

REQUEST FOR AUTHORISATION OF AMBULANT ACTIVITIES

NB: information that is already in the possession of the Crossroads Bank for Enterprises (Banque-Carrefour des Entreprises) and that has not changed must not be repeated.

I. Nature of the request¹:

- A. Initial application
- B. Modification
- C. Replacement

II. Type of request¹:

- A. "Employer authorisation"
- B. "Authorisation from official A" Number of authorisations requested:
- C. "Authorisation from official B" (see sections VII and VIII)

III. Identification of the applicant:

Last name: First names: Sex: M. / F.
National Register N° or place and date of birth:²
Nationality:
Address:
Telephone n°: Mobile telephone n°: Fax n°:
Email address:

IV. Capacity of the applicant:

A. Natural person exercising on his/her own behalf

Where applicable, the commercial name:
Enterprise n°:

B. Person responsible for routine management for a legal entity

Corporate name of the legal entity:
Where applicable, the commercial name:
Address of the registered office:
Enterprise n°:

V. Place of the exercise of the ambulant activity¹:

- A. in all places with the exception of the domicile of the consumer
- B. in all places including at the domicile of the consumer

¹ Circle the statement "ad hoc"

² National Register N° if it concerns a resident or place and date of birth if it concerns a non-resident

We draw your attention to the fact that these translations are provided purely for informational purposes and have no legal value. Only the original document, compliant with the use of languages in Belgium, has any binding value.

VI. Purpose of the activity¹:

- A. any product or service, with the exception of those subject to specific conditions
- B. any product or service, as well as those subject to specific conditions, stated below, with, opposite each one of them, the deed authorising sale (authorisation, approval, license, access to the profession, etc.):

1.
2.
3.
4.
5.

VII. Identification of the "official" for whom authorisation is requested (see section II):

Last name: First names: Sex: M. / F.

National Register N° or place and date of birth:²

Nationality:

Address:

Telephone n°: Mobile telephone n°: Fax n°:

Email address:

Date and signature of "official",

.....

VIII. Duration of the authorisation: (see section II)

IX. When the applicant for authorisation is not a national of the European Economic Area,

Mention the reason for exemption from the nationality condition:.....

.....

X. When the authorisation is requested for the exercise of the activity at the domicile of the consumer, the applicant must provide:

- either a certificate of good conduct, life and morals dated from less than three years or an equivalent document issued by the competent authority in his/her country of residence
- or a signed declaration from the "official" certifying that he/she has not been the subject of a court sentence. If the applicant opts for the declaration, he/she must nevertheless provide the certificate within thirty days following the delivery of the authorisation for ambulant activities, under penalty of withdrawal of the authorisation
- or the agreement of the Public Prosecution Service concerning the exercise of the ambulant activity.

Signed at.....,

on.....,

Signature of the applicant,

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