

Please refer to the Supporting Document list available on the SARS website ([www.sars.gov.za](http://www.sars.gov.za))

Individual  Company/Trust/  
Partnership/ Other Entities

## Applicant Details – Individual

<b>Nature Of Entity</b>	Individual <input type="checkbox"/>	Partnership / Body of persons <input type="checkbox"/>	Company / CC / Shareblock <input type="checkbox"/>	Public authority / Municipality <input type="checkbox"/>	Association not for gain <input type="checkbox"/>	Estate / Liquidation <input type="checkbox"/>	Club <input type="checkbox"/>	Welfare organisation <input type="checkbox"/>	Trust Fund <input type="checkbox"/>	Foreign electronic service entity <input type="checkbox"/>
Surname	<input type="text"/>									
First Name	<input type="text"/>									
Other Name	<input type="text"/>									
Initials	<input type="text"/>	Date of Birth (CCYYMMDD) <input type="text"/>	ID No.	<input type="text"/>						
Passport/ Permit No	<input type="text"/>			Passport Country / Country of Origin (e.g. South Africa = ZAF)	<input type="text"/>		Passport / Permit Issue Date (CCYYMMDD)	<input type="text"/>		
Trading Name	<input type="text"/>									
	<input type="text"/>									

## Applicant Details - Company / Trust / Partnership and Other Entities

<b>Nature Of Entity</b>	Individual <input type="checkbox"/>	Partnership / Body of persons <input type="checkbox"/>	Company / CC / Shareblock <input type="checkbox"/>	Public authority / Municipality <input type="checkbox"/>	Association not for gain <input type="checkbox"/>	Estate / Liquidation <input type="checkbox"/>	Club <input type="checkbox"/>	Welfare organisation <input type="checkbox"/>	Trust Fund <input type="checkbox"/>	Foreign electronic service entity <input type="checkbox"/>	
Company / CC / Trust Reg No.	<input type="text"/>			Main Industry Classification Code	<input type="text"/>		Registration Date (CCYYMMDD)	<input type="text"/>		Financial Year End (MM)	<input type="text"/>
Registered Name	<input type="text"/>									Country of Registration (e.g. South Africa = ZAF)	<input type="text"/>
	<input type="text"/>									Master's Office of Trust Registration	<input type="text"/>
Trading Name	<input type="text"/>										
	<input type="text"/>										

## Applicant Info

Preferred Language

Not Married  Married in Community of Property  Married out of Community of Property  Are you a foreign diplomatic or consular mission? Y  N  Are all of the partners in this partnership natural persons? Y  N  Are you a asylum seeker with a valid permit? Y  N

Are you a Share Block? Y  N  Are you a Body Corporate? Y  N

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**Contact Details**

Home Tel No.

Fax No.

Cell No.

Bus Tel No.

Mark here with an X if you declare that you do not have a Cell No.

Mark here with an X if you declare that you do not have an Email address

Email

Web Address

**Physical Address Details**

Unit No.  Complex (if applicable)

Street No.  Street / Farm Name

Suburb / District

City / Town  Country Code

Postal Code  Registered Physical Address

**Postal Address Details**

**Complete this part if postal address is a Postal Box**

Mark here with an "X" if same as above or complete your Postal Address  Is your Postal Address a Street Address? Y  N  Mark here with an "X" if this is a Care Of address

Postal Agency or Other Sub-unit (if applicable) (e.g. Postnet Suite ID)

PO Box  Private Bag  Other PO Special Service (specify)  Number

Post Office  Country Code

Postal Code  Registered Postal Address

**Complete this part if postal address is a Street Address**

Unit No.  Complex (if applicable)

Street No.  Street / Farm Name

Suburb / District

City / Town  Country Code

Postal Code  Registered Postal Address

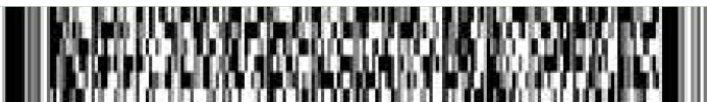
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**Particulars of Representative Taxpayer**

