

GOVERNMENT OF ZAMBIA

STATUTORY INSTRUMENT NO. 94 OF 2016

The Tourism and Hospitality Act, 2015
(Act No. 13 of 2015)

**The Tourism and Hospitality (Registration of Hotel
Managers) Regulations, 2016**

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IN EXERCISE of the powers contained in sections *fifty-nine* and *eighty* of the Tourism and Hospitality Act, 2015, the following Regulations are made:

PART I

PRELIMINARY PROVISIONS

- | | |
|--|-------------------|
| 1. These Regulations may be cited as the Tourism and Hospitality (Registration of Hotel Managers) Regulations, 2016. | Title |
| 2. In these Regulations, unless the context otherwise requires— | Interpretation |
| “accommodation establishment ” has the meaning assigned to it in the Act; | |
| “certificate of registration ” means a certificate of registration as a hotel manager issued under regulation 3; | |
| “Council ” has the meaning assigned to it in the Act; | |
| “higher education institution ” has the meaning assigned to it in the Higher Education Act, 2013; | Act No. 4 of 2013 |
| “hotel manager ” means a person who oversees the operation of an accommodation establishment; | |
| “institution ” has the meaning assigned to it in the Technical Education, Vocational and Entrepreneurship Training Act, 1998; | Act No.13 of 1998 |
| “practising certificate ” means a certificate issued under regulation 8 authorising a person to practice as a hotel manager; and | |
| “Secretary ” means the Secretary to the Council. | |

PART II

REGISTRATION OF HOTEL MANAGERS

- | | |
|--|--|
| 3. A person who intends to manage an accommodation establishment or to be employed as a manager shall apply to the Council for registration in Form I set out in the First Schedule. | Application for certificate of registration |
| 4. A person qualifies for registration as a hotel manager if that person, in addition to the qualifications specified in section <i>fifty-eight</i> of the Act has— | Qualifications and experience of hotel manager |
| (a) in the case of a person intending to manage a three to five star hotel— | |
| (i) a degree or higher diploma in hospitality or hotel management from a higher education institution; | |
| (ii) a diploma in hospitality or hotel management from | |

an institution or a higher education institution and five years proven experience in managing a hotel; or

(iii) ten years experience in managing any service-related business operation; and

(b) in the case of a person intending to manage an ungraded to two star hotel—

(i) a diploma in hospitality or hotel management from an institution or a higher education institution and two years experience in the hospitality industry;

(ii) a certificate in any hotel-related course from an institution and three years' experience in the hospitality industry; or

(iii) over five years experience in a service related business.

Request for further information

5. The Secretary may request for further information in respect of an application in Form II set out in the First Schedule.

Rejection of application

6. (1) The Council shall reject an application if the applicant does not meet the requirements of the Act.

(2) The Secretary shall, where an application is rejected, inform the applicant of the rejection in Form III set out in the First Schedule.

Issue of certificate of registration

7. (1) The Council shall, within thirty days of the receipt of an application under regulation 3 approve the application, if the applicant meets the requirements of the Act.

(2) The Council shall, where it approves an application, issue the applicant with a certificate of registration in Form IV set out in the First Schedule.

Practising certificate

8. (1) A registered hotel manager shall apply to the Secretary for a practising certificate in Form V set out in the First Schedule.

(2) A registered hotel manager shall be issued a practising certificate in Form VI set out in the First Schedule.

Renewal of practising certificate

9. A registered hotel manager may apply to the Council for renewal of the certificate of registration at least ninety days before the expiry of the current certificate in Form VII set out in the First Schedule.

Exemption from employing registered hotel manager

10. (1) An accommodation establishment shall apply to the Council for exemption from employing a registered hotel manager if the accommodation establishment—

- (a) is owner- managed;
- (b) has ten rooms and below; and
- (c) employs less than five people.

(2) An application for exemption under this regulation shall be in Form VIII set out in the First Schedule.

(3) The Council shall issue an exemption certificate to an accommodation establishment that meets the criterion prescribed in sub-regulation (1) in Form IX set out in the First Schedule.

(4) The Council shall, when it rejects an application for exemption inform, the applicant of the rejection in Form X set out in the Schedule.

