

GREENFIN PARTNER APPLICATION FORM

APPLICANT / COMPANY DETAILS

Company/Trading Name:

Registration Number: / / (Pty)Ltd Ltd Other

VAT Number:

Physical Address:

Suburb: Town:

Province: Code:

Postal Address:

Suburb: Town:

Province: Code:

Cellphone: Telephone:

E-mail:

Website:

Services offered: Importer / Supplier Distributor / Franchise Installer

Eskom Registration Number:

SESSA Registration Number:

Plumbing Certificate / Accreditation:

Electrical Certificate / Accreditation:

Warranty Period on products: years Warranty on workmanship: years

Please attach clear copies of the following:

- | | | | |
|---------------------------------|--------------------------|------------------------------|--------------------------|
| Company Registration Papers | <input type="checkbox"/> | List of approved Installers | <input type="checkbox"/> |
| ID documents of directors | <input type="checkbox"/> | Certificates of affiliations | <input type="checkbox"/> |
| Proof of address (Utility bill) | <input type="checkbox"/> | SABS certificates | <input type="checkbox"/> |

BUSINESS OWNERS (please complete more copies where company has more than three

OWNER / DIRECTOR DETAILS 1*

Surname: First Name:

Second Name: ID no:

Position: Cell number:

Tel number: Work no:

Signature _____ Date: _____

OWNER / DIRECTOR DETAILS 2*

Surname: First Name:

Second Name: ID no:

Position: Cell number:

Tel number: Work no:

Signature _____ Date: _____

OWNER / DIRECTOR DETAILS 3*

Surname: First Name:

Second Name: ID no:

Position: Cell number:

Tel number: Work no:

Signature _____ Date: _____

* By signing this form I confirm that I am the duly authorised individual to act on behalf of the company. I hereby consent to credit, identity and fraud prevention checks with any registered credit bureau and/or other third party.