ANNEXURE DA 185.4A1

REGISTERING CLIENT TYPE 4A1 – IMPORTER (LOCAL OR FOREIGN)

Notes:	• Please indicate with an" X" in the appropriate block(s) whichever is applicable • Whenever an asterisk (*) appears, please delete whichever is not applicable. • Please complete annexure DA185.C where security must be furnished. • The DA 185.C form is available from the SARS website (www.sars.gov.za) or can be collected from the nearest SARS – Customs Branch Office. • Please ensure that the Nomination Form (DA 185.D) is signed and is attached to this form (if a foreign principal).

1. 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 6 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:	

2. Clearance of imports:

RSA importer:	Self	☐	Clearing agent	☐			
Foreign importer:			Registered agent	☐	Clearing agent	☐	

3. Authority to apply:

I/We,

……..

(name of applicant)

herein represented by:

(1) …… (2) ……

(Capacity) (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,

hereby apply for registration as an importer.

4. 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.

……..... ……

(Initials and Surname) (Status / Capacity, e.g. Director)

……... ……

(Signature) (Date & Place)