11. A registered hotel manager shall, where a change occurs in the registered particulars of the hotel manager, notify the Council of the change within fourteen days of the change in Form XI set out in the First Schedule.

Notice of
change of
particulars

12. A certificate of registration shall not be transferred to a third party.

Prohibition
of transfer of
certificate of
registration

13. (1) A hotel manager who decides to discontinue practising or carrying out business as a hotel manager shall notify the Council at least thirty days before the discontinuation of practice in Form XII set out in the First Schedule.

Surrender of
certificate of
registration

(2) A person who ceases to practice or carry on business as a hotel manager shall surrender the certificate of registration and practising certificate to the Council for cancellation at least fifteen days before the cessation of business.

14. (1) The Council shall cancel or suspend the certificate of registration or practising certificate of a hotel manager if the hotel manager—

Suspension
and cancella-
tion of
certificate

- (a) contravenes the conditions of the certificate of registration;
- (b) contravenes the Act;
- (c) obtained the certificate by fraud, misrepresentation or concealment of a material fact;
- (d) is found guilty of professional misconduct; or
- (e) is disqualified from practising or carrying on business as a hotel manager.

(2) The Council shall, before suspending or cancelling a certificate of registration or practising certificate, inform the holder of the certificate of registration of the intention to suspend or cancel the certificate in Form XIII set out in the First Schedule.

(3) A notification of the suspension or cancellation of the certificate of registration or practising certificate shall be in Form XIV set out in the First Schedule.

Duplicate certificate of registration	<p>15. (1) A person whose certificate of registration is destroyed or lost may apply to the Council for a duplicate certificate in Form XV set out in the First Schedule.</p> <p>(2) The Council shall, within thirty days of receipt of an application under subregulation (1), issue a duplicate certificate of registration to the applicant.</p>
Register	<p>16. (1) The Council shall maintain a Register of Hotel Managers which shall specify —</p> <p>(a) the names and addresses of registered hotel managers;</p> <p>(b) the applications rejected and reasons for the rejection;</p> <p>(c) the notices issued under these Regulations; and</p> <p>(d) any other information relevant for purposes of the Act.</p> <p>(2) The Council may cause alterations to be made to the Register in accordance with the purposes of the Act.</p> <p>(3) The Register referred to in sub-regulation (1) shall be open for inspection by the members of the public during normal business hours upon payment of the fee set out in the Second Schedule.</p>
Annual subscription	<p>17. An accommodation establishment shall, in respect of its hotel manager, ensure that the prescribed annual fee for a practising certificate for the following year is paid on or before the 31st December of each year.</p>

PART III

GENERAL PROVISIONS

Display of certificates	<p>18. A registered hotel manager shall display the certificate of registration and practising certificate in a conspicuous place at the hotel manager's business premises.</p>
Appeal	<p>19. (1) A person who is aggrieved with the decision of the Council may appeal to the Minister within thirty days of receipt of the decision in Form XVI set out in the First Schedule.</p> <p>(2) The Minister shall, within thirty days of receiving an appeal under sub-regulation (1), confirm, set aside or vary the decision of the Council and inform the appellant of the decision.</p> <p>(3) A person aggrieved with the decision of the Minister may appeal to the High Court within thirty days of receipt of the decision.</p>
Offence and penalty	<p>20. A person who contravenes these Regulations commits an offence and is liable, upon conviction, to a fine not exceeding one hundred thousand penalty units, or a term of imprisonment not exceeding one year, or to both.</p>
Fees	<p>21. The fees set out in the Second Schedule are payable in respect of the matters specified in that Schedule.</p>

FIRST SCHEDULE
(Regulation 3, 5, 6, 7, 8, 10, 11, 13, 14, 15 and 19)



REPUBLIC OF ZAMBIA

Form I
(Regulation 3)
(To be completed in triplicate)

The Tourism and Hospitality Act, 2015
(Act No. 13 of 2015)

