SOUTH AFRICAN POST OFFICE LIMITED Supply Chain Management

Cnr. James Drive & Moreleta Str Silverton Pretoria 0002

PO Box 4162 Pretoria

0001 012 845 2400 012 804 7626/0109 Tel Fax

Website www.sapo.co.za

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																								
	T			ı	1	1			1	1								- 1	- 1				\neg	
				1			1	1	<u> </u>		<u> </u>													
Trading Name																							T	\Box
																		•		•				
Company/Close Corporation /Trust Registered Number																								
Vat Registration Number	I				1				1			1				1		1					_	
vac regionation realition	1	i	1	1	<u> </u>	1	<u> </u>	<u> </u>		<u> </u>	I	1												
Income Tax Reference Number																								
PAYE Reference Number	T	1	ı	T	1	1	1	1	1	1	1	1				- 1	- 1		- 1	1	-			$\neg \neg$
	<u> </u>						<u> </u>	1	<u> </u>			<u> </u>											+	\blacksquare
Physical Trading Address	-					-			-									_					+	\perp
				-		-	-										-						+	+
Province of Operation																								
															-									
Postal Address					_																		+	
						-																	_	_
									<u> </u>															
E-mail address																							_	
<u> </u>	ı		ı	1	1			ı	1	ı			1 1			- 1		- 1		1			_	
Business Tel number				-	-	-	-	-										_					+	-
Business Fax number	<u> </u>	<u> </u>	<u> </u>		<u> </u>				<u> </u>	<u> </u>	<u> </u>	<u> </u>											L	
Particulars of contact person					T		T	T	l									Ţ		-1		П		
Initials and Surname																							T	\Box
												•						•						
Designation																								
Direct Telephone Number	I		Ι	T	1	1	1	1	<u> </u>		<u> </u>						-	<u> </u>	1	-1			$\overline{}$	
Pirodi i diopriorio Natitibol	1	1	1	1	1	1	1		1	I	1	1	i l				1	- 1				1 1	- 1	1

RFP/21/22/22/ Supply of Domestic Air Cargo Services for SAPO/RM

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	n (Company Pty Ltd									
State Owned Ent	erprise										
Other (Specify)											
4. Principal Business Act5. Since when has the e	ivity and Types of Serv			Months/Years							
6.What is your company 's	s annual turnover (prev	vious 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:	Telephor	ne							
Address:											

RFP/21/22/22/ Supply of Domestic Air Cargo Services for SAPO/RM