

Vat Number: 4660121530  
CK: 2004/090474/23  
Tel: 021 592 1208  
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11 Totius Street  
Goodwood  
7460



## APPLICATION FOR CREDIT FACILITIES

### BUSINESS CONTACT INFORMATION

REGISTERED COMPANY NAME: \_\_\_\_\_  
REGISTRATION NO: \_\_\_\_\_  
VAT REGISTRATION NO: \_\_\_\_\_  
TRADING NAME (if not as above): \_\_\_\_\_  
NAME OF HOLDING COMPANY: \_\_\_\_\_  
NATURE OF BUSINESS: \_\_\_\_\_  
DATE OF COMMENCEMENT OF BUSINESS: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
PHYSICAL ADDRESS: \_\_\_\_\_  
CODE: \_\_\_\_\_  
POSTAL ADDRESS (for accounting purposes): \_\_\_\_\_  
CODE: \_\_\_\_\_  
TELEPHONE NO: \_\_\_\_\_ FAX NO: \_\_\_\_\_  
E-MAIL: \_\_\_\_\_  
PREMISES OWNED / RENTED / LEASED: \_\_\_\_\_  
IF RENTED / LEASED PLEASE FURNISH THE DETAILS OF LANDLORD:  
NAME: \_\_\_\_\_  
POSTAL ADDRESS: \_\_\_\_\_  
TOWN / CITY: \_\_\_\_\_ POSTAL CODE: \_\_\_\_\_  
TELEPHONE NO: \_\_\_\_\_ FAX NO: \_\_\_\_\_  
TYPE OF PREMISES (e.g. factory): \_\_\_\_\_

### FULL NAMES OF DIRECTORS / OWNERS / SHAREHOLDERS / PARTNERS / MEMBERS INCLUDING THEIR RESIDENTIAL ADDRESS AND I.D. NUMBERS:

1 \_\_\_\_\_  
2 \_\_\_\_\_  
3 \_\_\_\_\_  
4 \_\_\_\_\_  
\_\_\_\_\_

NAME OF HOLDING COMPANY: \_\_\_\_\_  
NAME OF SUBSIDIARY COMPANIES: \_\_\_\_\_

**FINANCE DETAILS:**

BANK NAME: \_\_\_\_\_ ACCOUNT NO: \_\_\_\_\_  
BRANCH CODE: \_\_\_\_\_ SWIFT CODE: \_\_\_\_\_

**AUDITOR, ACCOUNTANT OR ACCOUNTING OFFICER'S DETAILS:**

NAME: \_\_\_\_\_  
TELEPHONE NO: \_\_\_\_\_ FAX NO: \_\_\_\_\_

**TRADE REFERENCES (COMPANY NAME / CONTACT PERSON/ TELEPHONE NO):**

1 \_\_\_\_\_  
2 \_\_\_\_\_  
3 \_\_\_\_\_

NAME OF PERSON RESPONSIBLE FOR THIS ACCOUNT: \_\_\_\_\_  
DESIGNATION: \_\_\_\_\_

**GENERAL CONDITIONS APPLICABLE TO CREDIT LIMIT/TERMS OF APPROVAL:  
CREDIT FACILITIES REQUIRED (PLEASE TICK  TERMS REQUIRED):**

**CREDIT TERMS**

- 7 days from date of invoice
- 30 days from date of invoice

**FOR OFFICE USE ONLY**

DATE: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
APPROVED: \_\_\_\_\_  
DECLINED: \_\_\_\_\_  
RECOMMENDATION: \_\_\_\_\_