

Shop 8  
Swartbos Centre  
OR Tambo Street  
Emalahleni



Vat Reg No.: 4910182148

(013) 656-6449  
(013) 656-5730  
(013) 656-0363  
(013) 656-1140  
ultimate@telkomsa.net

## Account Application

1. Registered name of entity: \_\_\_\_\_

2. Registration number: \_\_\_\_\_

3. Registered address: \_\_\_\_\_

4. Name under which the entity conducts business \_\_\_\_\_

5. Address from which the entity operates \_\_\_\_\_

6. Details of entity's manager:

Full names: \_\_\_\_\_

Date of birth \_\_\_\_\_

Identity Number \_\_\_\_\_

Nationality if not a SA citizen \_\_\_\_\_

Residential address: \_\_\_\_\_

Contact particulars: (Tel) \_\_\_\_\_ (Fax) \_\_\_\_\_

(email) \_\_\_\_\_

7. Account Contact Details

Company Contact No: \_\_\_\_\_

Contact Person \_\_\_\_\_

Email Address \_\_\_\_\_

Postal Address \_\_\_\_\_

VAT No \_\_\_\_\_

8. Domicilium citandi et executandi \_\_\_\_\_

9. Type of entity: 

PTY	CC	Trust	Inc	Sole Proprietor/Partnership
-----	----	-------	-----	-----------------------------

Initial:

Details of each director/member/trustee/partners of the entity:

	A	B	C
Full Names			
Date of birth			
Identity Number			
Nationality if not SA citizen			
Residential address			
Contact particulars:			
Tel			
Fax			
Email			

Documents Required	Company	Closed Corporation	Trust	Sole Proprietor / Partnership
Clear copy of ID's - Members/Directors/Trustees	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Articles of association	<input type="checkbox"/>			
Certificate of incorporation	<input type="checkbox"/>			
Certificate to commence business	<input type="checkbox"/>			
Memorandum of association	<input type="checkbox"/>			
CK 1 or CK2		<input type="checkbox"/>		
Latest CIPRO documents	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Confirmation and agreement by the trustees			<input type="checkbox"/>	
Letter of authority			<input type="checkbox"/>	
Trust Deed			<input type="checkbox"/>	
Proof of VAT No	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Proof of residence for entity & directors/members/trustees/partnership	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Company Profile	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
TAX Clearance Certificate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
BEE Certificate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Initial:

**Account Application:**

Account Type	Account Number Office Use	Max Credit per month	Signature of Applicant
Normal			
Complete Package			
UVEX			

**Trade reference**

Company	Telephone No	Account No at Company
1		
2		
3		

For Office Use:	Reference 1	Reference 2	Reference 3
Contact person			
Status of account			
Monthly credit limit			

I \_\_\_\_\_ hereby confirm that the above information is correct

Signed at \_\_\_\_\_ on this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_

\_\_\_\_\_  
Signature

Name: \_\_\_\_\_

Designation: \_\_\_\_\_

**Terms and Conditions**

- 1 The Applicant hereby applies to the Company to purchase good and/or services for the Company or its subsidiaries on open account.
- 2 The Applicant undertakes to pay for goods purchases on or before the date upon which payment for such purchases falls due in accordance with the credit terms granted to Applicant for time to time by the Company
- 3 The Applicant acknowledges that the are terms under which trade account is granted , by failing these terms no discount will be allowed. The Applicant further acknowledges that the Company may, at its sole discretion and without notice, change or revoke
- 4 The Applicant accepts that he/she/it shall be responsible for all costs (including client/attorney costs and collection commissions where applicable) arising from the recovery of any overdue amount owed by the Applicant .
- 5 The Applicant consents to be bound by the jurisdiction of the Magistrates Court at Witbank, or any other Magistrates Court having jurisdiction, at the option of the company, for any action taken against the applicant, irrespective of the amount involved
- 6 The Applicant and/or is/hers/its authorized representative acknowledges that he/she read and understood the contents of the application, and the Applicant binds himself/herself/itself thereto.
- 7 The Applicant warrants that the information provided in the schedule annexed hereto is, to the best of his/hers/its knowledge, true and correct.
- 8 I (INSERT NAME OF PERSON SIGNING) \_\_\_\_\_ declare that I am authorized and empowered by the Applicant to enter into this undertaking and to bind the Applicant thereto.
- 9 We hereby authorize Ultimate Optical to do a credit check on the entity as well as on the directors/members/trustees/partners of the entity
- 10 The owners/partners controlling shareholders/members of the Applicant hereby bind themselves and surety and co principal debtor for the due fulfilment by the Applicant of its obligation to the Company.
- 11 Ultimate Optical cannot do an account affordability since we are not NCR registered

Signed at \_\_\_\_\_ on this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_

\_\_\_\_\_  
Signature

Name: \_\_\_\_\_

Designation: \_\_\_\_\_