

Executive Director: City Health
PO Box 2815
Cape Town
8000



CITY OF CAPE TOWN | ISIXEKO SASEKAPA | STAD KAAPSTAD

APPLICATION FOR ISSUE OR TRANSFER OF
CERTIFICATE OF COMPETENCE: FUNERAL UNDERTAKER
In terms of Regulation No R237, dated 08-02-1985 made in terms of section 33 and 39
of the Health Act No. 63 of 1977.

FOR OFFICIAL USE APPLICATION NO.....

1. Full Name/s of applicant: I/We,
.....
2. Full address of applicant: of
.....
hereby apply for a certificate of competence to carry on the business of a funeral undertaker
within the below mentioned area.
3. Full name and address of premises:
.....
4. Erf No.:
5. Phone number:
6. E-mail Address:

.....
SIGNATURE OF APPLICANT

.....
DATE

Please Note: - THE FOLLOWING DOCUMENTS MUST ACCOMPANY THIS APPLICATION: -

1. A description of the premises and its location.
2. A complete ground plan of the proposed construction or of existing buildings on a scale of 1:100.
3. A block plan of the premises on which north is shown indicating which adjacent premises are already occupied by the applicant or other persons and for what purposes such premises are being used or are to be used.
4. Particulars of any person other than the holder or any of his employees who prepare or will be preparing corpses on the premises.

Should this application be in respect of new premises, it should not be submitted until 21 days after advertising the fact as per section 5 of Regulation No. 237 dated 08-02-1985.

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