**Capacity:** Treasurer  Main Partner  Main Trustee  Public Officer  Main Member  Parent / Guardian  Accounting officer  Curator / Liquidator / Executor / Administrator (Estates)   
**Nature Of Entity:** Individual  Partnership / Body of persons  Company / CC / Shareblock  Public authority / Municipality  Association not for gain  Estate / Liquidation  Club  Welfare organisation  Trust Fund  Foreign electronic service entity   
 Surname   
 First Name   
 Other Name   
 Initials  Date of Birth (CCYYMMDD)  Date of Appointment (CCYYMMDD)  ID No.   
 Passport/Permit No.  Passport Country (e.g. South Africa = ZAF)  Passport Issue Date (CCYYMMDD)   
 Relationship Marked for Termination

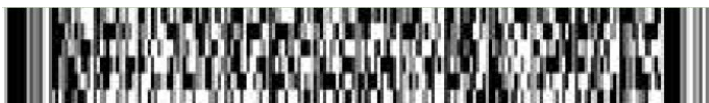
**Particulars of Members / Trustees / Beneficiaries / Partners / Directors etc.**

Is this party a natural person? Y  N

**Particulars - Individual**

**Capacity:** Treasurer  Partner  Trustee  Public Officer  Member  Parent / Guardian  Accounting officer  Curator / Liquidator / Executor / Administrator (Estates)   
 Director  Main Partner  Main Trustee  Main Member   
**Nature Of Entity:** Individual  Partnership / Body of persons  Company / CC / Shareblock  Public authority / Municipality  Association not for gain  Estate / Liquidation  Club  Welfare organisation  Trust Fund  Foreign electronic service entity   
 Surname   
 First Name   
 Other Name   
 Initials  Date of Birth (CCYYMMDD)  Date of Appointment (CCYYMMDD)  ID No.   
 Passport/Permit No.  Passport Country (e.g. South Africa = ZAF)  Passport Issue Date (CCYYMMDD)   
 Relationship Marked for Termination

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**Particulars - Company / Trust / Partnership and Other Entities**

Capacity: Partner

Nature of Entity

Company / CC / Trust Reg No.  Date of Appointment (CCYYMMDD)  Registration Date (CCYYMMDD)

Registered Name  Country of Registration (e.g. South Africa = ZAF)

**My Addresses**

**Address Details (Used to add, edit and delete addresses at library level)**

**Complete this part if address is a Postal Box**

Is your Postal Address a Street Address? Y  N  Mark here with an "X" if this is a Care Of address

Postal Agency or Other Sub-unit (if applicable) (e.g. Postnet Suite ID)

PO Box  Private Bag  Other PO Special Service (specify)  Number

Post Office  Country Code

Postal Code  **Registered Postal Address**

**Complete this part if address is a Street Address**

Unit No.  Complex (if applicable)

Street No.  Street / Farm Name

Suburb / District

City / Town  Country Code

Postal Code  **Registered Postal Address**  **Registered Physical Address**

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## My Bank Accounts

### Bank Account Holder Declaration

I use South African bank accounts  I use a South African Bank Account of a 3rd party  I declare that I have no South African bank account

### Reason for No Local / 3rd Party Bank Account – Individual

Non-resident without a local bank account  Insolvency / Curatorship  Deceased Estate  Shared Account  Income below tax threshold / Impractical  Statutory restrictions  Minor child

### Reason for No Local / 3rd Party Bank Account – Company / Trust / CC / Partnership / Government / Foreign Entity / Other Exempt Institutions etc.

Non-resident without a local bank account  Liquidation  Company Deregistration  Group Company Account  Dormant  Trust Administrator Account

### Bank Account Details

Bank Account Status

Account No.

Branch No.

Account Type: Cheque  Savings  Transmission

Bank Name

Branch Name

Account Holder Name (Account name as registered at bank)

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# VAT

VAT Liability Date (CCYYMMDD)

Business Activity Code

Mark here if you derive farming income in addition to your main business activity income

Farming Activity Code

## Financial Particulars

### Registration Options

Select one of the registration options below.

