



City of
Ekurhuleni

HAWKER TRADING APPLICATION FORM

PERSONAL INFORMATION (attach certified copy of ID)	
NAMES	
SURNAME	
DATE OF BIRTH	
AGE	
ID NUMBER	
GENDER	
NO. OF DEPENDENTS	
RESIDENTIAL ADDRESS (Proof of address to be attached)	
TEL/CELL NO.	
E-MAIL ADDRESS	
NAMES OF SECONDEE - attach certified copy of ID	
NAMES AND SURNAME OF SECONDEE	
ID NUMBER	
TEL/CELL NO	
E-MAIL ADDRESS	
RESIDENTIAL ADDRESS (Proof of address to be attached)	
TRADING/BUSINESS INFORMATION	
PERMIT NO	
BLOCK/DEMARICATION NO	
STREET NAME (where trading takes place)	
AREA (market place or open street)	
TOWN/TOWNSHIP	
No OF YEARS/MONTHS TRADING	
NO OF DAYS PER WEEK	
STARTING AND FINISHING TIME	
TYPE OF GOODS/SERVICES TRADED	
TYPE OF FACILITIES USED (open demarcation or stall)	
WRITTEN MOTIVATION BY APPLICANT	

TRADING CONDITIONS TO BE ADHERED TO BY THE HAWKER			
A. Application must be accompanied by a certified copy of Identity Document.			
B. Proof of residential address (where the applicant resides).			
C. Applicant agrees to abide to the following requirements:			
1. The trading permit is not transferable.			
2. The trader is allowed to appoint one seconded person to trade in his / her absence.			
3. The seconded person shall only be one whose details accompanied the application.			
4. The trader shall comply with all municipal regulations, procedures and by-laws [copy provided at cost / free].			
5. The trader shall be responsible for safe keeping of municipal property, maintenance and general upkeep of the facility or area where she/he performs business.			
6. General cleaning, storage and disposal of waste shall be the responsibility of the trader.			
7. Trading permit shall be available and displayed by the trader at all times during trading hours.			
8. Trading hours shall be between 06h00 – 18h00 on working days AND 07h00 – 15h00 on Saturdays, Sundays and public holidays.			
NB: Any incorrect information supplied by the applicant and non-compliance with the requirements stated above shall automatically nullify this application and the trading approval will be withdrawn without any further notice.			
Name of Applicant	Signed at	Date	Signature
FOR OFFICE USE			
COMMENTS FROM DEPARTMENTS		SUPPORTED	NOT SUPPORTED
EMPD			
ENVIRONMENTAL HEALTH			
FIRE AND EMERGENCY			
CITY PLANNING			
ECONOMIC DEVELOPMENT			
CUSTOMER RELATIONS			
APPROVED/NOT APPROVED			
NANE OF CUSTOMER RELATIONS	Name of Official/Manager: _____	Signature	
	Date: _____		
ECONOMIC DEVELOPMENT	Name of Official/Manager: _____	Signature	
	Date: _____		