The Tourism and Hospitality (Registration of Hotel Managers) Regulations, 2016

APPLICATION FOR REGISTRATION					
Please complete in block letters	Shaded fields for official use only	Application No.			
		Date and Time			
<i>Information Required</i>	<i>Information Provided</i>	√			
PART I PARTICULARS					
1.	(a) Surname (block capitals)				
	(b) Other names				
2.	Sex (Tick (v) where applicable)	Male		Female	
3.	Date of birth (dd/mm/yyyy)				
4.	Place of birth	District		Country	
5.	Nationality				
6.	(a) National Registration Card/Passport/permit No				
	(b) Place of issue				
	(c) Date of issue (dd/mm/yyyy)				
7.	Address				
	(a) Physical address				
	House No.				
	(b) Postal address				
8.	Contact details				
	(a) Telephone No.				
	(b) Fax No.				
	(c) Mobile phone No.				
	(d) Email address				
EDUCATIONAL BACKGROUND					
9.	School, Technical College or University attended (give dates)				
10.	Course of study				
11.	Professional examination passed (give dates)				
12.	Membership of professional organisations (give grade of membership)				

	(give grade of membership)			
	PART II EMPLOYMENT RECORD			
13.	Present employment			
	(a) Name of Employer			
	(b) Position held			
	(c) Date of appointment			
	(d) Nature of work undertaken			
14.	Previous employment (whole career to date)			
	Name of Employer	Date/Period Employed	Positions held	Nature of work undertaken
15.	Appendices			
	Certified copies of all academic and medical certificates are enclosed			
	Application fee enclosed			
DECLARATION I declare that the information furnished by me in this application is true, correct and complete to the best of my knowledge. I understand that any incorrect, misleading or untrue information or the withholding of any relevant information may affect my registration as an HOTEL MANAGER. <div style="display: flex; justify-content: space-between;"> <div>..... <i>Name of applicant</i></div> <div>..... <i>Signature</i></div> </div> <div style="display: flex; justify-content: space-between;"> <div>..... <i>Date</i></div> <div></div> </div>				
FOR OFFICIAL USE ONLY Received by: <div style="display: flex; justify-content: space-between;"> <div><i>Officer (Name and Signature)</i></div> <div><i>Date</i></div> </div> Application Fee Received: Receipt No.: Date presented to the Secretary: Decision: Date applicant informed of decision: Fee for registration received: Registration number: Remarks: <div style="border: 1px solid black; width: 100px; height: 40px; margin-left: auto; margin-top: 20px; text-align: center; line-height: 40px;"> OFFICIAL STAMP </div>				



REPUBLIC OF ZAMBIA

The Tourism and Hospitality Act, 2015

(Act No. 13 of 2015)

The Tourism and Hospitality (Registration of Hotel Managers) Regulations, 2016

REQUEST FOR FURTHER INFORMATION

(1) Here insert
full names
of applicant

TO: (T)

Address:

.....

Reference No.:

You are requested to furnish the following information or documents in respect of your application for registration as an HOTEL MANAGER:

(a)

(b)

(c)

(d)

within days of this notice, if you fail to furnish the requested information, your application will be treated as invalid and shall be rejected.

Dated this day of, 20.....

.....

Secretary



REPUBLIC OF ZAMBIA

The Tourism and Hospitality Act, 2015

(Act No. 13 of 2015)

The Tourism and Hospitality (Registration of Hotel Managers) Regulations, 2016

REQUEST FOR FURTHER INFORMATION

(1) Here insert
full names
of applicant

TO: (1)

Address:

.....

Reference No.:

You are requested to furnish the following information or documents in respect of your application for registration as an HOTEL MANAGER:

(a)

(b)

(c)

(d)

within days of this notice, if you fail to furnish the requested information, your application will be treated as invalid and shall be rejected.

Dated this day of, 20.....

.....
Secretary



REPUBLIC OF ZAMBIA

The Tourism and Hospitality Act, 2015

(Act No. 13 of 2015)

The Tourism and Hospitality (Registration of Hotel Managers) Regulations, 2016

NOTICE OF REJECTION

- (1) Here insert the full names and address of applicant
(2) Here insert the reference No. of the application
(3) Here insert the type of application

TO: (1)

REFERENCE NO. (2)

You are notified that your application for (3) registration/renewal of registration as an HOTEL MANAGER has been rejected on the following grounds:

(a)

(b)

(c)

(d)

Dated this day of, 20.....

