| **1.** | **Master Services Agreement** | |
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|  | Description: | **The Appointment of a Panel of Service Providers for the Provision of Tax Consulting Services to SARS** |
| **2.** | **Description of Service Provider** | |
|  | * Name of the Service Provider: |  |
|  | * The Service Provider’s registration number: |  |
|  | * The Service Provider’s registered address: |  |
|  | * Physical address of the Service Provider for service of notices and legal processes: |  |
|  | * The Service Provider’s email address for communications, and/or correspondences in connection with the performance of the Services: |  |