APPLICATION FORM FOR A SCUBA/HOOKA DIVING FACILITY

INSTRUCTION:		Underline surnames for "address". Provide as much detail as possible.
ADDRESS TO:		The Minister, Ministry of Agriculture, Forestry and Fisheries, Government Buildings, Waterfront, CASTRIES.
		nereby apply for a licence to operate a scuba diving/hookad in the manner described below:
1.	Name of Estab	olishment
2.	Mailing Addre	ess of establishment:
3.		dress of owner of establishment:
4.	Name and Ado	dress of Lessee (if leased):
5.	Name, Addres	s and Qualifications of Operation/Manager:
6. mainte	Nature of oper enance etc.) :	ration to be undertaken (types of diving activities, dive training, equipment sales,
7.	Names and de	scription of vessels to be used by facility:
8.		ual capacity (number of divers on trips per year) :
Tel: /.		1 ⁻ dA
Email		
Signat	ture of Applicant	:Date :

NEW APPLICANTS

In addition to completing the above form, you should also provide in writing to the Chief Fisheries Officer the following details.

- 1. Proposed location of the establishment.
- 2. Proposed clientele of the establishment and proof of affiliation to clientele organization.
- 3. The nationality of all potential staff including the manager.
- 4. The size of the establishment (e.g. The number of boats, staff, dive masters)5. The rationale as to why you feel it is necessary to establish a new operation and not utilize already exiting
- The potential sites that will be used for the intended SCUBA activities.
- Any other relevant information that may be useful for consideration of this application.

NOTE: Completing this application does not guarantee issuance of licence.

Any licence issued on the basis of this application form is liable to cancellation if any of the information given in the form is incorrect.