.....
Secretary



REPUBLIC OF ZAMBIA

The Tourism and Hospitality Act, 2015

(Act No. 13 of 2015)

The Tourism and Hospitality (Registration of Hotel Managers) Regulations, 2016

REGISTRATION NO.:

CERTIFICATE OF REGISTRATION

Surname:

First Name(s)

Address.....

Given on the day of 20

This is to certify that the person named on this Certificate has complied with the provisions of section 59 of the Tourism and Hospitality Act, 2015.

.....
Chairperson

.....
Secretary

Date:

Date:

NOTE:

This Certificate is only valid if it bears the official stamp of the Ministry.



REPUBLIC OF ZAMBIA

The Tourism and Hospitality Act, 2015
(Act No. 13 of 2015)

The Tourism and Hospitality (Registration of Hotel Managers) Regulations, 2016

APPLICATION FOR PRACTISING CERTIFICATE

Please complete in block letters	Shaded fields for official use only	Application No.		
		Date and Time		
Information Required	Information Provided	√		
PART I PARTICULARS				
1.	(a) Surname (block capitals)			
	(b) Other names			
2.	Sex (Tick (✓) where applicable)	Male		Female
3.	Date of birth (dd/mm/yyyy)			
4.	Place of birth	District		Country
5.	Nationality			
6.	(a) National Registration Card/Passport/Permit No			
	(b) Place of issue			
	(c) Date of issue (dd/mm/yyyy)			
7.	Address			
	(a) Physical address			
	House No.			
	(b) Postal address			
8.	Contact details			
	(a) Telephone No.			
	(b) Fax No.			
	(c) Mobile phone No.			
	(d) Email address			
9.	Type of membership	Full Membership		Associate Membership
	(Tick (✓) where applicable)	Student Membership		Honorary Membership
EDUCATIONAL BACKGROUND				
10.	School, Technical College or University attended (give dates)			
11.	Course of study			
12.	Professional examination passed (give dates)			

PART II EMPLOYMENT RECORD				
13.	Present employment			
	(a) Name of Employer			
	(b) Position held			
	(c) Date of appointment			
	(d) Nature of work undertaken			
14.	Previous employment (whole career to date)			
	Name of Employer	Date/Period Employed	Positions held	Nature of work undertaken
	(if more space is needed, please continue on a separate sheet)			
CATEGORY APPLIED FOR				
15.	Classification of Establishment			
16.	Grading			
17.	Appendices			
	Certified copies of all academic and medical certificates are enclosed			
	Application fee enclosed			

DECLARATION

I declare that the information furnished by me in this application is true, correct and complete to the best of my knowledge.

I understand that any incorrect, misleading or untrue information or the withholding of any relevant information may affect my registration as a member of the Institute

.....
Name of applicant *Signature*

Date

FOR OFFICIAL USE ONLY	
Received by: <i>Officer (Name and Signature)</i> <i>Date</i>
Application Fee Received:	Receipt No.:
Date presented to the Secretary:	
Decision:	
Date applicant informed of decision:	
Fee for registration received:	
Registration number:	
Remarks:	
<div style="border: 1px solid black; padding: 5px; text-align: center;"> OFFICIAL STAMP </div>	

Form VI
(Regulation 8(2))
(To be completed in triplicate)



REPUBLIC OF ZAMBIA

The Tourism and Hospitality Act, 2015

(Act No. 13 of 2015)

The Tourism and Hospitality (Registration of Hotel Managers) Regulations, 2016

REGISTRATION NO.:

PRACTISING CERTIFICATE

Surname:

First Name(s)

Name of establishment:

Classification of establishment:

Star grading:

Address:

Given on the day of 20

Date of expiry:

This is to certify that the person named on this Certificate has complied with the provisions of section 59 of the Tourism and Hospitality Act, 2015.

.....
Chairperson

.....
Secretary

Date:

Date:

NOTE:

This Certificate is only valid if it bears the official seal of the Ministry.



