

SUPPLIER INFORMATION SHEET

1. SUPPLIER DETAILS

| | Type of Firm | X |
|-----|---------------------------|---|
| 1. | Public company (Ltd) | |
| 2. | Private company (Pty) Ltd | |
| 3. | Close Corporation (CC) | |
| 4. | Sole Proprietor | |
| 5. | Partnership | |
| 6. | Trust | |
| 7. | Section 21 Company | |
| 8. | Governmental/ Parastatals | |
| 9. | Joint Venture | |
| 10. | Consortium | |
| 11. | Other, (Specify) | |

| | General Business Information | |
|-----|------------------------------|--|
| 12. | Registered name of Entity: | |
| 13. | Trading name of Entity: | |
| 14. | Registration Number: | |
| 15. | VAT Number: | |
| 16. | Income Tax Number: | |
| 17. | Telephone Number: | |
| 18. | Fax Number: | |
| 19. | E-mail Address: | |
| 20. | Business Address: | |
| 21. | Postal Address: | |
| 22. | Contact person: | |
| 23. | Contact person cell number: | |

| | | |
|-----|----------------------------|--|
| 24. | Web Address: | |
| 25. | Total Full-Time Employees: | |
| 26. | Total Part Time Employees: | |

2. OWNERSHIP DETAILS

List all Partners, Proprietors & Shareholders as indicated below (COMPULSARY)

| Name and Surname | ID # | Citizenship | Date of Ownership | Percentage of Ownership | Status (HDI, Women or Disabled) | Percentage Voting (In Decision-making) |
|------------------|------|-------------|-------------------|-------------------------|---------------------------------|--|
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3. AUDITORS/ACCOUNTANTS DETAILS

| Auditors/Accountant/s Details | |
|-------------------------------|-------------------------------|
| 1. | Name of Auditors/Accountants: |
| 2. | Telephone number: |
| 3. | Physical Address: |

4. BUSINESS SECTOR

| Business Sector | | X |
|-----------------|----------------------|---|
| 1. | Agriculture | |
| 2. | Mining and Quarrying | |

| | | |
|-----|---|--|
| 3. | Manufacturing | |
| 4. | Electricity, Gas and Water | |
| 5. | Construction | |
| 6. | Retail and Motor trade | |
| 7. | Wholesale trade, commercial and other trade | |
| 8. | Catering, accommodation and other | |
| 9. | Transport, storage and other trade | |
| 10. | Communications | |
| 11. | Finance and Business Services | |
| 12. | Repair/Allied Services | |
| 13. | Commercial Agents | |
| 14. | Community and Social Services | |
| 15. | Personal Services | |
| 16. | Other (Specify) | |

| Small, Medium, Micro Enterprise (SMME) status | | X |
|---|------------|---|
| 17. | Micro | |
| 18. | Very small | |
| 19. | Small | |
| 20. | Medium | |
| 21. | Large | |

| Part of Local Business Forum | | Yes | No |
|------------------------------|--|-----|----|
| 22 | | | |

5. SUPPLIER COMPLIANCE DETAILS

| Supplier Compliance Details | | Yes | No |
|-----------------------------|---|-----|----|
| 1. | Are you in possession of a B-BBEE certificate? (Please indicate) | | |
| 2. | Are you in possession of a Tax Clearance certificate? (Please indicate) | | |
| 3. | What is your B-BBEE level rating? (If applicable) | | |

| | | |
|----|--|--|
| 4. | What is the expiry date of your Tax Clearance certificate? (If applicable) | |
|----|--|--|

6. SUPPLIER BANKING DETAILS

| Banking Details | | |
|-----------------|-----------------------|--|
| 1. | Name of Bank: | |
| 2. | Account Name: | |
| 3. | Branch code and Name: | |
| 4. | Account Number: | |
| 5. | Account type: | |

