

Attention: THE FINANCIAL MANAGER

RE: Application to open a Customer account

	TP:
	ndly request your co-operation for the proper completion of the attached application form in order for us to register you as er and for the possible approval of a buyer's credit facility.
Herew	vith a checklist of the documentation required:
	Completed and signed Schedules I, II and III attached hereto
	A copy of the business' certificate of registration/incorporation/letter of authority, including a list of all active members/partners/directors/trustees/owners of the business
	Copies of identity documents of all members/partners/directors/trustees/owners of the business
	If the business forms part of a group of companies, please attach an outlay of the group structure
	Proof of physical address of the business (such as a municipal account or lease agreement)
	A copy of the business' VAT registration certificate
	A copy of the business' cancelled cheque or certified bank letter, confirming the business' bank account
	a) the business' latest audited financials and/or management statements, supplied directly to the credit committee of Teraka, or supplied to Credit Guarantee (contact details available on request)
	AND/OR, on demand by Teraka:
	b) the Suretyship (Schedule IV to be supplied by Teraka), to be completed and signed by the individual/s providing surety on behalf of the business. Each page must then be initialled. We request that every individual providing surety make their personal balance sheet available. This information will be treated as highly confidential.
Sched each p	dule I and II must be initialled and signed by the authorised signatory, as well as two witnesses, at the spaces indicated on page.
	al amendments to the wording of any of the abovementioned documents must be initialled by the authorised signatory and vo witnesses, as well as an authorised representative of Teraka in order for such amendments to take legal effect.
	ish to highlight that, notwithstanding receipt by us of the duly signed and completed documents listed above, we have no tion to serve or grant a credit limit to your company.
Please addre	e fax the documentation to 086 619 6985 or email to <u>info@teraka.co.za</u> and post the originals to the below mentioned postal ss.
Any fu	urther queries will gladly be answered.
Kind r	regards,

The Financial Manager



SCHEDULE I APPLICATION TO OPEN A CUSTOMER ACCOUNT

1.	Registered name of ap	oplicant (must be a ju	uristic person) (hereinafter re	eferred to as "the Customer"):			
2.	Trading name:						
3.	Who represents the applicant in making this application? (valid resolution, granting authority, to be attached):						
	Full Name/s Capacity						
4.	Chosen domicilium citandi et executandi (must be a street address):						
5.	Postal address to which	:h invoices/statemen	its/correspondence should b	e mailed:			
6.	Physical address (proof of address to be attached):						
7.	E-mail address:				· · · · · · · · · · · · · · · · · · ·		
8.				Business telefax number:			
9.							
10.							
11.			r which the Customer will op		 		
11.		-					
	•		Close Corporation: Priv	• •			
12.	Company/Close Corpo		tion number (copy of regist	tration certificate or letters of authority to	be attached):		
13.	Date incorporated:						
14.	Please list all the Dire	ectors/ /Members of	the Close Corporation /Part	tners of the Partnership/Trustees of the Trus	st (copies of IDs of a		
	individuals to be atta		·	·			
	Full Names:						
	ID Number:						
	Residential Address:						
	Home / Cell No:						
	% Share / Interest:						
	Full Names:						
	ID Number:						
	Residential Address:						
	Home / Cell No:						
	% Share / Interest:						
	Full Names:						
	ID Number:						
	Residential Address: Home / Cell No:						
	% Share / Interest:						
15.	Banking details:						
10.	· ·						
					 		
	c. Account number (copy of cancelled cheque to be attached):						
	d. Date account was o	d. Date account was opened:					
	e. If less than 2 years, previous Bankers:						
	f. Any "refer to drawer"	cheques on record:	·				
				Initial here			