REPUBLIC OF ZAMBIA

The Tourism and Hospitality Act, 2015
(Act No. 13 of 2015)

The Tourism and Hospitality (Registration of Hotel Managers) Regulations, 2016

APPLICATION FOR RENEWAL OF PRACTISING CERTIFICATE

Please complete in block letters		Shaded fields for official use only	Application No.	
			Date and Time	
Information Required		Information Provided		
1.	(a) Surname			✓
	(b) Other names			
2.	Registration No.			
3.	Address			
	(a) Physical address			
	House No.			
	(b) Postal address			
4.	Contact details			
	(a) Telephone No.			
	(b) Fax No.			
	(c) Mobile phone No.			
	(d) Email address			
5.	Have you since your registration as an HOTEL MANAGER been convicted of an offence under any law within or outside Zambia? If yes, specify details: Nature of offence: Date of conviction: Sentence:			
6.	State any particulars which have changed since your last registration			
CATEGORY APPLIED FOR				
7.	Classification of Establishment			
8.	Grading			
DECLARATION				
I declare that the information furnished by me in this application is true, correct and complete to the best of my knowledge.				
I understand that any incorrect, misleading or untrue information or the withholding of any relevant information may affect the renewal of registration as an HOTEL MANAGER.				
..... Name of applicant	 Signature		
..... Date				
FOR OFFICIAL USE ONLY				
Received by: Date		
..... Officer (Name and Signature)				
Application Fee Received:		Receipt No.:		
Date presented to the Secretary:				
Decision:				
Registration No.:				
File No.:				
Remarks:				
.....				

OFFICIAL
STAMP



REPUBLIC OF ZAMBIA

The Tourism and Hospitality Act, 2015
(Act No. 13 of 2015)

The Tourism and Hospitality (Registration of Hotel Managers) Regulations, 2016

APPLICATION FOR EXEMPTION

Please complete in block letters	Shaded fields for official use only	Application No.	
		Date and Time	
Information Required	Information Provided		✓
PART I PARTICULARS			
1.	(a) Surname (block capitals) (b) Other names		
2.	Sex (Tick (✓) where applicable)	Male	Female
3.	Date of birth (dd/mm/yyyy)		
4.	Place of birth	District	Country
5.	Nationality		
6.	(a) National Registration Card/Passport/permit No. (b) Place of issue (c) Date of issue (dd/mm/yyyy)		
7.	Address (a) Physical address House No. (b) Postal address		
8.	Contact details (a) Telephone No. (b) Fax No. (c) Mobile phone No. (d) Email address		
EDUCATIONAL BACKGROUND			
9.	School, Technical College or University attended (give dates)		
10.	Course of study		
11.	Professional examination passed (give dates)		
12.	Membership of professional organisations (give grade of membership)		
PART II EMPLOYMENT RECORD			

PART II EMPLOYMENT RECORD				
13.	Present employment			
	(a) Name of Employer			
	(b) Position held			
	(c) Date of appointment			
	(d) Nature of work undertaken			
14.	Previous employment (whole career to date)			
	Name of Employer	Date/Period Employed	Positions held	Nature of work undertaken
15.	ESTABLISHMENT DETAILS			
	No. of rooms			
	No. of staff			
	Type of Establishment			
	Is applicant an owner/manager			
16.	REASONS FOR EXEMPTION			
	Reasons for which exemption from registration is sought			
	Type of Establishment			
	Is applicant an owner/Managers			
DECLARATION				
I declare that the information furnished by me in this application is true, correct and complete to the best of my knowledge.				
I understand that any incorrect, misleading or untrue information or the withholding of any relevant information may affect my registration as an HOTEL MANAGER				
<div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 45%; text-align: center;"> <p>.....</p> <p><i>Name of applicant</i></p> </div> <div style="width: 45%; text-align: center;"> <p>.....</p> <p><i>Signature</i></p> </div> </div> <div style="margin-top: 20px;"> <p>.....</p> <p style="text-align: center;"><i>Date</i></p> </div>				
FOR OFFICIAL USE ONLY				
Received by:				
<i>Officer (Name and Signature)</i>			<i>Date</i>	
Application Fee Received:			Receipt No:	
Date presented to the Secretary:				
Decision:				
Date applicant informed of decision:				
Fee for registration received:				
Registration number:				
Remarks:				
.....				
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> OFFICIAL STAMP </div>				

Form IX
(Regulation 10(3))
(To be completed in triplicate)



REPUBLIC OF ZAMBIA

**The Tourism and Hospitality Act, 2015
(Act No. 13 of 2015)**

The Tourism and Hospitality (Registration of Hotel Managers) Regulations, 2016

CERTIFICATE NO.

