

## **NEW CREDITORS**

## **Purchases and Payments**

Tel (018) 299 4504 Fax (018) 299 4533

The following form must be **COMPLETED** in full.

1.		Registered name of Business	s:					
2.		Registration number of						
		Business:						
3.		VAT number:						
4.		Income Tax reference number	r:					
5.		Postal address:						
6.		Physical address:						
7.		Contact person for orders:						
		Telephone number:						
		Fax number:						
8.		Contact person for accounts.						
		Telephone number:						
		Fax number:						
9.		Email:						
10.		Credit terms (30 days from						
		statement or invoice)						
11.	,	Discount- 30 days:						
12		BEE Rating						
13.	FOR ELECTRONIC TRANSFERS							
		PLEASE ATTACH A CANCELLED					N FROM	
		BANK THAT BANKING DETAILS A			ORRECT. I	NB!!!!!!!!!!		
		Bank:						
		Branch:						
		Branch code:						
	Account number:							
	Account type:							
	Approved by				Date			
	Company							
						<u> </u>		

For Office Use Only

Approved	Date	9	Approved by	
by Snr			Head of	
Buyer			Creditors	