: _____ Contact No 2: _____
- H. Email address _____
- I. Postal address: _____

2. BUSINESS DETAILS

- A. Name of the Business: _____
- B. Business registration No: _____

C. Physical address (where is the business located? Erf number / or detailed description of location)

D. Number of employees _____

E. Describe nature of business (Current business activities)

3. INTENDED USE OF RENTAL SPACE

A. **ALL** business activities planned to be conducted at the space applied for

B. Type of space applied for (Tick the appropriate column)

Type	Size	Rental Fee (per month)	Tick
Kiosk (closed)	20 m ²	N\$ 525.00	
Workshop	47 m ²	N\$ 735.00	
Take Away	20 m ²	N\$ 735.00	
Auto Mech Workshop	115 m ²	N\$ 1, 050.00	
Salons	Per Chair	N\$ 472.50	
Warehouse	96 m ²	N\$ 1, 815.00	

* Rental fees are valid for a 12 month period and will increase as per signed agreement

* Rental fees exclude the cost of utilities (water & electricity)

4. MOTIVATION

(Briefly indicate why your application should be considered)

Terms and Conditions

- The Okahao Town Council reserves the right not to approve or to refuse to consider any application that is not fully completed or supported by the documents as required.
- Should it at any stage transpire that any of the information supplied is incorrect or false, Okahao Town Council reserves the right to cancel the leasing of the stand.
- If this application is approved a rental agreement has to be constituted and signed between Okahao Town Council (Lessor) and the Lessee.
- The applicant solely agrees and takes responsibility to pay the monthly lease fees on time as determined and duly take care of the property and use it only for the purpose as approved by Council. Failure to comply the Council shall terminate the lease and recover any arrears and/or the cost of repairs if any damage is done to the property.
- The Okahao Town Council shall terminate your lease after failing to pay the rental or failing to use the stand for two consecutive months.
- The rental or lease fees for the properties are subject to change as determined by the Council.
- The applicant undertakes to adhere to the Local Authority Act (23 of 1992), Council’s by-laws and general health regulations.
- The applicant will be required to obtain a fitness certificate from the Council for his or her business on the rented property.
- The applicant is bound to pay municipal services supplied by the Council to his or her business.

I hereby declare that all information provided in this form is true and Council should take necessary action if any information is found to be false and/or intentionally misleading.

SIGNED AT-----ON THIS ----- DAY OF-----20-----

SIGNATURE OF APPLICANT

OFFICIAL USE ONLY

COMMENTS: FINANCE & ICT DEPARTMENT

<p>Has the applicant had any account/s with Council before? _____</p> <p>If yes, has the applicant kept up with his/her obligations towards the account/s? _____</p>
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Would you object to the applicant leasing the Council property? _____

Under what conditions, if any, would you allow the applicant to lease the Council's property?

DATE	SIGNATURE
------	-----------

COMMENTS: PLANNING AND TECHNICAL SERVICES

Has the applicant contravened any regulations before? (e.g. illegal connections) _____

Has the applicant contravened any town planning procedures before? _____

Would you object to the applicant leasing the Council property? _____

Under what conditions (if any) would you allow the applicant to lease the Council's property?

DATE	SIGNATURE
------	-----------

APPROVAL

APPROVED/NOT APPROVED

REASONS (IF ANY):

CONDITIONS (IF ANY):

RENTAL SPACE ASSIGNED (number):

COUNCIL RESOLUTION: _____ DATE OF THE MEETING: _____

SIGNED BY:

CHAIRPERSON OF THE MANAGEMENT
COMMITTEE

CHIEF EXECUTIVE OFFICER

DATE: _____

DATE: _____