



**LUANSHYA MUNICIPAL COUNCIL – PUBLIC HEALTH DEPARTMENT**

**APPLICATION FOR HEALTH INSPECTION AND CERTIFICATE OF COMPLIANCE  
ISSUED IN THE TERMS OF THE FOOD SAFETY ACT NO. 7 OF 2019 AND THE  
PUBLIC HEALTH ACT CAP 295 OF THE LAWS OF ZAMBIA**

- 1. Name of Applicant: .....
- 2. Business Name: .....
- 3. Stand No: .....
- 4. Location of Premises: .....
- 5. Postal Address: .....
- 6. Contact Number: .....
- 7. E-Mail Address.....

I/we apply for Health Inspection and Grant/Renewal of the under mentioned Certificate of Compliance.  
Class..... Specify if necessary.....  
.....

In respect of the above mentioned premises for the year ending 31<sup>st</sup> December, 20.....

Date: ..... Signature: .....

**Fee: K.....**

**NOTICE:** The application form must be accompanied with the following:

- 1) Medical Examination Certificate for food handlers
- 2) Chief Fire Officers’ Report
- 3) Occupational certificate (new premises only)
- 4) Waste Management Contract
- 5) Police Report for liquor premises