



License Number

APPLICATION FOR FUELWOOD/CHARCOAL TRANSPORT PERMIT

Name and address of applicant:
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Types of fuel to be transported:
(Fuelwood or Charcoal)

Location of fuelwood to be transported:

Person or persons from whom the fuelwood/charcoal is to be or has been
acquired:

Quantity to be transportedper month..... total

Proposed date of commencementand completion.....

.....
Date

.....
Signature of Applicant