ANNEXURE DA 185.4B8

LICENSING CLIENT TYPE 4B8 – SPECIAL AD VALOREM MANUFACTURING WAREHOUSE

Trading Particulars:
Please supply all trade names and physical addresses if the business is conducted from a different address or under a different name as that stated in Block 5 of the application form (DA 185).

Trade name of business:

Customs Client Number
(if already registered):

Physical address: Street name and number:

Building name and floor number:
Suburb:
City/Town:
Street code:

Authority to apply:
I/We,

(name of applicant)

herein represented by:

(1) ................................................................. (Capacity)
(2) ................................................................. (Capacity)

being duly authorised thereto by virtue of –

(a) *a resolution passed at a meeting of the Board of Directors, held at ................................................................. on the ......................................................... day of ......................................................... (CCYY) ...........................................; or
(b) *express consent in writing of all the members of the close corporation /* partners of the partnership /* trustees of the trust; or
(c) * being a person having the management of any other association; or
(d) * delegated officer of an organ of state,

hereby apply for the licensing of a Special Ad Valorem Manufacturing Warehouse

Warehouse Particulars:

(a) Please indicate with an X whether the warehouse will also be utilised as follows:

Distribution Point
Factory Shop / Staff Shop
Other

(b) Please state the tariff item(s), tariff heading(s) and tariff subheading(s), and article description pertaining to the goods (dutiable and non-dutiable, including gift packs, samples and testers) that will be manufactured or stored in the warehouse.

<table>
<thead>
<tr>
<th>Tariff item(s)</th>
<th>Tariff heading(s)</th>
<th>Tariff subheading(s)</th>
<th>Article description</th>
</tr>
</thead>
<tbody>
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### Business History:

(a) Has the business been exempted from payment of ad valorem excise duty in terms of rule 36A.03 before?  
- Yes  
- No  
If yes, please indicate:

<table>
<thead>
<tr>
<th>Calendar years</th>
<th>Value for Duty Purposes</th>
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</table>

(b) Has the business been liquidated or sold under previous ownership with or without liabilities?  
- Yes  
- No  
If yes, please indicate:

### Business Particulars:

(a) Brief description of manufacturing process (continuation sheet may be attached to this form):

(b) Are the goods subject to ad valorem excise duty manufactured by the applicant under special contracts with particular purchasers?  
- Yes  
- No  
If yes, please complete below (continuation sheet may be attached to this form):

<table>
<thead>
<tr>
<th>Article</th>
<th>Owner of material</th>
<th>Basis of Contract</th>
<th>Name of Purchaser</th>
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</table>

(c) Are the goods subject to ad valorem excise duty manufactured on behalf of the applicant from material owned by him/her?  
- Yes  
- No  
If yes, please complete below (continuation sheet may be attached to this form):

<table>
<thead>
<tr>
<th>Article</th>
<th>Basis of Contract</th>
<th>Manufacturer</th>
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</table>

(d) If goods are manufactured for/by the licensee under the conditions mentioned in (d) and (e) please specify goods manufactured for own sale:

<table>
<thead>
<tr>
<th>Tariff Heading</th>
<th>Article, including brand names</th>
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(e) Is the applicant involved with a joint licensee in terms of 36A(2)(b)(i) and (ii), and section 44A of the Customs and Excise Act, 1964?  
- Yes  
- No  
If yes, please complete below:

<table>
<thead>
<tr>
<th>Name, including Trade Name</th>
<th>VS</th>
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Declaration:

I hereby -

(a) declare that the particulars in the application and all enclosures are true and correct; and

(b) undertake to -

   (i) inform the South African Revenue Service immediately of any changes in the particulars furnished in the application;
   (ii) comply with the customs and excise laws and procedures.

(c) The date of quarterly closing of accounts is: \( YY \ MM \ DD \)

(Initials and Surname) \( \) \( \) \( \)

(Status / Capacity, e.g. Director)

(Signature) \( \) \( \) \( \)

(Date & Place)

FOR OFFICIAL USE

Type of Warehouse: VS

Warehouse Number:

Licence Number:

Licence Date:

District Office: