## **APPLICATION FORM FOR A SNORKELLING 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.
Ihereby apply for a licence to operate a snorkelling facility at the place and in the manner described below:		
1.	Name of Establishment	
2.	Mailing Address of establishment :	
3.		ress of owner of establishment :
•••••		
4.	Name and Add	ress of Lessee (if leased) :
5.	Name, Address	and Qualifications of Operation/Manager :
•••••		
6. sales, n		ation to be undertaken (types of snorkelling activities, snorkel training, equipment
•••••		
7.	Names and des	cription of vessels to be used by facility:
8.	Estimated annu	al capacity (number of persons snorkeling on trips per year) :
CONTACT INFORMATION		
Tel:		

Email....

## **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, snorkel leaders)5. The rationale as to why you feel it is necessary to establish a new operation and not utilize already exiting operations.
- 6. The potential sites that will be used for the intended SNORKEL activities.
- 7. 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.