




Document ID	GCAM-Licensing-04/2019	 الهيئة العامة للإعلام المرئي والمسموع GENERAL COMMISSION FOR AUDIOVISUAL MEDIA
Document Name	Licensing Standard Operating Procedure	

7.1.1.2 Physical distribution

7.1.1.2.1 Application Form

 الهيئة العامة للإعلام المرئي والمسموع GENERAL COMMISSION FOR AUDIOVISUAL MEDIA	
PHYSICAL DISTRIBUTION	
Applicant Details	
Entity name	
Entity owner Full Name	
ID/Passport #	
CR Number	
Email	
Phone #	
Headquarters National Address	
Building No.	
Street name	
Neighborhood Name	
City	
Postal code	
Additional number	
Responsible in Charge Details	
Full Name	
ID	
Email	
Phone #	
Applicant request type	
New <input type="checkbox"/>	Renewal <input type="checkbox"/> Modification <input type="checkbox"/>
Applicant Activity type	
Retail (sell and rent) <input type="checkbox"/>	Import and Distribution <input type="checkbox"/>
Applicant Sub-activity type	
Non-cinematic movies & video programs <input type="checkbox"/>	Audio recordings <input type="checkbox"/> Video Games <input type="checkbox"/>
Additional Details (if activity Type - Retail)	
Identify the respective License	
Sell <input type="checkbox"/>	Rent <input type="checkbox"/>
Full Name (Store manager)	
ID	
Email	
Phone #	

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Details Required		#
# of Employees		
# of Saudi Employees		

LICENSE REQUIREMENTS:	COMPLIANCE (Y / N)	DOC. ATTACHED (Specify)	OBSERVATIONS
Copy of the commercial registration matching the company activity	Y / N		
Copy of the lease contract of headquarters or property deed	Y / N		
In case the request refers to a renewal of license or modification of it, attach the original required license	Y / N		
Copy of the vehicle form if the request refers to a mobile studio. It must be under the ownership of the applicant	Y / N		
If the applicant is a registered company, attach a copy of the company's Memorandum of Association and copies of IDs or Passports (for non-Saudis) of all partners, directors and members of the board of directors. In addition, if one of the partners is a registered company then attach its Company Registration as well	Y / N		
Copy of the national ID or Passport (for non-Saudis) of all personnel mentioned in this form	Y / N		
Curriculum Vitae of the person in charge, providing proof of experience in the area	Y / N		

OBSERVATIONS REGARDING THE USAGE OF THIS DOCUMENT:


1 The form should be filled in all its mandatory fields to ensure an efficient process and its acceptance. In case the form is not filled accordingly, the same will be rejected.

PLEDGE

I hereby undertake to abide by the audio and video media regulations, its executive regulations, its terms and conditions, and to obtain the license to import, distribute, sell and lease the visual and audio media content issued by the Minister of Information and Chairman of the General Authority for Audiovisual Media No. 16927 dated 4/3/1440 H. I also acknowledge the correctness of the information contained in this form and therefore signed.

Signature	Designation	Name	Date
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

DATA FIELDS	DESCRIPTION
Applicant Details	
Entity Name	Provide the name of the Entity related to the respective License, as per the CR
Entity Owner Full Name	Provide the Entity owner or owners' full names
ID / Passport #	Provide ID #, or Passport # in case the applicant is non-Saudi
CR Number	Company Registration number
Email	Provide email for further contact, if required
Phone #	Provide phone number for further contact, if required
Headquarters National Address	
Building No.	Provide the Building Number where the headquarter is located
Street Name	Provide the Street Name where the headquarter is located
Neighborhood Name	Provide the area / neighborhood where the headquarter is located
City	Provide the city where the headquarter is located
Postal Code	Provide the postal code where the headquarter is located
Additional Number	Provide additional number
Responsible in Charge Details	
Full Name	Provide the name of the responsible in charge of the Entity, if not the applicant
ID	Provide the ID of the responsible in charge of the Entity, if not the applicant
Email	Provide the email of the responsible in charge of the Entity, if not the applicant

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Phone #	Provide the phone number of the responsible in charge of the entity, if not the applicant
Applicant Request Type	Identify if the application refers to a new license or a renewal / modification of a current one
Applicant Activity Type	Identify if the License activity type refers to Retail (sell and rent) or Import and Distribution activities
Applicant Sub-activity Type	Identify if the License Sub-activity type refers to Non-cinematic movies & video programs, Audio recordings, or Video Games
Additional Details	In case activity Type was Retail, identify if the Retail License activity type refers to Sell or Rent
Full Name (Store manager)	Provide the name of the <i>Store manager</i> in charge of the Entity, if not the applicant
ID	Provide the ID of the responsible in charge of the Entity, if not the applicant
Email	Provide the email of the responsible in charge of the Entity, if not the applicant
Phone #	Provide the phone number of the responsible in charge of the entity, if not the applicant

7.1.1.2.2 Checklist



الهيئة العامة
للإعلام المرئي والمسموع
GENERAL COMMISSION
FOR AUDIOVISUAL MEDIA

PHYSICAL DISTRIBUTION

Please select the status for each requirement, from the drop-down list, and provide any comments, in case of "Rejected" or "Pass with comments" status

#	Requirements Checklist:	Status	Comments (if applicable)
1	Form fully and correctly filled		
2	Details regarding Employees and Saudi Employees provided		
3	Copy of the commercial registration matching the company activity		
4	Copy of the lease contract of headquarters or property deed		
5	In case the request refers to a renewal of license or modification of it, attach the original required license		
6	Copy of the vehicle form if the request refers to a mobile studio. It must be under the ownership of the applicant		
7	If the applicant is a registered company, attach a copy of the company's Memorandum of Association and copies of IDs or Passports (for non-Saudis) of all partners, directors and members of the board of directors. In addition, if one of the partners is a registered company then attach its Company Registration as well		
8	Copy of the national ID or Passport (for non-Saudis) of all personnel mentioned in this form		
9	Curriculum Vitae for the responsible in charge (should ideally show a degree and / or practical experience on the related field)		

Signature

Department

Name

Date