

KINGDOM OF ESWATINI

APPLICATION FOR AN **LPG RETAIL LICENCE** IN TERMS OF THE PETROLEUM ACT (Act No.18 of 2020)



Please return completed form to:

Eswatini Energy Regulatory Authority
First Floor, RHUS Office Park, Karl Grant Street
P.O. Box 7137
MBABANE
H100
Eswatini

Tel: +268 2404 2103
Fax: +268 2404 8474
E-mail: info@esera.org.sz
Website: www.esera.org.sz

APPLICATION FEE PAYMENT DETAILS

| | |
|------------------------|--------------------------------------|
| Amount | E 4 500.00 |
| Account Number | 20000528917 |
| Account Title | Eswatini Energy Regulatory Authority |
| Type of Account | Corporate Current Account |
| Bank Name | Ned Bank |
| Branch | MBABANE |
| Branch Code | 360164 |
| Swift Code | NESWSZMX |

NB: For Reference, put in your **COMPANY NAME**

APPLICATION SUBMISSION DETAILS

Email: info@esera.org.sz

WhatsApp: 7808 7920

For Enquiries, please contact **ESERA Compliance Officer – Oil & Gas** on:

Tel: +268 2404 2103

Cell: +268 7808 8944

E-mail: mhlangax@esera.org.sz

SECTION A

PARTICULARS OF LICENCE APPLICATION

A.1 State nature of application (mark which is applicable)

- Issue of new licence
- Renewal of Licence
- Amendment or variation of Licence
- Transfer of Licence
- Surrender of Licence

A.2 Desired period of validity of Licence

Desired commencement date: ____/____/____ Desired validity period: ____ years

SECTION B

PARTICULARS OF APPLICANT

B.1 Registered full business and trading name of applicant:

B.2 Identity number of the **Applicant/Director**, or in the case of a body corporate, registration number:

B.3 Nationality of applicant, or in the case of a body corporate, country of registration:

B.4 In the case of an authority created by law, the name of the law in terms of which that authority is established/created and/or other creation documents:

B.5 Physical and postal address of the applicant:

B.6 Telephone and cell phone number of the applicant:

(_____) _____

(_____) _____

B.7 Fax number of the applicant:

(_____) _____

B.8 E-mail address of the applicant:

B.9 Designated contact person on behalf of the applicant:

Name: _____

Position: _____

Telephone No. _____

Fax No. _____

Email: _____

B.10 Signature on behalf of applicant:

Submitted at _____ on _____ 20_____

Signature

Name

Witnesses:

Signature

Signature

Name

Name

SECTION C

APPLICANT'S BUSINESS AND RETAIL FUNCTION DETAILS

C1. Indicate by cross x type of entity or specify in "other"

LIMITED LIABILITY COMPANY CLOSE CORPORATION SOLE TRADER

PARTNERSHIP BODY CORPORATE TRUST OTHER

Specify, if other:

C2. Indicate local ownership in percentage % (of Applicant)

C3. Tax Number:

C.4 Name of LPG Supplier

C.5 LPG Supply Agreement (Attachment)

C.6 Volumes (Kgs) Sold in the last calendar year (existing market participants)

SECTION D

| |
|----------------------------|
| RETAIL SITE DETAILS |
|----------------------------|

D.1 Please provide the following information:

- i. A) Description, for new applicants including location and GPS coordinates, site layout, any drawings, buildings proposed retail establishment. These must be in accordance the recommendations made in SZNS SANS 10087-7:2007 or any other local industry standards.
B) Existing applicants submit GPS coordinates, site layout and images of the storage area.
- ii. Submit a map to readily identify the area to which the application relates.
- iii. Details on site adequacy including detailed plans on LPG storage and handling to ensure health and safety

D.2 Site License Number (If issued)

Note: Where a new retailer applies for a retail licence to replace an existing retailer, in such a case please enter the site licence number.

² General Dealer – any other reseller of LPG who does not operate a filling station

³ Each site must be linked to an LPG supplier

SECTION E

FINANCIAL AND OPERATIONAL INFORMATION: EXISTING OPERATIONS AND PROJECTIONS FOR NEW ENTRANTS

For each operation, the following information is required:

E.1

- a. New entrants must provide the necessary detailed business with cashflow projections.
- b. Proof of financial means for the undertaking (i.e., Bank Guarantee, Proof of Credit Facility, Bank Statement -3 months)

E.2 Existing applicants must submit annual Income Statements and Balance Sheet.

SECTION F

ADDITIONAL INFORMATION

Please provide any other relevant information, which the applicant wishes to include with this application

DOCUMENTS TO BE ATTACHED FOR A RETAIL LICENCE APPLICATION

Check if all sections of the form & documents to be attached have been included.

| APPLICATION FORM | YES | NO |
|--|------------|-----------|
| Section A: Particulars of Licence Application | | |
| Section B: Particulars of Applicant | | |
| Section C: Applicant's Business and Retail Function Details | | |
| Section D: Retail Site Details | | |
| DOCUMENTS TO BE ATTACHED | | |
| Motivation for the retailing activity proposed in the form of business plan (new entrant) | | |
| Certified copy of the applicant or Directors' identity document | | |
| Business Registration – Trading Licence, Form J & C, Certificate of Incorporation | | |
| LPG Supply agreement | | |
| Proof of land ownership or right of land use- Lease/title deed /king's consent (all applicants) | | |
| Bank Guarantee/Proof of Credit Facility/ Bank Statements (New entrants only) | | |
| Financial Statements (existing applicants) | | |
| Valid Tax Clearance Certificate (existing applicants) | | |
| Location Maps and GPS Coordinates (all applicants) | | |
| Occupational Health, Safety, Risk and Quality Management Plan | | |
| Environmental Approval (New Entrants Only) | | |
| Retail site Designs (New Entrants only) | | |
| Letter indicating municipal/local authority approval for use of land for purpose intended (new entrant) | | |
| Clearance Certificate from the Chief Fire Officer in accordance with the Building Act | | |
| Technical support for installation | | |
| Proof of payment of application fee (all applicants) | | |
| If necessary, the original or certified copy of a declaration by the applicant giving reasons why any attachment required is not provided. | | |

DECLARATION

I (full names) _____ hereby declare that all information provided herein is within my personal knowledge and that-

- a) I am duly authorised to make this declaration;
- b) I am the designated person responsible for this licence and any conditions attached thereto;
- c) I have read and understood the regulations related hereto, with specific reference to the Petroleum Regulation regarding any false declaration; and
- d) all information provided herein is to the best of my knowledge true and correct.

Signed at _____(place) on this _____ day of _____(month) _____(year).

Signature

I certify that the deponent-
(a) has acknowledged that he/she knows and understands the contents of this application form and its annexures, that he/she has no objection to taking the prescribed oath and that he/she considers the oath binding on his/her conscience; and
(b) has in the prescribed manner sworn that the contents of this application form and its annexures are true and signed same

before me at _____(place) on this _____ day of _____(month) 20____(year).

Signature

COMMISSIONER OF OATHS

Name: _____

Address: _____

Capacity: _____

Stamp