

Tel: 2627-4542, 627-4575, 627-7633Fax: (230) 627-4640E-mail:dcgp@mail.la.gov.mu

Cessation of Business (delete as appropriate)

Under Section 127 of The Local Government Act 2011

The Chief Executive		Serial No					
Royal Road							
Rose Belle							
Date:							
Dear Sir,							
I,							
(name and capacity)							
acting on behalf of							
hereby inform the Counc	il of	my	intention	to	cease	business	as:
(1)					(2)		
		(3)					
in respect of my/our business premis	ses situate	ed at				as	from
Business Registration Number:					de Fee		
Body ID:							
Signature:		ID Care	d No				•••
Approved in PBMC of:							
(Copy of National Identity Card &Ori	ginal Reco	eipt of po	ayment of trad	le fees	to be attac	rhed)	
Office Use Only							
THE DIS	STRICT C	OUNCI	L OF GRAND	PORT			
PU	BLIC HE	ALTH D	EPARTMENT	Γ			
Tel: ☎ 627-4542, 627-4575, 627-7633	Fax: (2.	30) 627-4	1640 I	E-mail:	gpsdc@int	<u>net.mu</u>	
This is to inform you that with re	eference 1	to your	letter dated.			informin	g the
Council of your intention to cease bu	isiness as	(1)					(2)
			, at				
has been app	roved/not	approv	ed.				
Date:			Signature:				

For District Council of Grand Port