

Applicant Contact Details:

Contact Person: _____
E-mail address: _____
Telephone Number: _____

PART A: COMPANY INFORMATION

Number of Directors: _____ Number of Shareholders: _____

State the Principal business of the Company:

Company Telephone number: _____

Company Email address: _____

Business address of Company:

_____ (Street Address)
_____ (Suburb)
_____ (City/Town)
_____ (Postal code)

Postal address of Company:

_____ (Postal code)

NAME RESERVATION FOR COMPANY (IF REQUIRED – PAY ADDITIONAL R425.00)

Enter four proposed names for the Company (in order of preference)

1. _____
2. _____
3. _____
4. _____

State names of a Company or CC and registration number owned that has a similar name to the one above (IF KNOWN).

