

# MEMORANDUM

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From : District Officer/Suva Phone: 3313400  
To : Secretary, Suva Rural Local Authority File:DOS 20/1/1  
Re : Application for Business License Date:.....

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Enclosed is an application for Business Licence by one

Mr/Mrs..... of .....

who would like to operate a .....

I would be most grateful if you could inspect his/her premises and report below for our further necessary action.

Thanking you.

for District Officer/Suva

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Suva Rural Local Authority

Name  
Health Inspector:.....

Date of Inspection:.....

Report: