

# Application for Issue of New Licence

**Applicant Name:** John Doe

**National ID:** 63-1234567-89

**Address:** 123 Main Street, Masvingo

**Phone:** +263-77-123-4567

**Email:** john.doe@example.com

**Business Type:** Retail Shop

**Licence Type:** Shop Licence

**Location:** CBD, Masvingo

I hereby declare that the information provided is true and correct.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_