CERTIFICATE OF EXEMPTION

Holder's name:
Address:

The Exemption certificate is granted for a period of commencing on the day of 20
.....

The conditions of grant of the exemption are as shown in the Annexures attached hereto.

Issued at this day of 20.....

.....
Secretary

ENDORSEMENT OF REGISTRATION

This Certificate has this day of 20 been entered in the Register.

.....
Secretary

Suspension or Cancellation

Date of suspension	Details of suspension	Date of cancellation	Signature of Registrar



REPUBLIC OF ZAMBIA

**The Tourism and Hospitality Act, 2015
(Act No. 13 of 2015)**

The Tourism and Hospitality (Registration of Hotel Managers) Regulations, 2016

NOTICE OF REJECTION OF EXEMPTION

- (1) Here insert the full names and address of applicant
- (2) Here insert the reference No. of the application
- (3) Here insert type of exemption
- To (1).....
-
- IN THE MATTER OF (2)..... you are hereby notified that your application for exemption from registration as (3)..... has been rejected on the following grounds:
- (a)
- (b)
- (c)
- (d)

Dated this day of 20.....

.....
Secretary



REPUBLIC OF ZAMBIA

The Tourism and Hospitality Act, 2015

(Act No. 13 of 2015)

The Tourism and Hospitality (Registration of Hotel Managers) Regulations, 2016

NOTICE OF CHANGE OF PARTICULARS

To: The Secretary

Reference No. (1)

I (2) of (3)

..... notify your office

that on the day of, 20....., my (4)

..... changed as follows:

- (1) Here insert the registration No.
- (2) Here insert the full names of the holder
- (3) Here insert physical and postal address of the applicant
- (4) Here specify the detail which has changed

Previous Details	Current Details

Dated this day of, 20.....

.....
Signature of Holder

FOR OFFICIAL USE ONLY

Received by:

Name of officer

Signature

Date:, 20

OFFICIAL
STAMP

ENDORSEMENT OF REGISTRATION

This notice has, this day of, 20, been entered in the Register.

.....
Secretary



REPUBLIC OF ZAMBIA

The Tourism and Hospitality Act, 2015

(Act No. 13 of 2015)

The Tourism and Hospitality (Registration of Hotel Managers) Regulations, 2016

NOTICE OF INTENTION TO SURRENDER CERTIFICATE OF REGISTRATION

- (1) Here insert the registration No.
- (2) Here insert the full names of the holder
- (3) Here insert physical and postal address of the applicant
- (4) Here give reasons for surrendering of certificate

To: The Secretary

REFERENCE NO. (1)

I (2) of (3)

..... notify your office that on the day of, 20....., I intend to surrender my certificate of registration because of the following reasons: (4)

(a)

(b)

(c)

Dated this day of, 20.....

.....
Signature of Holder

FOR OFFICIAL USE ONLY

Received by:

Name of officer

Signature

Date:, 20

OFFICIAL
STAMP

ENDORSEMENT OF REGISTRATION

This Notice has, this day of, 20, been entered in the Register.

.....
Secretary



REPUBLIC OF ZAMBIA

The Tourism and Hospitality Act, 2015

(Act No. 13 of 2015)

The Tourism and Hospitality (Registration of Hotel Managers) Regulations, 2016

NOTICE OF INTENTION TO SUSPEND () CANCEL () THE

CERTIFICATE OF REGISTRATION/PRACTISING CERTIFICATE

- (1) Here insert the full names and address of the holder
- (2) Here insert the Registration No.
- (3) Here state address of the Registrar of Hotel Managers
- (4) Here insert the number of days

To (1).....

IN THE MATTER OF (2) you are notified that I intend to suspend/cancel your registration as an HOTEL MANAGER on the following grounds:

- (a)
- (b)
- (c)
- (d)

Accordingly, you are requested to appear before the Council on the day of 20, at (3) to address the matters set out in paragraphs (above) within (4) days of receiving this notice. Your failure to appear before the Council shall result in your removal from the Register of Hotel Managers.

