

FORM 1

APPLICATION FOR BUSINESS REGISTRATION CERTIFICATE LIMPOPO BUSINESS REGISTRATION ACT, 2003 (ACT No. 5 of 2003)

Regulation 4(1)

APPLICANT DETAILS (A person who has been assigned powers by the applicant)

Full Name: _____ Citizenship: _____

Id. No.: _____ Contact No.: _____

Office _____ No.: _____

Interest in the Business (e.g. Attorney/Shareholder/Manager, etc.)

_____ Date: _____

PERSONAL DETAILS OF OWNERS/SHAREHOLDERS

NAME	Identity No.	AGE	GENDE R	CETIZENSHIP	SIGNATURE

Percentage Shareholding of Previously Disadvantaged Designated Groups:

PARTICULARS OF BUSINESS

NAME OF BUSINESS:

CIPRO REGISTRATION No.(If Applicable):

TAX NUMBER (If Applicable):

Business Type: (Annexure A, Reg...) _____

Code:

Principal (Core) Business

Peripherals (Any Business activity other than the Principal Business) _____
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Tel.: _____ Fax. _____ e-mail.: _____

Physical Address:

Postal Code:

Postal Address:

Postal Code:

Municipal Office:

Estimated Number of Employment to be created:

FOR OFFICE USE

REF. No.: _____

Code:

- ATTACHMENTS:
- (a) Proof of representation (if application is done by proxy)
 - (b) Certified Identification Copy/Copies
 - (c) Proof of permission to conduct business in the Republic of South Africa
 - (c) CIPRO Registration Certificate (in case of juristic person)
 - (d) Proof of compliance with specific field requirements
 - (e) Proof of ownership of premises/Permission To Occupy/Lease Agreement
 - (f) Proof of Payment
 - (h) Recommendations from Local Authorities (e.g. Traditional Authority & Municipality)

APPROVED/NOT APPROVED

COMMENTS

OFFICIAL STAMP