

Date.....

**APPLICATION FOR REFUND OF TRADE FEES FOR PERIOD 1 JANUARY 2017 TO 30 JUNE 2017**

Name/Company's name.....

Customer no.....(copy trade fee attached)

Postal address.....

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ID No/Companies no.....

Name of bank.....

Address of bank.....

Bank Account no.....

I,We certify that above information is correct.

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Signature

.....

Company seal (if applicable)

This form may be sent by mail on the following mail address [mcvp@mail.la.govmu.org](mailto:mcvp@mail.la.govmu.org) or by post to the Chief Executive, Municipal Council of Vacoas Phoenix, Town hall, St Paul Avenue, Vacoas or by hand.