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Vetted by: _____

Application Form For a Recreational Dive Centre License

(In terms of the Recreational Diving Services Provider Regulations, 2004)

MALTA TOURISM AUTHORITY
Licensing Directorate
SCM 01 LEVEL 3
SMART CITY
KALKARA SCM1001

Date Received Stamp:

This application is for a permit to operate a DIVE CENTRE is in 9 parts. All parts are to be filled in. Part 9 is to be signed and dated by applicant and spouse. In the case of companies, only the person appearing for the Company and in whose name the License is to be issued, shall sign the application. **This application carries a fee of € 46.59.**

Warning to Applicant: Any false statements, misrepresentation or concealment of material fact on this form or any document presented in support of this application form, may grounds for criminal prosecution.

DATA PROTECTION STATEMENT: Personal information provided in your application is protected under the Data Protection Act (Chapter 586 of the Laws of Malta). The Malta Tourism Authority will process your personal data in accordance with the provisions of Data Protection Act for licensing and administrative purposes, and to comply with the Authority's legal obligations. Upon approval of your application, and following written consent from your end, the Authority, occasionally, may use your personal details for marketing purposes.

If you still have queries, you can telephone for advice on phone number 2291 5000, or email at licensing.mta@visitmalta.com

To be Completed in BLOCK LETTERS

(1) DETAILS OF ESTABLISHMENT

Name of Premises: _____

Address: _____

Tel / Mobile: _____

VAT Number: _____

(2) DETAILS OF APPLICANT (in whose name License shall be issued)

Name & Surname: _____

Nationality: _____

I.D. Number: _____

Address: _____

Business Address: _____

Email Address: _____

Tel / Mobile: _____

Registered
Company name
(If applicant is a
body corporate): _____

Registered
Company number: _____

(3) DETAILS OF OPERATOR (if different from applicant)

Name & Surname: _____

Nationality: _____

I.D. Number: _____

Address: _____

Business Address: _____

Email Address: _____

Tel / Mobile: _____

Registered
Company name
(If applicant is a
body corporate): _____

Registered
Company number: _____

(5) DOCUMENTARY REQUIREMENTS

(The following documents are to be submitted **with Application**)

- a) Copy of I.D. Card of Applicant.
- b) Planning Permit, Endorsed layout plans & Site plan
- c) Police Conduct Certificate of Applicant and of Operator.
- d) An official Employment history from a Government Body (such as Jobsplus) and/or academic qualifications

(6) DOCUMENTARY REQUIREMENTS

(The following documents are to be submitted **after MTA has issued a Tourism Compliance Certificate**)

- a) Planning permit and approved plans authorizing this development or its use as a Dive Centre.

(7) DOCUMENTARY REQUIREMENTS

(The following documents are to be submitted **after MTA has received MEPA permit as listed in part 06**)

- a) Names and Certificates attesting to professionalism of the operator and Director of Diving. (See *Recreational Diving Service Provider Regulations, 2004*)
- b) Third party liability insurance (Minimum € 250,000).

All Documentation requested in Part (A and B) in this Application Form must be submitted together with this Application for processing.

Please see attached checklist at the end of the Application Form

(8) DECLARATION REGARDING RIGHT OF USE OF THE PREMISES

I hereby declare that I have sought and procured the consent of the owner of the premises to process this application in terms of law.

Signature of Applicant:

Name of Applicant:

I.D Card Number of Applicant:

Signed in the presence of:

DECLARATION BY APPLICANT AND SPOUSE

This Form is being signed as follows:

- a) If the Applicant is an individual, by that individual and by his/her spouse.
- b) If the Applicant is a company or any other organization, by a duly authorized person on behalf of the company or organization who should state his official position within the company or organization;

I, the undersigned declare that:

- a) I shall, at all times abide by the provisions of the Malta Travel and Tourism Act (Cap 409) and regulations made there under.
- b) I bind myself to inform the Authority of any changes in circumstances regarding the information given above within two weeks of its occurrence.
- c) I shall submit any additional information or documentation that the Authority may require for the processing of this application
- d) I declare that the information given on this Form is accurate and complete.

Signature of Applicant:

Signatory's Full Name:

On behalf of (If applicable):

Official Position:

Date:

DIVING OPERATIONS

PART A -PPD

1. ☐ Application Form accompanied by receipt (Fee €46.59)
2. ☐ Fee Paid
3. ☐ Identity Card
4. ☐ An official Employment history from a Government Body (such as Jobsplus) and/or academic qualifications
5. ☐ Site Plan
6. ☐ Layout Plan of premises certified by an Architect
7. ☐ Company Resolution*2 if applicable –Company registration and representation
8. ☐ Copy of full Memo of Articles of association and company resolution if applicable *3 (if applicable)
9. ☐ Police Conduct*7
10. ☐ Police No Objection (PPD Request No Objection from Police Department).

PART B -LICENCING UNIT

1. ☐ Doctor's Certificate
2. ☐ MEPA Permit including endorsed/approved plans
3. ☐ Proof of Ownership of property / if applicable Contract of Lease*1
4. ☐ Company Resolution*2 if applicable –Company registration and representation
5. ☐ Copy of full Memo of Articles of association and company resolution if applicable *3 (if applicable)
6. ☐ Copy of Contract of Work (Expatriates)
7. ☐ Health Certificate by Diving Surgeon
8. ☐ Architect's Declaration
9. ☐ 3rd Party Liability €250,000

*1, 2, 3 (if applicable).

*7 Recent Police Conduct- (year of duration of license) must be clear during the last 5 years, unless served prison sentence in the last 5 years or suspended sentence for 6 months or more during the last 5 years.

For further information as regards to the legal standards one need to attain prior to the issuance of a license, please click on the following link:

<http://www.justiceservices.gov.mt/DownloadDocument.aspx?app=lom&itemid=10626&id=1>

Or refer to Subsidiary Legislation 409.13