COMMENT ON LIQUOR LICENSE APPLICATION FORM

Please complete the information below and return to Subcouncil SC10						
Applicant Details	LLA22030017	e and Phendula Crescent Khayelitsha 7784 Dadase's Shisanyama				
APPLICATION	SUPPORTED	YES	NOT SUPPORTED			
	Aged or Frail Care Centre	NO				
Please indicate whether the business is LOCATED near	Rehab, Drugs / Alcohol Centre	NO				
business is LOCATED flear	School(s)	YES				
	Other (CHURCHES)	YES				
PARKING	STREET PARKING					
REASONS FOR NOT SUPPORTING						

- Place still under reservation
- Form 3 was displayed
- Area zoned for business
- This Premises is closely surrounded by 1x Church and a School

 Premises will operate accor 	 Premises will operate according to City of Cape Town bylaws. 					
	LAW ENFORCEMENT LIQUOR UNIT					
NAME	Sue Loubser	SIGNATURE	Original signature			
ADDRESS	c/o Old Paarl and I	enfell				
DATE	2022-04-29	CONTACT NUMBER	021 444 1143			

For ease of reference community organisations/residents may submit comments to this office, to aid in the decision taken by this SubCouncil. Written comment in respect of the attached notice[s] of application[s]

must reach this office before or on

2022/04/14 at close of business [16h30].