

DEPUTY MINISTRY OF TOURISM
P.O. BOX 24535, 1390 NICOSIA
TEL: 22691100, FAX: 22338541

Establishment's Ref. No

APPLICATION FOR THE CLASSIFICATION AND LICENSING OF
A CATERING ESTABLISHMENT

1. Name of establishment.....
2. Address of Establishment
- Tel..... Email address:
- Website:
3. Correspondence address.....
4. Name of owner of premises housing the establishment.....
- (a) Correspondence address of owner
- (b) Telephone number of owner:
5. Name of operator Tel.....
- (a) Identity card, passport or company registration number
- (b) Home address (in case of company the address of the company's registered office)
6. Has any court order been issued for the restriction of the free use of your property?
YES/NO
7. Category and class applied for

Notes

- I. Every application must be accompanied by the "Property Owner's Solemn Declaration" form duly completed or an unexpired Rental Agreement.
- II. In case a company is involved the following documents should be submitted with the application form:
 - (a) Article and Memorandum of Association
 - (b) Certificate of Registration
 - (c) Certificate of Directors and Secretary
 - (d) Address of the company's office

Please note that the above named documents should be submitted not later than 60 days after their issue or validation by the Registrar of Companies. If the issue date exceeds 60 days, please submit the relevant Solemn Statement by the Secretary or Director of the company, together with a printout of the company's details, as available at the Registrar's website (www.mcit.gov.cy/drcor).

Applicant's Solemn Statement

I hereby declare that I accept the processing of my personal data by the Deputy Ministry of Tourism according to the current provisions of the Processing of Personal Data (Protection of Individual) Law of 2001. I understand that my personal data declared in the present form will be handled in confidentiality and secrecy and processed in electronic and/or in any other form by persons duly authorized by the Deputy Ministry of Tourism, for the purpose of classification and licensing of a catering establishment.

Date.....

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Signature of operator
(the seal is essential in case of a company)