

DIRECTOR GENERAL
TEA BOARD OF TANZANIA
P.O. Box 2663
DAR ES SALAAM – TANZANIA

APPLICATION FOR GREEN LEAF TEA BUYERS LICENCE

- 1. I/We..... (Name of Individual of Firm)
of..... (Postal Address) Tel: No..... Fax:.....
e-mail
- 2. I have/have not been previously licensed as a GREEN LEAF TEA BUYER
- 3. My previous license was No..... dated
- 4. My administrative office will be located on premises situated at Plot.....at
.....street..... (Town/Place)
- 5. Attached is a list of approved green leaf tea buying centers from which we are going to
buy green leaf tea (Please attach list)
- 6. I have read and will comply with the Statutory Provisions governing the holding of
green leaf tea Buyers License

Signature of Applicant.....Date

FOR OFFICIAL USE ONLY

License is granted to the named applicant to carry on the business of GREEN LEAF TEA
BUYING subject to the relevant condition.

Checked and found correct:

Signature:.....Designation:.....Date:.....

Authorized for grant of license:

Signature:.....Designation:.....Date:.....