23 Hof Street Table View Cape Town 7441 Kozen Trading 31 CC VAT no. 4920228485 Reg no. 2005/061289/23

CREDIT APPLICATION FOR A BUSINESS ACCOUNT

Please complete this application form on your computer using Adobe Reader (or similar) before printing.

Once printed, please sign and return via fax or email.

The following items/documentation must accompany this application:

- Copy of ID documents for all Directors
- Copy of SARS VAT registration (if applicable)
- Copy of ID document for signatory

CUSTOMER DETAILS

Company name:

Contact person:

Company name:

Contact person:

- Copy of company registration documents
- Proof of bank account (cancelled cheque/letter from the bank)

Sole proprietor	Partnership	Registered Company	Closed Corporation
Business name/customer:		Telephone number:	
Registered address:		Fax number:	
		VAT Number (if applicable):	
		Company registration number:	
Period at current address:		Date business commenced:	
DIRECTORS/PARTNERS			
Full Name:		Residential address:	
ID number: Telephone number:			
ID number: Telephone number:			
Full Name:		Residential address:	
ID number:			
Telephone number:			
ACCOUNTS DEPT. CONTACTS			
Accounts contact person:		Telephone number:	
Accounts email address:		Cell phone number:	
BANK DETAILS			
Bank name:		Account number:	
Branch code:		Account type:	
BUSINESS/TRADE REFERENCE	S Please provide three tr	ade references.	
Company name:		Telephone number:	
Contact person:		Type of account:	

Telephone number:
Type of account:

Telephone number:

Type of account:

AGREEMENT

- 1. By submitting this application, you authorize Lancom infrastructure to make inquiries into the banking and business/trade references that you have supplied.
- 2. All approved applicants will be placed on a seven day account for up to six months unless otherwise stated. All invoices are to be paid within seven days from the date of the invoice. Claims arising from invoices must be made immediately.
- 3. For applicants upgraded to a thirty day account, all invoices are to be paid within thirty days from the date of the invoice. Claims arising from invoices must be made within seven working days.
- 4. All overdue amounts shall accumulate interest at the prescribed rate in terms of the National Credit Act and shall be compounded monthly in arrears on all amounts owing to Lancom infrastructure. Such interest shall be payable on demand.
- 5. In the event of a defaulting payment of any amount that has become due and owing, then the full balance outstanding (whether due or not) will immediately become due and payable without notice.
- 6. Until such time as the applicant has paid the purchase price in full in respect of any purchase of goods, the ownership in and to all such goods shall remain vested in Lancom infrastructure. Lancom infrastructure shall, in its sole discretion, without notice to the applicant, be entitled to take possession of any such goods which have not been paid for and in respect of which payment is overdue, in which event the applicant shall be entitled to a credit in respect of the goods so returned being the price at which the goods are sold or the value thereof as determined by Lancom infrastructure. The applicant hereby waives any right it may have for a spoliation order against Lancom infrastructure in the event that Lancom infrastructure takes possession of any goods.
- 7. This contract contains the entire agreement between the parties and any other terms thereof whether express or implied or excluded herefrom and any variations, cancellations or additions to this contract shall not be of any force or effect unless reduced to writing and signed by the parties or their duly authorised signatories. The agreement shall be governed by the laws of the Republic of South Africa. The applicant, by their signature hereunder, confirm that the information submitted in this application is true and correct in all respects and that they are entirely familiar with the terms and conditions contained in this agreement.

ACCEPTANCE Please print document before signing			
Signatory's Name:			
Signatory's Designation:			
Signatory's ID number:			
Signed on behalf of Applicant:			
Date:			
WITNESS			
Witness's Name:			
Witness's Designation:			
Witness's ID number:			
Sign:			