

Operator Permit

Permit Date:	23/7/2019						
Permit No: Company Name: Trade Name:	OPERATO	OR DTCM2014		Area: License No:			
Building Name: Floor Number:				Building Nun	nber.:		
Street Name: P.O.Box:					Street Number:		
Operator Man	agers:						
Name		Passport#	Phone-1	Phone-2	Fax#	E-mail	