

# AANSOEK OM KLIËNTENOMMER / APPLICATION FOR CLIENT NUMBER

office use

## A REGSENTITEIT (Merk toepaslike soos per A1 of A2) / LEGAL ENTITY (Mark applicable as per A1 or A2)

BKB K1 VORM/ FORM 24.06

A1	Maatskappy Company <input type="checkbox"/>	Beslote Korporasie Closed Corporation <input type="checkbox"/>	Trust <input type="checkbox"/>	Vennootskap Partnership <input type="checkbox"/>	Ander (spesifiseer) Other (specify) <input type="text"/>
	Besigheidsnaam Business Name <input type="text"/>		Registrasie no Registration nr <input type="text"/>		
A2	Individu of Eenmansaak Individual or Sole Proprietor <input type="checkbox"/>	Titel/ Title <input type="text"/>		Voorletters / Initials <input type="text"/>	
	Volle name & van Full names & surname <input type="text"/>		ID no / nr <input type="text"/>		
A3	Handeldrywend as Trading as <input type="text"/>		BTW no VAT nr <input type="text"/>		
	Inkomstebelasting no Income Tax nr <input type="text"/>	Wolraad no Cape Wools nr <input type="text"/>	Agribonus no / nr <input type="text"/>		
A4	Aard van besigheid / Nature of business <input type="text"/>				

## B KONTAKBESONDERHEDE / CONTACT DETAILS

B1	Selfoon Kontak no 1 Cellphone Contact nr 1 <input type="text"/>	Kontakpersoon 1 Contact person 1 <input type="text"/>	Telefoon no Telephone nr <input type="text"/>
	B2	Selfoon kontak no 2 Cellphone Contact nr 2 <input type="text"/>	Kontakpersoon 2 Contact person 2 <input type="text"/>
B3	E-pos adres (state) E-mail address (statements) <input type="text"/>	E-pos adres (fakture) E-mail address (invoices) <input type="text"/>	

B4	Posadres / Postal Address <input type="text"/>		Fisiese adres / Physical Address <input type="text"/>	
	<input type="text"/>		<input type="text"/>	
	<input type="text"/>		<input type="text"/>	
	Poskode / Postal Code <input type="text"/>	<input type="text"/>	Poskode / Postal Code <input type="text"/>	<input type="text"/>

## C BANKBESONDERHEDE / BANK DETAILS

C	Banknaam / Bank name <input type="text"/>	Tjek / transmissie Cheque / transmission <input type="checkbox"/>	Spaar Savings <input type="checkbox"/>	Ander (spesifiseer) Other (specify) <input type="text"/>
	Takkode Branch Code <input type="text"/>	Rekeninghouer naam Account holder name <input type="text"/>		
		Bankrekening no Bank Account nr <input type="text"/>		

## D VOORDELIGE EIENAARSKAP VAN ENTITEIT (voltooi as A1 geselekteer het) / BENEFICIAL OWNERSHIP OF ENTITY (complete if A1 selected above)

Voltooi vir : Maatskappy (direkteure & aandeelhouers) / Beslote Korporasie (lede) / Trust (trustees, begunstigdes & oprigter) / Vennootskap (alle vennote) / Ander  
Complete for : Company (directors & shareholders) / Closed Corporation (members) / Trust (trustees, beneficiaries & founder) / Partnership (all partners) / Other

	Naam / Name	ID / Reg. no / nr	Kontakbesonderhede / Contact Detail	% Belang / % Share
D1				
D2				
D3				
D4				
D5				
D6				

## E GEVOLMAGTIGDE of VERTEENWOORDIGER / PROXY or REPRESENTATIVE

E	Volle name & van: Full names & surname <input type="text"/>	ID no / nr <input type="text"/>	E-pos adres / E-mail address <input type="text"/>	Kontak no / Contact nr <input type="text"/>
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## F AFSKRIFTE VAN STEUNENDE DOKUMENTE AANGEHEG / COPIES OF SUPPORTING DOCUMENTS ATTACHED

F	Kontrolelys / Checklist	Individu / Individual	Maatskappy / Company	BK / CC	Trust	Vennootskap / Partnership
F1	IDENTITEITSDOKUMENTE / IDENTITY DOCUMENTS <input type="checkbox"/>		Directors <input type="checkbox"/>	Members <input type="checkbox"/>	Trustees <input type="checkbox"/>	Partners <input type="checkbox"/>
F2	REGISTRASIEDOKUMENTE / REGISTRATION DOCUMENTS <input type="checkbox"/>		CIPC disclosure Shareholder disclosure <input type="checkbox"/>	CIPC disclosure Membership % disclosure <input type="checkbox"/>	Trust Deed <input type="checkbox"/>	Partnership Agreement <input type="checkbox"/>
F3	Current format SARS VAT NOTICE OF REGISTRATION <input type="checkbox"/>					as is applicable <input type="checkbox"/>
F4	SAID INKOMSTEBELASTING NO / SARS INCOME TAX NR <input type="checkbox"/>					as is applicable <input type="checkbox"/>
F5	BANKBEWYS / PROOF OF BANK DETAILS (< 3 months) <input type="checkbox"/>					
F6	WOONADRES / RESIDENTIAL ADDRESS <input type="checkbox"/>		Directors <input type="checkbox"/>	Members <input type="checkbox"/>	Trustees <input type="checkbox"/>	Partners <input type="checkbox"/>
F7	BESIGHEIDSADRES / TRADING ADDRESS <input type="checkbox"/>					
F8	VOLMAG (indien van toepassing) / PROXY (if applicable) <input type="checkbox"/>		signed by all directors <input type="checkbox"/>	signed by all members <input type="checkbox"/>	signed by all trustees <input type="checkbox"/>	signed by all partners <input type="checkbox"/>
F9	RESOLUSIE / RESOLUTION <input type="checkbox"/>					
F9	VERTEENWOORDIGER / REPRESENTATIVE <input type="checkbox"/>	ID document and proof of residential address of the representative or mandated person				

## G EK WIL GRAAG BEMARKINGS SMS'e ONTVANG / I WANT TO RECEIVE MARKETING SMS's

JA / YES

NEE / NO

As ondergetekende verklaar ek hiermee, in my Persoonlike hoedanigheid / as Gevolmagtigde / Verteenwoordiger, dat alle inligting in hierdie aansoek juis en korrek is, en onderneem om BKB in kennis te stel van enige verandering van die besonderhede. Hiermee word BKB en filiale gemagtig om inligting te verifieer.

As the undersigned I hereby declare, in my Personal capacity / as Proxy / Representative, that all information in this application is true and correct, and undertake to notify BKB of any changes in the detail. BKB and subsidiaries are hereby authorised to verify information.

Ondertekenaar Name & Van / Signee Names & Surname

Handtekening / Signature

Datum / Date