

Application Form

Rental				Esca	lation					Р	eriod				
Description of goods						Upgrade settlement					Total amount				
Company detail:															
Name of Business: Nature of Business:															
Registration No.				Vat Registration No.				Period in Bu			siness				
Contact					Telephone No.				Fax No.						
Postal Address:															
Physical Address:															
Installation Address:															
Landlord d	Landlord details: Company Name:														
Contact :				Tel No	:				А	Address					
Insurance	Insurance details: Company Name:														
Contact :	Contact:				Tel No:				Fax No:						
Auditors d	etails:	Cor	mpany Name:												
Contact				Tel No:				F	Fax No:						
Banking de	etails:	tails: Institution Name: Standard Bank													
Account No:				Bra	Branch :			Branch co			de:				
Trade references (No Banks or Financial institutes):															
Name:			Contact:		Tel No:				Credit Terms:				Date Acc Opened		pened:
1.)															
2.)															
3.)															
Details of Directors/Shareholders/Members/Partners:															
Name:		Tel No:	I.D. No:				Position:			Sh		nareholding%:			
1.)															
2.)															
3.)															

I I.D. No herby authorize you to make any enquiries you deem necessary to this application and the above mentioned referees are authorized to disclose information in support of this application.								
Signature:_	 	Date:						
	FOR APPR	OVAL:						
	CREDIT APPLICATION							
	COPY OF SA ID (Must be Verified) CUSTOMER INFORMATION							
	BANK STATEMENTS							
	CANCELLED CHEQUE							
	COMPANY LETTERHEAD							
	COMPANY REGISTRATION DOCS (cm1, cm2, cm9, cm22, cm29, cm44, cm46, or Cipro)							
	FINANCIAL/BANK STATEMENTS							
	Financial for deals over R150000 VAT Reg Number							
	SETTI EMENT							

(If Applicable)