



NATIONAL REGISTRATION FORM FOR TOUR AND TRAVEL COMPANIES

This form is based on the Tourism Act [2008]. All data collected will be used confidentially and in aggregate for planning purposes and to register accommodation facilities in Uganda. Each facility will be required by law to fill in this form before they are inspected to acquire a license.

New registration: Yes/no				Renewal: Yes/no If yes, previous license number:			
Section 1: COMPANY GENERAL INFORMATION							
Business name				Trading name			
Certificate of incorporation				TIN number			
				Tax clearance for renewals			
Nature of business	Tour operations		Travel agency		Tour and travel	(Tick appropriately)	
	For travel agency		IATA registered – Yes/no		Certificate No.		
Company Type							
	Limited company		Sole Proprietor		Others (specify)		
Services provided							
Branding	Picture attached						
Signage	Picture attached						
Location and contact							
District				Sub-county			
Town/city/village				Street name/ Plot no			
Telephone contact				Mobile contact			
Company email				Company website			
Title deed/Lease/ Rental agreements – Attached							
Computers/ furnishing equipment – Picture attached							

Section 2: Ownership			
Franchise		Chain/group	
Director/shareholder name	Nationality	Mobile phone	Email

Valid work permit (foreign investors)attached

Section 3: Human resource (Qualified staff and CVs attached)

Staff category		Number	
Male		Female	
Workers compensation (Insurance)attached (Optional)			

Section 4: LIST OF VEHICLES (Please list down your vehicles registered in company names. Attach vehicle registration cards)

How many vehicles?

Attach a list of drivers (Registered and Licensed by UTB)

Registration number	Make	Type	Capacity	Customised (Yes/no)

Section 5: Affiliation

Are you a member of any private sector association? Yes/No

Certificate no.

Association name:	1.
	2.
	3.

Marketing and statistics

Marketing activities involved in	
Number of tourists handled	

Section 6: Declaration

I declare that the information given in this form is true and complete in all aspects to the best of my knowledge

Name:

Position:

Date and signature:

For Official Use

Name:	Registration number	Date and signature
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