

Endereço : Andar Térreo Ala Leste do Palácio do Governo, Edifício nº 1, Avenida Marginal Dili, Timor-Leste, PO Box 113, **Telephone**: +670 3 324 098 / 3317216 / 3317215 / 3312735

FORM -6: APPLICATION FOR EXTENSION OF LICENSE

TYPE OF LICENSE TO BE		CATEGOTRIES		CLASSIFICATION	
EXTENDED					
	PROSPECTING LICENSE		CONSTRUCTION		ARTISANAL
•••	(See Annex-6.1)	•••	MATERIALS	•••	AKTISANAL
	EXPLORATION LICENSE		PROCESS MATERIALS	•••	MEDIUM
	(See Annex-6.2)				
	MINING LICENSE (See		DIMENSION AND		LARGE
	Annex-6.3)	•••	ORNAMENTAL STONES	•••	LARGE

•••	Annex-6.3)	•••	ORNAMENTAL STONES	•••	LARGE
Atte	ention to;				
Mai	nager of Mineral Exploration a	nd E	xploitation		
Aut	Autoridade Nacional do Petróleo e Minerais, Timor-Leste				
In a	accordance with the requirement	nts ii	the Ministerial Diploma No	Artic	leissued by
the	Ministry of Petroleum and	Mine	eral Resources of Timor-Leste, th	e un	dersigned hereby
app	lies for extension of relevant lie	cese	marked above.		
The	area applied for is in public ar	ıd/or	private land, river, creek or other p	ublic	waters (underline
app	licable term), located in	n	the Aldeia of		, Suco of



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(Applicant)



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Annex -6.1 PROSPECTING LICENSE EXTENSION

PARTICULARS OF APPLICANT				
Name of applicant:				
Type of Identification Document :	Identification Document	t No. :		
Taxpayer Number (TIN):				
Taxpayer Number (Thv).				
Address:				
Municipio:	Posto	Suco		
		Aldeia		
Telephone:	Fax:			
Email				
PARTICULARS OF ORGANISATION (COMPANY/ASSOCIATION)				
Name of Company:				
Traine of Company.				
Address:				



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Copy of Certificate of Commercial Activities Authorised by SERVE				
and Company Statute (with documentary evidence)				
Tax Identification Number (TIN):				
Share Capital:				
Name and Nationality of Company Chief Executive :				
PARTICULARS OF FINANCIAL STANDING				
Details of financial availability for intended operations (with documentary evidence)				
Insurance coverage for the proposed prospecting activity (with documentary evidence)				
PARTICULARS OF TECHNICAL COMPETENCE AND EXPERIENCE				
changes in key personal if any				
CV's of the new key personal if any				
PARTICULARS OF OTHER REQUIREMENTS				
Description of any amendment area with coordinates (map)				
Prospecting report from previous licensed year				
- Objectives				
- Scope and program of the prospecting activity in previous				
- Progress and Results				
- Conclusion				
Program for the prospecting activity during the extended period				
- Objectives				
- Scope and program of the prospecting activity				
- Timeline				
- deliveries				



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	The applicant,	(insert name) hereby;		
1.	1. Declares that the information made in this application or made later in support hereof are true to the best of the applicant's knowledge. The applicant consent that any falsehood of information in this application may result in rejection to grant license.			
2.		ollected from the proposed activity and their analysis will be made available to the ANPM in		
	ture of the applicant's entative:	To be completed by the ANPM		
[signa	ture]	Fees to be paid : USD		

[signature]

[name]

.....

Date...../.....

Place :.....

[Name]

DECLARATION



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[I	Date]



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INSTRUCTION

- 1. This form shall be completed by the applicant and submit to the ANPM office, in both soft and hard copy.
- 2. All relevant information in the field required must be marked and given accordingly.
- 3. Application not accompanied with all the required documents may not be accepted.