TO

1.1

THE CHIEF EXECUTIVE OFFICER
ELECTRICITY REGULATORY AUTHORITY
P.O BOX 10332
KAMPALA

NOTICE OF INTENDED APPLICATION

Names, Physical and Postal Address of Applicant/s

(Under S.30 Electricity Act, 1999)

1.0 PARTICULARS OF INTENDED APPLICANT/S

a)	Name:	
	Physical address:	
c)	Postal address:	_
d)	Tel:	_
e)	Fax:	_
f)	Cell Phone:	_
	E-mail:	
h)	Tin number:	-
i)	VAT Reg.:	_

	a) Name:
	b) Location:
	c) Postal address:
	d) Tel:
	e) Fax:
	f) Cell phone:
. 2	
1.3	g) E-mail:
	g) E-mail:
a)	Name and details of Contact Person
a) b)	Name and details of Contact Person Name:
a) b) c)	Name and details of Contact Person Name: Physical Address: Postal Address:
a) b) c) d)	Name and details of Contact Person Name: Physical Address:

2.0 LEGAL STATUS OF APPLICANT/S

2.1 Indicate legal status of Applicant (Tick relevant option)

- a) Sole proprietorship
- b) Partnership
- c) Public Limited Liability Company
- d) Private Limited Liability Company
- e) Cooperative Union Society
- f) Other (please specify)

(Attach Certificate of Registration, Certificate of Incorporation, Memorandum and Articles of Association where applicable)

2.2 List and Particulars of Directors:

Name	Address	Nationality	Country of Usual
			Residence
1.			
2.			
3.			
4.			

3.0 FINANCIAL STATUS OF APPLICANT

Loans		

3.3 Please provide Certified Audited Financial Statements and Accounts for the last 3 years prior to application.

3.4 Bankers and Financial References

Bankers

Name and Address of Bankers (including telephone and fax)

a) In Uganda

Name	Address	Contact Person
1.		
2.		
3.		
4.		

a) Outside Uganda:

Name	Address	Contact Person
1.		
2.		
3.		
4.		

3.5 Other Important Referees on the Applicants Financial Status

Name and Address	Contact Person
1.	
2.	
3.	
4.	

3.6 Sources of Funding for the Proposed Project (US \$.000)

	•
	_
	b) Loan capital (specify source and provide evidence)
	c) Others (specify)
	c) Others (specify)
MAIN	I BUSINESS ACTIVITY OF APPLICANT
Please	e indicate what business activity the applicant is currently engaged in:

5.0 TECHNICAL CAPACITY AND EXPERIENCE

Please provide detailed statement of applicant's technical and industrial competence and experience to undertake the proposed project. additional sheets if necessary) 5.2 Describe technical and industrial support from external sources: **DESCRIPTION OF PROPOSED PROJECT** 6.0 6.1 Please provide detailed description of intended project: (Use additional sheets or report as appropriate) 6.2 **Project site/utilities** Project site (attach relevant map and drawings and state whether there are access roads required):

Technical and Industrial Competence of Applicant

5.1

Гес <mark></mark>	nnical aspects/design of the project
Amo	unt of power to be generated (MW):
Γima	Plan for Implementation of the Project
11111	in an for implementation of the Project
and	d use at the Project:

6.7	Access roads, generation plant, transmission and	distri	bu
	required for the project (Attach map):		
6.8	Contact/consultations with local authorities	(Attach	r
	documents):		

			_
Specified Consents	s/Licer	nces required from oth	ner public autho
		their status (attach rele	
Consent Required	and	Description of Activity	Legal Provision
from whom			

7.0 COMMERCIAL ASPECTS OF THE PROJECT

7.1 State intended market for generated power

- a) Domestic
- b) Export
- c) Own distribution
- d) Sales to national grid

7.2	State the regions (areas) to which the power shall be supplied
MP	ACTS OF THE PROJECT
	
3.1	Impacts on Socio economics
8.1	Impacts on Socio economics
8.1	Impacts on Socio economics
3.1	Impacts on Socio economics

Impact on cultu	ral heritage		
Impact on envir	onment		
			· · · · · · · · · · · · · · · · · · ·
Impact on natur	ral resources	:	

8.5	Impact on wild			
8.6	Any Other re	elevant Informatio	n (Use addi	tional sheets i
DEC	LARATION BY TH	E APPLICANT:		
The	proposed project is	not unlawful or contr	ary to the intere	st of Uganda. I/w
	by declare that the and correct.	details stated above a	re, to the best of	my/our knowledge
Date	d this	day of	20	0

9.0

10.0	AUTHORISED SIGNATURE/S AND SEAL OF APPLICANT/S					
			SEAL			
	10.1 Witness To	Above Signatures				
	Name	Position	Signature			
F OR	OFFICIAL USE ONL	Y of Application				
<u>2</u> .	Fees Paid and Recei	Fees Paid and Receipt Number				
3.	Results of Verificatio	n for completeness				
l .	Dates and Newspape	ers in which Application is adv	vertised:			

6.	Recommendation ERA Secretariat		
7.	Decision of ERA	_	
8.	Issue date of Permit		
9.	Expiring date of Permit		
10.	Other Relevant information	-	