

## LA07 – Application Form – **Bar Service Management Substitute**

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**Prerequisites:** To complete this application form, Applicants are required to submit the following documents:

1. Copy of both sides of Identity Card (for Substitute);
2. Valid Police Conduct (for Substitute only);
3. An official Employment history from a Government Body (such as Jobsplus) and/or academic qualifications (for Substitute).

Notes:

**<sup>1</sup>All documents are to be submitted in PDF format.**

**Payment:** This Application carries a payment of €23.29, which may be affected at the end of the online application process. Should Applicants not be able to submit an online payment, they are to proceed to:

- MTA Head Office at Building SCM 01, Level 3, Smart City Malta, Ricasoli, SCM 1001, Kalkara. (Opening Hours: Mon-Fri, 8:30 am – 12:00 pm) **or**
- Business First, Ċentru Joseph Grech, 2nd Floor, Cobalt House, Mdina Road, Central Business District, Mrieħel (Opening Hours: <https://www.businessfirst.com.mt/opening-hours/>) **or**
- MTA Branch Office at 17, Independence Square, Victoria, Gozo. (Opening Hours: Mon-Fri, 8.00 am – 12.00 pm).

**Warning to Applicant/Substitute:** Any false statements, misrepresentation, or concealment of material fact in this form or in any document presented in support of this application form may constitute an offence and may lead to refusal, suspension, or revocation of any license and to administrative, civil, and/or criminal consequences at law.

**Data Protection Statement:** Personal information provided in this application is protected under the Data Protection Act (Chapter 586 of the Laws of Malta). The Malta Tourism Authority will process your personal data in accordance with the provisions of the Data Protection Act for licensing, compliance, and related administrative purposes, and to comply with the Authority's legal obligations. For further information about how your data is processed and your rights, please consult the Authority's privacy notice or contact the Data Protection Officer at [dataprotection.mta@visitmalta.com](mailto:dataprotection.mta@visitmalta.com).

**Assistance:** If you have any queries, you can call the Licensing Department on +356 2291 5000, or email [licencing.mta@visitmalta.com](mailto:licencing.mta@visitmalta.com).

### 1. Licensee Details:

- Name

Name:\* \_\_\_\_\_ Surname:\* \_\_\_\_\_

- Identity Card Number:\* \_\_\_\_\_

- Tel/Mobile Number:\* \_\_\_\_\_

- Email:\* \_\_\_\_\_

### 2. Details of Establishment:

- Name of Establishment:\* \_\_\_\_\_

- Number of Establishment:\* \_\_\_\_\_

- Address:\* \_\_\_\_\_  
\_\_\_\_\_

- Locality:\* \_\_\_\_\_

- Local Council:\* \_\_\_\_\_

- Postcode: \_\_\_\_\_

- MTA License Number:\* \_\_\_\_\_

### 3. Proposed Substitute Details:

- Name

Name:\* \_\_\_\_\_ Surname:\* \_\_\_\_\_

- Identity Card Number:\* \_\_\_\_\_

- Nationality:\* \_\_\_\_\_

- VAT Number:\* \_\_\_\_\_

- Address:\* \_\_\_\_\_  
\_\_\_\_\_

- Locality:\* \_\_\_\_\_

- Tel/Mobile Number:\* \_\_\_\_\_
- Email:\* \_\_\_\_\_

Is this the first (new) Substitute to be registered? (to be completed by licensee)

- Yes
- No

If 'No':

- New Substitute to be added jointly to the already registered Substitute/s
- Previous registered Substitute/s to be removed

**4. List of Registered Substitute/s:** (if applicable)

Name and Surname	Identity Card Number
1.	
2.	
3.	
4.	
5.	
6.	

**5. Registered Substitute/s to be Removed:** (if applicable)

Name and Surname	Identity Card Number
1.	
2.	
3.	
4.	
5.	
6.	

**6. Declaration by Applicant and Proposed Substitute:**

a) Operations (tick all):\*

- I/We undertake to inform the Malta Tourism Authority in writing of any changes in circumstances or information relevant to this application within not more than fourteen (14) calendar days from the date the change occurs, unless a shorter period is prescribed by law or by a condition so imposed.

b) General (tick all):\*

- I/We declare that I/We have read and understood the 'Warning to Applicant/Substitute' in this Application Form;
- I/We declare that the statements and information provided in or with this application are true, accurate and complete to the best of My/Our knowledge and belief, and acknowledge that making a false declaration or submitting false documentation may constitute an offence and may lead to refusal, suspension or revocation of any license and/or to administrative, civil and/or criminal consequences according to law;
- I/We declare that I/We have read and understood the Data Protection Statement in this application form and consent to the processing of personal data for the purposes stated therein.

**7. Signature of Licensee:**

- Signature of Licensee:\* \_\_\_\_\_
- Signatory's Full Name and Surname:\* \_\_\_\_\_
- Date:\* \_\_\_\_\_

**8. Signature of Proposed Substitute:**

- Signature of Proposed Substitute:\* \_\_\_\_\_
- Signatory's Full Name and Surname:\* \_\_\_\_\_
- Date:\* \_\_\_\_\_

**9. Checklist for Document Submission:**

1	Copy of both sides of Identity Card (for Substitute);	
2	Valid Police Conduct (for Substitute);	
3	An official Employment history from a Government Body (such as Jobsplus) and/or academic qualifications (for Substitute).	

Notes:

**<sup>1</sup>All documents are to be submitted in PDF format.**

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**For Office Use Only**

Application Reference: \_\_\_\_\_

Date Received: \_\_\_\_\_

Processed by: \_\_\_\_\_