Taxable supplies exceeded R120 000 in the preceding 12 months

Y  N

Taxable supplies did not exceed R120 000 in the preceding 12 months but are reasonably expected to exceed R120 000 in the following 12 months, based on one or more of the following situations:

Y  N

The actual value of taxable supplies exceeded either an average of R10 000 per month for a minimum of 2 months and a maximum of 11 months immediately preceding the date of registration, or an actual value of R10 000 in the month immediately preceding the date of registration

Y  N

The actual value of taxable supplies was nil or did not exceed either an average of R10 000 per month for a minimum of 2 months and a maximum of 11 months immediately preceding the date of registration, or an actual value of R10 000 in the month immediately preceding the date of registration, but either of the following exist

Y  N

Written Contracts in terms of which a contractual obligation exists in writing, to make taxable supplies in excess of R120 000 in the following 12 months reckoned from the date of registration; or

Y  N

Finance Agreements wherein the total repayments in terms of that financial, credit or other agreement will in the following 12 months reckoned from the date of registration exceed R120 000 or

Y  N

Expenditure incurred or to be incurred or capital goods acquired and payments made will in the following 12 months reckoned from the date of registration exceed R120 000

Y  N

Goods or services are acquired directly in respect of the commencement of a continuous and regular activity and taxable supplies are expected to be made after a period of time

Y  N

### Value of Taxable Supplies

Furnish the actual / expected total value of taxable supplies for a period of 12 months as follows:

Standard rated supplies R

Zero-rated supplies (including goods /services exported to other countries) R

Total value of taxable supplies R

Accounting basis: Payment  Invoice

Note: In the case of the purchase of a going concern, furnish the value of supplies made by the seller.

### Tax Periods

Please select one of the following:

Monthly tax period  Tax periods of 6 months (Farming – only if taxable supplies for 12 months do not exceed R1.5 million)

Tax periods of two months  Tax periods of 12 months ending on financial year end

## VAT - Diesel Refund Concession Options

On Land Status:

Would you like to register for diesel refunds – On land ? Y  N

Off Shore Status:

Would you like to register for diesel refunds – Off shore ? Y  N

Rail Status:

Would you like to register for diesel refunds – Rail ? Y  N

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## VAT – Diesel Refund

### Concession Type – On Land

Liability Date (CCYYMMDD)	<input type="text"/>	Estimated Diesel Purchases (litres p/a) for Current Financial Year	<input type="text"/>	Estimated Turnover for Current Financial Year	R	<input type="text"/>
Major Division	Forestry and Logging <input type="checkbox"/>	Mining and Quarrying <input type="checkbox"/>	Mining Sub - classification <input type="text"/>	Farming <input type="checkbox"/>	Farming Sub - classification	<input type="text"/>

### Concession Type – Offshore & Electricity Generating Plant

Liability Date (CCYYMMDD)	<input type="text"/>	Estimated Diesel Purchases (litres p/a) for Current Financial Year	<input type="text"/>	Estimated Turnover for Current Financial Year	R	<input type="text"/>
Major Division	Coastal Shipping <input type="checkbox"/>	Offshore Mining <input type="checkbox"/>	Electricity Generating Plant <input type="checkbox"/>	NSRI <input type="checkbox"/>	Commercial Fishing	<input type="checkbox"/>

### Concession Type – Rail & Harbour Services

Liability Date (CCYYMMDD)	<input type="text"/>	Estimated Diesel Purchases (litres p/a) for Current Financial Year	<input type="text"/>	Estimated Turnover for Current Financial Year	R	<input type="text"/>
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### Tax Practitioner Details

Registration Status	<input type="text"/>	Registration No.	<input type="text"/>	Appointment Date(CCYYMMDD)	<input type="text"/>
Controlling Body	<input type="text"/>				
	<input type="text"/>				

### Declaration

I, the undersigned (taxpayer/representative taxpayer) hereby indemnify the South African Revenue Service (SARS) against any loss which may occur due to any payment by SARS transferred to the above bank account nominated by me.

I declare that to the best of my knowledge the information in this form is true and correct and meets the requirements of any legislation as administered by SARS.

Signature

Date (CCYYMMDD)

For enquiries go to [www.sars.gov.za](http://www.sars.gov.za) or call 0800 00 SARS (7277)

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