

NAIROBI CITY COUNTY



FORM 2

THE ALCOHOLIC DRINKS CONTROL ACT, 2014

**APPLICATION FOR THE GRANT OR RENEWAL OF A LICENSE TO  
MANUFACTURE OR PRODUCE AN ALCOHOLIC DRINK**

1. Name of applicant .....
2. Type of business .....
- (a) Sole proprietorship (the business is owned by one person) .....
- Personal Identification Number .....
- (b) Partnership
- Names, Postal Addresses and Phone Contacts of the Partners .....
- .....
- .....
- .....
- Contact Person .....
- .....
- (c) Limited Liability Company
- Name Postal Address and Phone Contacts of the Directors .....
- .....
- .....
- .....
- Contact Person .....
3. Postal Address .....
4. Physical Address (exact place of manufacture) .....
5. Tel: .....
6. Fax: .....
7. E-mail: .....
8. City, Town or Village .....
9. Business Registration No. or Certificate of Incorporation No .....

- 10. Is this a New/Renewal application? .....
- 11. Do you have manufacturer's certification? Yes ..... No .....
- 12. List type and brands of alcoholic drinks to be manufactured

<i>Alcoholic Drink</i>	<i>Standards Certification Number</i>
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.....	.....
.....	.....
.....	.....
.....	.....

- 13. Brief description of alcoholic drink (s) .....
- (a) Unit Capacity in milliliters and Cost in Shillings of the alcoholic drink (s) .....
- (b) Alcoholic content .....
- (c) Mode of transportation and storage conditions .....
- (d) Describe the purpose for which the alcoholic drink (s) will be used (e.g. retail, wholesale or export etc.).

14. Declaration by Applicant:

I ..... hereby declare and certify that the information given in this application including attachments thereto is true and correct to the best of my knowledge and belief.

Date: .....

Signature: .....

Official stamp: .....

***For Official Use Only***

- 15. Sub-County Committee comments .....
- .....
- .....
- .....

- 16. County Board comments .....
- .....
- .....
- .....