



**For Offices, Banks, Industrial Premises, Supermarkets, Stores and similar premises/establishments**

**SECTION A – GENERAL INFORMATION** DATE:

BUSINESS NAME: CONTACT PERSON:  
 TELEPHONE #: FAX #:  
 BUSINESS ADDRESS: EMAIL:

**SECTION B – BACKGROUND MUSIC**

Name of Establishment/Branch	Type of Establishment	Commencement Date	Avg. Staff/ Customer/Patrons Per Day

TYPE OF EQUIPMENT USED TO PLAY SOUND RECORDINGS:

CD Player      
 Cassette Deck/Turntable      
 Traditional Radio      
 Satellite Radio      
 Audio Jukebox      
 Other .....

TOTAL AREA OF PREMISES WHERE MUSIC IS USED/AUDIBLE (SQ/FEET): .....

**SECTION C – SPECIALLY FEATURED ENTERTAINMENT (Office Party)**

1. Name of Event	Type of Event	No. of Events Per Year	Hrs of Record Use per Event	1. Avg. Attendance per event 2. Entry Fee
1.				1.
2.				2. J\$
1.				1.
2.				3. J\$
1.				1.
2.				2. J\$

**SECTION D – OTHER SOUND SYSTEMS**

Do you use television at the premises in customer/patron areas? Please tick box Yes  No

If yes how many television screens/sets? .....

**SECTION E – FURTHER INFORMATION**

Please provide details of any additional use of sound recordings not covered in Section B/C/D

No. of Employees .....  
 Other Details.....

NAME AND SIGNATURE:...../.....

POSITION OF SIGNATORY: .....

DATE: .....

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**SECTION C CONTINUED (WHERE NEEDED)**

1. Name of Event	Type of Event	No. of Events Per Year	Hrs of Record Use per Event	1. Avg. Attendance per event
2. Date of Event				2. Entry Fee
1.				1.
2.				2. J\$
1.				1.
2.				3. J\$
1.				1.
2.				2. J\$