

City of Windhoek

Department of Economic Development and Community Services

PO Box 59, Independence Avenue, Windhoek, Namibia

APPLICATION FOR CERTIFICATE OF FITNESS

CF 05

| To be completed in the | e presence of the Commissioner of Oath. the undersigned, ID / passport number | | | | | |
|--|--|--|--|--|--|--|
| | hereby declare that the business (insert the business name) | | | | | |
| ceased to operate on (date) | and I hereby like to deregister the business. | | | | | |
| | BUSINESS DETAILS | | | | | |
| ErfSuburb | Expiry date | | | | | |
| Reasons for deregistration: | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| Applicant's signature: | Date: | | | | | |
| | | | | | | |
| FOR THE COMMISSIONER OF OATH | | | | | | |
| Sworn before me at: | (place) on this day of 20 | | | | | |
| Commissioner of Oath Name: | | | | | | |
| | | | | | | |
| Signature: | | | | | | |
| Date Stamp: | | | | | | |
| FOR OFFICE USE | | | | | | |
| The Certificate of Fitness for the abovementioned business was not renewed for year/s: (indicate the years). | | | | | | |
| NB: Outstanding fees to be paid before the business is deregistered; no deregistration will be done if | | | | | | |
| outstanding fee is not paid. | | | | | | |
| Confirm the outstanding fees with the Section Head: Business Registration | | | | | | |

The Gateway to Endless Opportunities

Business Name:

CITY OF WINDHOEK

Department of Economic Development and Community Services



CHECKLIST FOR DE-REGISTRATION ANNEXURE A (CF 05)

The checklist for Certificate of Fitness should be completed, signed and dated for every application for Certificate of Fitness. Kindly note that no application will be processed without the below listed documents.

| Erf No & Suburb: | | | | |
|--|-----------------------|----------------------------|---|--|
| Street: | | E-REGISTRA | HOLL | |
| Type of Business: | | | | |
| Conta | ct details: | Cell: | | |
| Email Address: | | | | |
| Applica | ant's Signature: | Date: | | |
| REQUIF | RED DOCUMENTS | | Please Tick√/NA | |
| | | | OFFICER: INFORMATION & BUSINESS REGISTRATION: | |
| 1 | Business owner's Idea | ntification/Valid Passport | | |
| In case of the Manager/Representative, to provide ID/valid passport and a representation letter as per resolution) | | | | |
| 2 | | | | |
| | | | | |
| OFFICE USE | | | | |
| | | | | |
| NB: No application should be processed without all the required documents. | | | | |
| Acknowledge receipt of all supporting documents: | | | | |
| Application received by: | | | | |
| | | | | |
| | | | | |
| Signature: | | | | |
| Date: | | | | |
| | | | | |
| | | | | |