

## FIRST SCHEDULE

(r8(1))

COUNTY GOVERNMENT OF .....

## FORM F1

## APPLICATION FOR A COFFEE ROASTER'S LICENCE

1. Name of Applicant.....
2. Postal Address .....Postal Code.....
3. Registered address ..... Building.....
  - a. Street.....
  - b. Town/City..... L.R. No. ....
  - c. Mobile No. ....
  - d. E-mail.....
4. Where the applicant is a company
  - a) Name of company .....
  - b) Date of Incorporation .....
  - c) Registration No.....
5. Full names, addresses and occupations of the directors:
 

	Name:	Address:	Occupation:
1.	-----	-----	-----
2.	-----	-----	-----
3.	-----	-----	-----
6. Branch Office(s) if any
  - a. Postal Address.....Postal code.....
  - b. Building ..... Street .....
  - c. Town/City..... L.R. No. ....
  - d. Mobile No..... e. E-mail .....
7. I/We certify that that the information hereby given in this application is true and I/We commit to comply with the terms and conditions of the licence.  
 Date.....  
 Name of Director..... Signature .....
- Name of Director..... Signature .....
- Name of Director..... Signature .....
8. Licensing requirements shall be as per the Second Schedule of these Regulations.
9. Name, Address and mobile number of the owner/authorized officer:
  - a. Name: .....
  - b. Physical Address .....
  - c. Mobile number: .....