



**THE AGRICULTURAL SOCIETY OF KENYA,  
MOMBASA INTERNATIONAL SHOW**  
P. O. Box 82828 – 80100, Mombasa, Kenya.  
Tel: +254 722 556 383 / +254 732 462 891  
Wireless: +254(41)4471818 /+254(41)4471849  
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Form No.: \_\_\_\_\_

**CATERING CONCESSION APPLICATION FORM**

1. Full name(s) of applicant(s) in block letters:  
.....  
Partner(s) if any.....  
Address.....  
Telephone No .....  
Signature.....Date.....
2. We apply for a concession to operate: -
  - a) Bar (KShs. 55,000+VAT).....
  - b) Restaurant (KShs 60,000+VAT).....
  - c) Bar & Restaurant (KShs. 80,000+VAT).....
  - d) Food Kiosk/Catering Unit  
Small (KShs. 20,000+VAT) Medium (KShs. 30,000+VAT) Large (KShs. 40,000+VAT)
  - e) Ice Cream Depot/Selling points (KShs. 15,000+VAT)
3. We hereby certify that we run catering business with Mombasa County Government situated on: -  
Plot No.....Street/Town.....  
License No.....Estate/Town.....  
(Attach a photocopy of your current Mombasa County Catering license)
4. Have you run a catering establishment at a previous Mombasa International Show?  
For how many years..... Alone.....  
Name of partner.....  
Did you make a profit?       Yes    No  
Give Reason(s) Why you think you made or did not make a profit  
.....

**IMPORTANT NOTES:**

1. **The completed form should be returned to us not later than 22<sup>nd</sup> August 2025**
2. **Applicants are required to pay non-refundable fee of KShs. 1,000**
3. **Applicants are required to clear with the County Public Health Officers**
4. **Applicants are required to purchase daily entry tickets for their personnel**

**ACCEPTABLE MODES OF PAYMENT:**

1. PLEASE NOTE that the Society strictly **DOES NOT ACCEPT** cash payments.
2. The following are the acceptable modes of payments; **Direct Deposit** to our bank account at KCB, Treasury Square Mombasa; OR **EFT** Swift Code KCB LKENX Account number **110 643 6849** OR **Bankers Cheque** drawn in favour of **"A.S.K MOMBASA BRANCH"** OR **MPESA** Paybill Number **468981** and Account Name is **your company name**

**(FOR OFFICIAL USE ONLY)**

Concession granted/refused.....  
Special conditions (if any).....  
**Signed by: Branch Manager**  
.....Date.....