



Confirmation of Residential / Business Address by Third Party

Type:

Individual

Partnership

Trust

Company/
CC

CRA01

Third Party Details *(to be completed by the person providing proof of residence)*

Note: A copy of the proof of residential/business address must accompany this declaration

Personal Details

Surname

First Two
Names

Initials

Date of Birth
(CCYYMMDD)

ID No.

Passport
No.

Passport Country (e.g.
South Africa = ZAF)

Contact Details

Home Tel
No.
Contact
Email

Cell No.

Bus Tel
No.

Physical Address *(the address being confirmed)*

Unit No.

Complex (if
applicable)

Street No.

Street / Farm
Name

Suburb/
District

City/
Town

Postal
Code

Country Code
(e.g. South Africa = ZA)

Declaration

I hereby declare that the residential /
business address being confirmed
is true and correct.

I confirm that the taxpayer reflected,
resides / carries on business at the
aforementioned address.

XXXXXXXXXXXXXXXXXXXXXXXXXXXX
XXXXXXXXXXXXXXXXXXXXXXXXXXXX

Please ensure you sign over
the 2 lines of 'X's above

For enquiries go to www.sars.gov.za or
call 0800 00 7277

Date
(CCYYMMDD)

Relationship to Taxpayer/Entity

Owner

Lessor

Landlord

Property/Estate Agency

Councillor/Traditional Leader

Other (Please
specify)

If 'other' provide details:

L

FV

SV

CT

NO

P

Y

Details of Taxpayer *(requesting change or confirmation of physical address)*

Surname

First Two
Names

Initials

Date of Birth
(CCYYMMDD)

ID No.

Passport
No.

Taxpayer
Reference No.

Passport Country (e.g.
South Africa = ZAF)

Entity Details

Registered
Name

Trading
Name

Registered
No.

Taxpayer
Reference No.

Contact Details

Home Tel
No.
Contact
Email

Cell No.

Bus Tel
No.

L

FV

SV

CT

NO

P

Y