



## CONTACT DETAILS

Business TV Licence Department

(011) 330 9702 | [businessstvlic@sabc.co.za](mailto:businessstvlic@sabc.co.za)

Web: [www.tvlic.co.za](http://www.tvlic.co.za)



# TV Licences

Pay yours. Make a difference.

# Business TV Licence Application Form

NAME OF THE BUSINESS:

REGISTRATION NUMBER:

VAT NUMBER:

PHYSICAL ADDRESS OF THE BUSINESS (DOMICILIUM):  
  
  
 POSTCODE

POSTAL ADDRESS OF THE BUSINESS:  
  
  
 POSTCODE

NO OF TV SETS IN THE BUSINESS:

DATE TV SET/S ACQUIRED:

DETAILS OF LESSOR IF PREMISES IS RENTED BY THE BUSINESS:

DURATION OF BUSINESS LEASE:

START DATE

END DATE:

### CONTACT DETAILS FOR PAYMENTS:

NAME OF CONTACT PERSON:

DESIGNATION OF CONTACT PERSON:

LANDLINE (  )

E-MAIL

CELL

### DETAILS OF APPLICANT:

FULL NAME OF APPLICANT:

DESIGNATION OF APPLICANT

SIGNATURE

DATE

☐ I hereby confirm I have the necessary authority to open a business TV Licence on behalf of the above mentioned business.  
(Please mark with an x)