



Application for a Holiday Furnished Premises Licence

In terms of the Malta Travel and Tourism Services Act 1999

File Reference

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Receipt No: _____

Receiving Officer: _____

**MALTA TOURISM AUTHORITY
Licensing Administration Section
229 Merchants Street
Valletta VLT 1170**

Date Received Stamp

The application for a Holiday Premises Licence is in three parts: Part A, Part B and Part C. All relevant parts pertaining to the application in Part A and Part C are to be filled in. The documents as requested in Part B are to be submitted following approval of the initial application by the Malta Tourism Authority.

This application form carries a fee of € 46.59. Applicants are to present payment at the MTA Cash Office at 229 Merchants Street, Valletta, Malta or at the MTA Branch Office at Tigrinja Palazz, Triq ir-Repubblika, Victoria, Gozo, prior to submission of application. A copy of the receipt is to be submitted with this application.

DATA PROTECTION STATEMENT: Personal information provided in your application is protected under the Data Protection Act 2001. The Malta Tourism Authority will process your personal data in accordance with the provisions of the Data Protection Act (Chapter 440 of the Laws of Malta) for licensing and administrative purposes and to comply with the Authority's legal obligations. Upon approval of your application, the Authority, occasionally, may use your personal details for marketing purposes.

Warning to applicant. Any false statements, misrepresentation or concealment of material fact on this form or on any document presented in support of this application, may be grounds for criminal prosecution.

If you still have queries you can telephone for advice on 22915000.

Part A

01	Applicant's Details (to whom licence shall be issued)
	Name & Surname _____
	Nationality _____
	I.D. No _____
	Address _____
	Locality _____
	Tel /Mobile _____
	Fax _____

	E-Mail	_____
	Internet	_____
	VAT Number	_____
	Registered Company name <i>(if applicant is a body corporate)</i>	_____
	Registered company number	_____
	Registered address	_____
	Tel/Fax No	_____
	E-Mail	_____

02	Operator's Details (if different from applicant)	
	Name & Surname	_____
	Nationality	_____
	I.D. No	_____
	Address	_____
	Locality	_____
	Tel /Mobile	_____
	Fax	_____
	E-Mail	_____
	Internet	_____
	VAT Number	_____
	Registered Company name <i>(if applicant is a body corporate)</i>	_____
	Registered company number	_____
	Registered address	_____
	Tel/Fax:	E – Mail: _____

03	Location of Proposed Development (<i>Please complete in block letters</i>)
	Trading Name _____
	Address _____
	Locality _____

04	Proposed category & classification (<i>tick where applicable</i>)					
		Standard	Comfort	Superior	Bedrooms	Beds
	Apartment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Studio	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Villa	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Farmhouse	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Other (please state)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Part B

05	Submission Requirements (to be submitted with part A of the application)
1	Site plan
2	Layout plan/drawing of the premises certified and dated by an Architect
3	Receipt of application fee € 46.59
4	A copy of the Planning Authority permit

Part C

06	Declaration regarding right of use of the premises:
	<p>I hereby declare that I have sought and procured the consent of the owner of the premises to process this application in terms of law.</p> <p>Signature of applicant</p> <p>Name of applicant</p> <p>. I.D Card Number of applicant</p> <p>Signed in the presence of</p> <p>(Please enclose photo copy of both sides of applicant's I.D. card).</p>

07	<p>Declaration by Applicant and Spouse (<i>Please complete in block letters</i>)</p> <p><i>This form is being signed as follows:-</i></p> <p>a) If the applicant is an individual, by that individual and by his/her spouse;</p> <p>b) If the applicant is a company or any other organisation, by a duly authorised person on behalf of the company or organisation who should state his official position within the company or organisation;</p> <p>I, the undersigned, declare that :-</p> <p>a) the premises under application is covered by the relevant building permit</p> <p>b) I shall, at all times abide by the provisions of the Malta Travel & Tourism Act (Cap 409) and regulations made thereunder.</p> <p>c) I bind myself to inform the Authority of any changes in circumstances regarding the information given above within two weeks of their occurrence.</p> <p>d) I declare that the information given on this form is accurate and complete.</p> <p>e) I have read the data protection statement and (tick as appropriate)</p> <p style="text-align: center;"> I CONSENT to the information provided on this application being disclosed as described in the statement. <input type="checkbox"/> </p> <p style="text-align: center;">OR</p> <p style="text-align: center;"> I DO NOT CONSENT to direct marketing. <input type="checkbox"/> </p> <p>Signature of Applicant</p> <p>Signatory's name</p> <p>On behalf of (if applicable).....</p> <p>Official Position</p> <p>Signature of Spouse</p> <p>Name of Spouse</p> <p>Date</p>
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This form should be returned to the Malta Tourism Authority, Licensing & Administration Section at the address shown on the front cover.