

CASHEWNUT BOARD OF TANZANIA

Serial No. 009/200.....

CBT/CP/001

One Copy to send to
The Managing Director
P.O. Box 533
MTWARA - TANZANIA



G.N. No. 369

No. 0239

Tel. 023-2333303

Fax. 022-2113161

023-2333536

APPLICATION FOR CASHEWNUT PROCESSING LICENCE

1. I/we (Name of Individual of Firm) of (Postal Address), Tel. No. Telex No. Fax No. hereby apply to be licensed for the year ending 30th September, 20.... As a CASHEWNUT PROCESSOR.
2. I have/have not been previously licensed as a CASHEWNUT PROCESSOR
3. My previous licence was No. dated which expired/expires on 20.....
4. My business office will be located at Plot No. at Street (Town/Place)
5. (a) I process the following Cashewnut of (Region)
(b) My factory have an installed capacity of tones per annum or kgs per day of clean Cashewnut.
(c) Details of machinery and equipment of my factory are listed on the attached sheet.
(d) My Godown for RCN are located at
6. I have read and will comply with the Statutory Provisions governing the holding of licence for CASHEWNUT PROCESSING as amend by the Board from time to time.

Signature of Applicant:

Date:

Designation:

Stamp of the Company:

FOR OFFICIAL USE ONLY

Licence be granted to the named applicant to carry on the business of CASHEWNUT PROCESSING subject to the relevant conditions.

Authorized for grant of licence

Signature: Designation: Date: