

APPLICATION FORM

Business name:	
Company registration number:	
VAT registration number:	
Business annual turnover:	
Name and surname of duly authorised representative:	
Designation of duly authorised representative:	
Identity number of duly authorised representative:	
Cell number:	
Alternative number:	
Email address:	
Website address (if applicable):	
Total PO value (VAT incl.):	
Expenditure amount required / total quotation value (VAT incl.) (Including delivery etc.):	
SARS information required, are you;	
VAT Compliant:	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
PAYE Compliant:	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Income Tax Compliant:	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A

I, the undersigned, being duly authorised thereto, declare that the information provided is true and correct.

Signed at _____ on this _____ day of _____ 2019

Signature