Dated this day of, 20.....

Secretary

*Delete whichever is not applicable

OFFICIAL
STAMP

ENDORSEMENT OF REGISTRATION

This Notice has, this day of, 20....., been entered in the Register.

Chairperson



REPUBLIC OF ZAMBIA

The Tourism and Hospitality Act, 2015

(Act No. 13 of 2015)

The Tourism and Hospitality (Registration of Hotel Managers) Regulations, 2016

Tick as
applicable

NOTICE OF SUSPENSION () CANCELLATION () OF CERTIFICATES OF
REGISTRATION () PRACTISING CERTIFICATE

- (1) Here insert the
full names and
address of
holder
(2) Here insert the
Registration No.

Thylyl

IN THE MATTER OF (2) you are
notified that your registration as an HOTEL MANAGER has been suspended () cancelled ()
on the following grounds:

- (a)
.....
(b)
.....
(c)
.....
(d)
.....

Dated this day of, 20

.....
Secretary

OFFICIAL
STAMP

ENDORSEMENT OF REGISTRATION

This Notice, has this day of 20, been
entered in the Register.

.....
Chairperson



REPUBLIC OF ZAMBIA

The Tourism and Hospitality Act, 2015
(Act No. 13 of 2015)

The Tourism and Hospitality (Registration of Hotel Managers) Regulations, 2016

APPLICATION FOR DUPLICATE CERTIFICATE OF REGISTRATION / PRACTISING CERTIFICATE			
Please complete in block letters	Shaded fields for official use only	Application No.	
		Date and Time	
<i>Information Required</i>	<i>Information Provided</i>		√
1. (a) Surname			
(b) Other names			
2. Registration No.			
3. Address			
(a) Physical address			
(b) Postal address			
4. Contact details			
(a) Telephone No.			
(b) Fax No.			
(c) Mobilephone No.			
(d) Email address			
5. Appendix			
Affidavit of loss, destruction or otherwise of original registration			
<p>Name of applicant (individual or authorised representative):</p> <p>Signature : Date:</p>			
FOR OFFICIAL USE ONLY			
<p>Received by: <div style="text-align: center; margin-top: -10px;"><i>Officer (Name and Signature)</i></div> <div style="text-align: right; margin-top: -10px;"><i>Date</i></div> </p> <p>Amount Received:</p> <p>Receipt No.:</p> <p>File No.:</p> <p>Remarks:</p>			
			OFFICIAL STAMP



REPUBLIC OF ZAMBIA

The Tourism and Hospitality Act, 2015
(Act No. 13 of 2015)

The Tourism and Hospitality (Registration of Hotel Managers) Regulations, 2016

NOTICE OF APPEAL

- (1) Here insert the Registration No.
- (2) Here insert the full names of the holder
- (3) Here insert residential address of the holder
- (4) Here insert the decision made

To: THE MINISTER

IN THE MATTER OF (1)

I (2) of (3)

appeal against the following decision of the Council made on the day of
....., 20

(4)

..... on the following grounds:

(a)

(b)

(c)

(d)

Dated at this day of, 20

.....
Signature of Appellant

*Delete whichever is not applicable

FOR OFFICIAL USE ONLY

This appeal has, this day of, 20 been lodged with
the Minister of Tourism and Arts

.....
Name of receiving officer

.....
Signature

.....
Position

.....
Date

SECOND SCHEDULE

(Regulation 27)

PRESCRIBED FEES

<i>No.</i>	<i>Item</i>	<i>Category</i>	<i>Fee Units</i>
1.	Registration fee	All categories	7,500
2.	Practicing Certificate	Three – Five Star	5,000
		Ungraded – two star	3,500
3.	Exemption fee	All categories	3,500
4.	Change of particulars	All categories	2,000
5.	Duplicate Certificate of Registration	All categories	2,000
6.	Duplicate Practicing Certificate	All categories	2,000
7.	Inspection of register	All categories	350

LUSAKA

25th November, 2016

[MTA/00/0/0]

C. R. BANDA,
Minister of Tourism and Arts