

Bank Services: Business Application Form

CONFIDENTIAL

NOTE: Please complete in BLOCK LETTERS. Tick () appropriate block(s)

Type of legal entity

<input type="checkbox"/> (Pty) Ltd	<input type="checkbox"/> Listed	<input type="checkbox"/> Sole Proprietor
<input type="checkbox"/> Limited	<input type="checkbox"/> Partnership	<input type="checkbox"/> Foreign owned
<input type="checkbox"/> Trust/Estate	<input type="checkbox"/> S.A. owned	
<input type="checkbox"/> Closed Corporation	<input type="checkbox"/> Non-profit organisation	

SECTION A

Full legal name

Trade name

Registration number

Registration address

Head office address

Business address

Period at this address (years)

Postal address

Income tax no.

VAT no.

Telephone no. switch board Fax no.

Email address

Website

Nature of business

Financial year end Industry sector

Auditors

BANK DETAILS

Bank name Branch

Account no. Code

Type Account holder

Date opened Please provide details if the entity banks with more than one bank.

SECTION B AUTHORIZED PERSONNEL & OWNERSHIP DETAILS

1. FOR ALL ENTITIES (Provide a full list of authorised signatories with signatures and resolution authorising signatories to sign on behalf of the entity)

AUTHORISED SIGNATORY

Full name

Designation Date of birth

SA ID no./passport no.

Nationality

Residential address

Work tel no. Fax no.

Cell

Signature _____

