SOUTH AFRICAN POST OFFICE LIMITED
Supply Chain Management
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ANNEXURE 'I'

SUPPLIER CREDENTIAL FORM

Contents:

Part A: General Particulars
Part B: Declaration

Please complete the form in full .

Part A: GENERAL PARTICULARS

1. Particulars of Enterprise

Registered Name of the Enterprise	
Trading Name	
Company/Close Corporation /Trust Registered Number	
Vat Registration Number	
Income Tax Reference Number	
PAYE Reference Number	
Physical Trading Address	
Province of Operation	
Postal Address	
E-mail address	
Business Tel number Business Fax number	
Particulars of contact person	
Initials and Surname	
Designation	
Direct Telephone Number	

RFP22/23/42/Modernised Trust Centre PKI/MM

Direct Fax number	
Cell phone number	
E-mail address	

2. (a) Provide your CSD registration number

(b) Provide sub-contractor CSD registration number (if applicable)

3. Type of business:

- ☐ Partnership
- ☐ Sole Trader
- ☐ Close Corporation
- ☐ Company Pty Ltd
- ☐ State Owned Enterprise
- ☐ Other (Specify) _____

4. Principal Business Activity and Types of Services Provided:

5. Since when has the enterprise been in operation? ☐ Months/Years

6.What is your company 's annual turnover (previous financial year)? R

Part B: DECLARATION

I, the undersigned hereby declare, in my capacity as _____ and duly authorised thereto, that the information furnished is true and correct and I hereby indemnify the South African Post Office from any loss and/or damages howsoever caused that I or any other party may suffer as a result of the said information being correct.

DULY AUTHORISED TO SIGN FOR AND ON BEHALF OF ENTERPRISE/ORGANISATION:

Name:	Signature:	Date:	Telephone
Address:			