

**PART A****KIT FORMWORK AND SCAFFOLDING (PTY) LIMITED**

Registration number: 2006 / 025981 / 07

VAT number: 4090235476

**Head Office:**52 Jakaranda Street  
Hennospark  
Centurion, 0157**Contact Details:**Tel: +27 012 004 1000  
accounts@kitformwork.co.za**TRADE ACCOUNT APPLICATION FORM****1. APPLICANT DETAILS**

Legal name of Business			
Trading Name, if any.			
ID or Registration number			
VAT number			
Business address			
		Postal code	
Registered address			
		Postal code	
Postal address			
		Postal code	
Office number			
Email			
Mobile / Alternative number			

**Type of Business (mark with an X)**

Public Company	Private Company	Partnership	Sole Proprietor	Close Corporation	Trust
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Other, please specify:

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**2. FINANCIAL / ASSET DISCLOSURE**

Last 3 (three) months Turnover	Month of _____	Month of _____	Month of _____
	R	R	R
Total turnover last 12 months	R		

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Does the Applicant own any Property, Plant or Machinery or any other assets of value? If yes, list below:

**Yes**     **No**

Description of Asset	Liability on Asset	Fair Market Value
	R	R
	R	R
	R	R
	R	R

**3. TRADE REFERENCES**

Name

Tel

Terms

Amount

Commencement

Name

Tel

Terms

Amount

Commencement

Name

Tel

Terms

Amount

Commencement

Name

Tel

Terms

Amount

Commencement

**4. ACCOUNT REQUIREMENTS**

Account limit applied for:

R

Payment terms strictly 30 (thirty) days from date of invoice.

It is a requirement **on all accounts** that **Suretyship** is given on behalf of the Applicant in favour of and to the satisfaction of Kit Formwork and Scaffolding (Pty) Limited herein.

It may further be required that on accounts with a **limit of more than R100,000.00** (one hundred thousand rand) that the Applicant provide further security in the form of a.) cession of debtors and b.) notarial bond / property bond or a bank guarantee.

**Additional Securities Available:**

Cession of Book Debts	<input type="checkbox"/> <b>Yes</b>	<input type="checkbox"/> <b>No</b>	Monthly Value	<input type="text" value="R"/>
Cession of Contracts	<input type="checkbox"/> <b>Yes</b>	<input type="checkbox"/> <b>No</b>	Outstanding Value	<input type="text" value="R"/>
Bank / Notarial Bond(s)	<input type="checkbox"/> <b>Yes</b>	<input type="checkbox"/> <b>No</b>		
Guarantee(s)	<input type="checkbox"/> <b>Yes</b>	<input type="checkbox"/> <b>No</b>		

**5. BANK / PAYMENT DETAILS**

Bankers	<input type="text"/>
Account Name	<input type="text"/>
Account number	<input type="text"/>
Branch Code / Name	<input type="text"/>

**Contact person for Account Management:**

Name and Surname	<input type="text"/>
Position	<input type="text"/>
Email	<input type="text"/>
Contact number(s)	<input type="text"/>

**6. MANAGEMENT / DIRECTOR / SHAREHOLDER DETAILS:**

Name & Surname	<input type="text"/>		
ID number	<input type="text"/>		
Position	<input type="text"/>		
Residential Address	<input type="text"/>		
Email	<input type="text"/>		
Mobile	<input type="text"/>		
Director	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Shareholder	<input type="checkbox"/> Yes	<input type="checkbox"/> No	If Yes, shareholding / interest <input type="text"/> %

Name & Surname	<input type="text"/>		
ID number	<input type="text"/>		
Position	<input type="text"/>		
Residential Address	<input type="text"/>		
Email	<input type="text"/>		
Mobile	<input type="text"/>		
Director	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Shareholder	<input type="checkbox"/> Yes	<input type="checkbox"/> No	If Yes, shareholding / interest <input type="text"/> %

Name & Surname	<input type="text"/>		
ID number	<input type="text"/>		
Position	<input type="text"/>		
Residential Address	<input type="text"/>		
Email	<input type="text"/>		
Mobile	<input type="text"/>		
Director	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Shareholder	<input type="checkbox"/> Yes	<input type="checkbox"/> No	If Yes, shareholding / interest <input type="text"/> %

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**7. ACKNOWLEDGEMENTS BY APPLICANT**

Is the Applicant or any of its directors or shareholders currently involved in any pending litigation and / or insolvency proceedings?

**Yes**

**No**

If yes, provide details below

Is the Applicant aware of any threatened litigation and / or insolvency proceedings to be initiated against the Applicant and / or any of its management, directors and / or shareholders?

**Yes**

**No**

If yes, provide details below

Has the Applicant in the past 12 months made any moratoriums or offers of compromise to any of its creditors?

**Yes**

**Yes**

If yes, provide details below

**IF YOU ANSWERED “YES” TO ANY OF THE ABOVE QUESTIONS, PLEASE PROVIDE DETAILS:**


**8. CONSENT BY APPLICANT**

The Applicant, by signing this application, hereby specifically consent to KIT Formwork and Scaffolding (Pty) Limited accessing the database of any Risk Information Agency and / or Credit Bureau to enquire into the credit and financial history of the Applicant to assess this Application.

**SIGNED AT** \_\_\_\_\_ **ON THIS THE** \_\_\_ **DAY OF** \_\_\_\_\_ **20** \_\_\_.

I, the undersigned, \_\_\_\_\_ with identity number \_\_\_\_\_, in my capacity as \_\_\_\_\_ of the Applicant do hereby warrant that all information recorded in this Application falls within my personal knowledge and are both true and correct.

\_\_\_\_\_  
**Signed on behalf of the Applicant**, who hereby warrant that he/she is duly authorised hereto.

**TO BE COMPLETED HEREAFTER, IF SUCCESSFUL:**

1. Part B – Terms and Conditions (pages 5 to 15)
2. Part C – Arbitration Agreement (pages 16 to 18)
3. Part D – Suretyship (19 to 24)
4. Part E – Cession (page 25)

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