AFRIMAT

CONFIDENTIAL APPLICATION FOR CREDIT FACILITIES IN

_____

(Insert legal name of Afrimat subsidiary)

(Where required tick the appropriate block. Application must be completed in full, in ink and initialed on each page. Every question must be answered.)

1. Legal entity name:					
2. Legal entity reg. no./I.D. no.:				3. VAT no.:	
4. Legal entity type:	☐ Public company	☐ Private company	☐ Close corporation	☐ Partnership	☐ Trust ☐ Sole proprietor ☐ Other
5. Legal entity street address:				Postal code:	
6. Legal entity postal address:				Postal code:	
7. Legal entity nature of business:					
8. Legal entity contact details:	Account enquiries name:			Fax code & no.:	
	Tel. code & no.:			Email:	
9. Trading name:					
10. Holding company name:					

11. The following details are needed for each director / member / partner / trustee / owner of the legal entity: (Please attach page with these details)

Name:			
I.D. number:			
Home street address:		Postal code:	
Home postal address:		Postal code:	
Home tel. no.:		Email:	
Cellphone no.:			
Marriage status:	☐ Single ☐ Married COP ☐ Married ANC		

12. Bank name:		Bank branch code:		Bank acc. no.:	
13. Financial manager name:				Tel. code & no.:	

14. Have you had any supplies from Afrimat Limited or its subsidiaries before? ☐ Yes ☐ No

If 'Yes' than complete the following:	Supplier name 1:		Account no.:	
	Supplier name 2:		Account no.:	

15. Estimate monthly purchases amount:	R	
16. Credit limit requested amount:	R	(should equal estimated value of two months' purchases)

17. Trade references are as follows: (at least three)

Supplier name	Contact name	Contact tel. no.	Credit limit amount	Payment terms (e.g. monthly statement + 30 days)

18. Have you had any supplies from other aggregate suppliers before ? ☐ Yes ☐ No

If 'Yes' than complete the following:	Supplier name 1:		Account no.:	
	Supplier name 2:		Account no.:	

19. Details of fixed property

In what name is the property registered?	Year Purchased	Current Market Value	Bond Holder	Bond Value
1.				
2.				
3.				

20. Details of moveable property

Details	Market Value	Fully Paid?	

Initial

21. Details of leased/rented property:

Name and address of landlord: _____

Monthly rental R _____ Period of lease: _____

PLEASE TICK CORRECT ANSWER

Has company/CC issued/signed any guarantees in favour of other creditors? ☐ Yes ☐ No

Have directors/members issued/signed any guarantees in favour of other creditors? ☐ Yes ☐ No

Have principals ever been directors/members of a business that ceased trading? ☐ Yes ☐ No

Have your debts been ceded? ☐ Yes ☐ No To whom: _____ Date ceded: _____

Are you latest financial statements available for inspection? ☐ Yes ☐ No

22. Does your annual turn-over or asset value exceed R1 million? ☐ Yes ☐ No

The customer representative hereby certifies that the above information is correct and that he/she is authorised to sign this application on behalf of the customer.

Signed at_____on this_____day of _____20_____

by customer representative:

Name: _____

Capacity: _____

Signature: _____