

**LESOTHO COMMUNICATIONS AUTHORITY**  
**Application Form for Postal & Courier Services Licence**

Physical Address: 30 Princess Margaret Road, Old Europa, Maseru Tel.: + 266 22224300/ +26652221300

Postal Address: LCA, P.O. Box 15896, Maseru 100.

E-mail : [licensing@lca.org.ls](mailto:licensing@lca.org.ls);

**Note:** This form shall be completed by a person who has been duly authorised in writing to act as a representative of the Applicant<sup>1</sup>. Any information requested which does not fit in the form may be included in an appendix to this form. You are advised to fill in **all the information** to avoid delays in the processing of your application.

**1. PARTICULARS OF AN APPLICANT**

1.1	Full Name of Applicant	
1.2	Abbreviated Name	
1.3	Physical Address	
1.4	Postal Address	
1.5	Telephone Number	
1.6	E-mail	
1.7	State legal form of applicant e.g. company, trust, association, other	

*(Please attach the current certified copy of company extracts and certificate of incorporation, constitution or founding document).*

1.8	If registered, the office of registration	
1.9	Registration Number	
1.10	Date of registration	

**2. APPLICATION INFORMATION**

2.1	Nature of services authorised to be provided under the current licence (Attach a copy of the licence)				
<b>3.</b>	<b>CONTACT PERSON DETAILS</b> <i>(Attach certified id/passport copy of the Chief Accounting Officer)</i>				
3.1	Name				
3.2	Telephone Number				
3.3	E-Mail Address				
3.4	<b>TYPE OF POSTAL &amp; COURIER SERVICES</b> (Please tick)	<table border="1"><tr><td>Public Postal Services</td><td>Courier Services Tier 1</td><td>Courier Services Tier 2</td></tr></table>	Public Postal Services	Courier Services Tier 1	Courier Services Tier 2
Public Postal Services	Courier Services Tier 1	Courier Services Tier 2			

**4. ACKNOWLEDGEMENT**

4.1 The applicant acknowledges the statements in this form and accompanying documents are true and correct.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Full names of signatory \_\_\_\_\_

<sup>1</sup> Attach certified ID/passport copy of the Director or Chief Accounting Officer.