

**APPLICATION FORM**  
**GUEST HOUSE - RENEWAL**  
**SRI LANKA TOURISM DEVELOPMENT AUTHORITY**  
 No 80, Galle Road, Colombo 03. Tel: 0112437059.

**01. DETAILS OF THE GUEST HOUSE**

1-1	Name of the Guest House	
1-2	Address	
1-3	Telephone No	
1-4	Fax No	
1-5	E - mail	
1-6	web	
1-7	Name of the General Manager	

**02. PROPRIETOR /COMPANY**

2-1	Name	
2-2	Address	
2-3	Telephone No	
2-4	Fax No	
2-5	E - mail	

Note: If any foreign partner is involved provide details of the agreement.

**03. AVAILABLE FACILITIES**

		A/C	Non A/C	Attached Bath rooms	Common Bath rooms
3-1-1	No. of Rooms				

3-1-2 Other Facilities available in Rooms

.....  
 .....

**04. OTHER FACILITIES AND SERVICES AVAILABLE SUCH AS RESTAURANT/BAR (Please describe)**

.....  
 .....

**05. STAFF DETAILS (NO)**

5-1	Permanent Staff	
5-2	Contract Staff	
5-3	Casual Staff:	

I HEREBY CERTIFY THAT THE INFORMATION MENTIONED ABOVE IS TRUE AND ACCURATE.

Name	Signature	Date

**CHECK LIST TO SUBMIT DOCUMENTS –LICENSE RENEWAL**

**NOTE: Copies of following documents to be submitted along with the Original documents for verification purposes.**

- I. Trade license to operate from PS/MC/UC. ....
- II. Insurance policy covering public liability. ....
- III. Firefighting equipment adequacy & training certificate. ....
- IV. Deed or Lease agreement .....
- V. Environmental protection license by Central Environmental Authority /Local Authority.....
- VI. Approvals from UDA, CCS, WLCD etc. (if necessary).....
- VII. Copy of previous years license issued by SLTDA.....

Signature of Applicant .....

---

**FOR OFFICE USE ONLY**

---

**RECOMMENDATION OF SUBJECT OFFICER**

- All the required documents received .....
- Total payment received .....   
(By cash/cheque (cheque No....., Bank.....))
- ( Reg. -  Lic. -  Taxes -  )
- No complaints received during last year.....

.....  
**Subject officer/Standard & Quality Assurance**

**Date:.....**

---

**I recommend/do not recommend renewing the License aforementioned Guest House.**

.....  
**Director/Standards & Quality Assurance**

**Date: .....**