



SUBMISSION OF DETAILS

Registered name of Company: _____

Date business registered: _____

Co Reg. no./I.D.no.(As applicable)_____ Copy req.on application

Trading Name:_____

Co. Vat Reg. no.: _____

Type of business: _____ Sole Trader/CC/Pty Ltd/Trust/Partnership/NPO

Type of business: _____

Details of authorised representative (signatory): _____

Designation: _____

Person handling account: _____ Designation: _____

Contact phone: _____ Cell: _____ Fax: _____

Email address: _____

Postal address: _____ Physical Address: _____

Postal code: _____

Banking Details of Company:

| Name of Bank: | Bank a/c number: | Branch/Branch No: | Type of account: |
|----------------------|-------------------------|--------------------------|-------------------------|
| | | | |
| Account Name: | | | |

Signed by applicant: _____ Print Name: _____ Date: _____
(the authorised representative)