

MULAGO NATIONAL REFERRAL HOSPITAL

APPLICATION FORM FOR LOCKUP SPACE IN THE HOSPITAL BUSINESS CENTER

*Attach
passport
photo of
applicant*

1. Name of applicant:

2. National Identity Card No.
(attach copy)

3. TIN: *(attach copy of TIN
registration certificate)*

4. Type of business applied for: *(Choose only one)*

s/no.	Type of business	Tick against the business of choice.
1.	Grocery/ General merchandize	
2.	Gifts/ floral shop	
3.	Banking services/ Mobile money	
4.	Fast foods/ snack points/ cafe	
5.	Stationery, printing and photocopying services	

5. Business Registration number:
(attach copy of business registration certificate).

6. Local Council I..... *(attach a recommendation from the area Chairperson)*

7. A business proposal / plan (attach):

8. Contact of the applicant (Box number, Telephone and e-mail):

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FOR OFFICIAL USE ONLY

9. Comments and decision of the committee

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