7. DECLARATION OF INTEREST

| Declaration of Interest (Please indicate) | | Yes | No |
|---|--|-----|----|
| <i>In the interest of fairness and transparency, disclosure is required if a person wanting to register on the SIOC Community Development Trust database is having a kinship with employees in the service of SIOC Community Development Trust.</i> | | | |
| 1. | Are you or any connected with the entity applying for database registration employed by SIOC Community Development trust? | | |
| 2. | Have you been in the service of SIOC Community Development trust for the past six months? | | |
| 3. | Do you, or any person connected with the entity applying for database registration have any relationship (family, friend or other) with a person employed by the principal and who may be involved with the evaluation of this application? | | |
| 4. | Are you, or any person connected with the entity applying for database registration, aware of any relationship (family, friend or other) between the entity applying for database registration and any person employed by SIOC Community Development trust who may be involved in the evaluation of the application? | | |
| <i>If you have answered YES in any of the questions above, please furnish particulars in a separate page.</i> | | | |

| Declaration | |
|---|--|
| <p><i>I/We, the undersigned and duly authorized to do so, on behalf of the enterprise, declare that the information furnished is true and correct. If there are any changes to the information supplied on this form I/We will inform SIOC Community Development trust immediately.</i></p> | |
| Name of Enterprise: | |
| Name of Authorized Signatory: | |
| Designation of Authorized Signatory: | |
| Signature: | |

Please attach the following documents/certificates (if applicable) to this form (FICA documents required)

INDIVIDUAL

- Copy of ID document (SA Citizens) / Passport (Foreign Nationals)
- Proof of residential address less than three months old (for example utility bill, store account statement, bank document with residential address, DSTV account, municipal letter)
 - Should you not have proof of residential address in your name, you may provide a declaration by a third party confirming that you share a residential address with them and provide the third party's proof of ID and proof of residential address (less than three months old).
- Copy of SARS document confirming income tax number
- Copy of bank document confirming individual banking details (less than three months old)

TRUST

- Copy of Trust deed (if applicable, any deeds of amendment of Trust Deed)
- Copy of Letter of Authority
- Copy of SARS document confirming Income tax / VAT registration number for trust
- Resolution signed by all Trustees nominating authorised signatory / representative
- Copy of bank document confirming trust account banking details (less than three months old)
- For the authorised signatory / representative, each trustee, beneficiary and founder of the trust we require the following:
 - Copy of ID
 - Proof of residential address (less than three months old)

COMPANY

- Company CIPC registration documents
- Proof of business address (less than three months old), if different from registered address
- Copy of SARS document confirming Income tax / VAT registration number for company
- Resolution on company letterhead signed by all directors nominating authorised signatory / representative
- Copy of bank document confirming company banking details (less than three months old)
- For the authorised signatory / representative and / or CEO, each director and each person or corporation with shareholding of 25% or more in the company, we require the following:
 - Copy of ID
 - Proof of residential address (less than three months old)
- Register of shareholders / written statement from the entity showing ownership and control structure of the company (shareholding diagram)
- Share Certificates

CLOSE CORPORATION

- Copy of Founding Statement (CK 1) and Certificate of Incorporation (if applicable, CK2 for any amendments to the Founding Statement)
- Proof of business address if different from registered address (less than three months old)
- Copy of SARS document confirming Income tax / VAT registration number for the CC
- Resolution on the CC letterhead signed by all members nominating one signatory / representative
- Copy of bank document confirming bank details of the company (less than three months old)
- For the authorised signatory / representative and each member we require the following:
 - Copy of ID
 - Proof of residential address (less than three months old)
- Share Certificates

PARTNERSHIP

- Copy of partnership agreement
- Proof of business address (less than three months old)
- Resolution signed by all partners nominating authorised signatory / representative
- Copy of SARS document confirming Income tax / VAT registration number for the partnership
- Copy of bank document confirming banking details of partnership account (less than three months old)
- For the authorised signatory / representative and each partner, we require the following:
 - Copy of ID

- Proof of residential address (less than three months old)
- Share Certificates

UNINCORPORATED ENTITIES (e.g. Clubs, Churches)

- Copy of document confirming list of all individuals who exercise control over the entity (constitution or similar founding document)
- Resolution signed by all individuals who exercise control over the entity nominating authorised signatory / representative
- Proof of physical address for the entity (less than three months old)
- Copy of SARS document confirming Income tax / VAT registration number for the entity
- Copy of bank document confirming banking details of partnership account (less than three months old)
- For the authorised signatory / representative and each member or partner, we require the following:
 - Copy of ID
 - Proof of residential address (less than three months old)

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