17. Promises (lick appropriate): Leased: ☐ Owned: ☐ 18. If leased, please supply landord's details:	16.	VAT Number (copy of VAT certificate to be attached):			
Name:	17.	Premises (tick appropriate): Leased: ☐ Owned: ☐			
Name:	18.	If leased, please supply landlord's details:			
Name:			Telephone Num	ber:	
Name: Telephone Number:	19		_ '		
20. Date of latest audited financial statements: (copy to be attached) 21. Have any Directors/Partners/ Members/Trustees of the Customer or beneficiaties of the trust where the Customer is a trust, or beneficialistic shareholders where the Customer is a company, been insolvent or associated with any business failure. 22. If "Yes" list all windings up, liquidations, or sequestations involving the business/es (to be identified) and/or the individuals concerned, and details of the circumstances of the insolvency/les or failures: 23. Trade references (minimum four accounts, i.e. current suppliers): Name of Company:	10.		Telephone Num	her:	
21. Have any Directors/Partners/ Members/Trustees of the Customer or beneficiaries of the trust where the Customer is a trust, or beneficial shareholders where the Customer is a company, been insolvent or associated with any business failure. Yes No	20				
shareholders where the Customer is a company, been insolvent or associated with any business failure. Yes		,			
22. If "Yes" list all windings up, liquidations, or sequestrations involving the business/es (to be identified) and/or the individuals concerned, and details of the circumstances of the insolvency/les or failures: Name of Company:	21.				tomer is a trust, or beneficial
23. Trade references (minimum four accounts, i.e. current suppliers): Name of Company:		Yes No No			
Name of Company: Phone Number (landline): Credit Limit: Account Number: Credit Granted Since (year): Name of Company: Phone Number (landline): Credit Limit: Account Number: Credit Granted Since (year): Name of Company: Phone Number (landline): Credit Granted Since (year): Name of Company: Phone Number (landline): Credit Limit: Account Number: Credit Granted Since (year): Name of Company: Phone Number (landline): Credit Limit: Account Number: Credit Granted Since (year): Name of Company: Phone Number (landline): Credit Limit: Account Number: Credit Granted Since (year): 24. Account contact person: 25. The Customer's anticipated monthly purchases would range between (lowest) R and (highest) R 26. Total purchase credit limit requested: R 27. Monthly cut-off date for receipt of invoices to ensure payment within payment terms: THUS DATED AND SIGNED ON THIS DAY OF IN THE YEAR CUSTOMER: WITNESSES:	22.		he business/es (to be i	dentified) and/or th	e individuals concerned, and
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CUSTOMER: WITNESSES: Name: 1	27.	Monthly cut-off date for receipt of invoices to ensure payment within	payment terms:		
Name: 1	THU	IS DATED AND SIGNED ON THIS DAY OF _			_ IN THE YEAR
	cus	STOMER:	WITNESSES:		
Signature: 2	Nam	ne:	1		
Signature:					
	Sign	who warrants that he/sho is duly sutherized	2		



$\frac{\text{SCHEDULE II}}{\text{CONFIRMATION, ACKNOWLEDGEMENT, WARRANTY, CONSENT AND AGREEMENT}}$

ı, tr	ne un	aersignea			
and	d duly	authorised, herein representin	g		("the Customer")
(Re	gistr	ation No:)
her	eby:				
 acknowledge that the information provided in this to open an account for the Customer and that contractual relationship/s with, or credit allowed by 			mer and that each	item of such information is a ma	
2.		nfirm that every item of informatic rect and complete;	ation given is mater	rial to the aforesaid purpose and	warrant that all answers are true,
3.		reby consent thereto that, and a times:-	authorise Teraka Pr	oprietary Limited and its designate	ed agents and representatives to, at
	a.	Surety of the Customer as a information from any credit po	and when deemed ovider (or potential	necessary by Teraka, including co	ks, etc.) on the Customer and any ontacting, requesting and obtaining t bureau relevant to an assessment worthiness of the Customer;
	b.	creditworthiness of the Custo	mer to any register		indebtedness, whereabouts, and rovider (or potential credit provider) Limited;
	C.			edit Guarantee or any similar debt es that such company may deman	insurance company and submit the d.
4.	teri	agree that all contracts, transactions or agreements entered into between the Customer and Teraka will be subject to Teraka' terms and conditions applicable on the date of such contract, transaction or agreement (unless specifically agreed otherwise in writing) a copy of which is available upon request from Teraka' offices; and			
5.	cor	nfirm that I am duly authorised t	o sign this application	on for credit facilities on behalf of t	ne Customer.
Sig	ned a	at	on this day	of the month	in the year
					
Na	me			Capacity/Designation	
Cia	natu				
Sig	natui	е			
Wit	ness	1			
_					
Wit	ness	2			



SCHEDULE III RESOLUTION

(* Delete parts not applicable and confirm with signature)

3.
 4.

٠.				("the Company")
(Re	gistration Number:)
Hele	d at	on this day	of	in the year
Pre	sent:			
	Name:	Identity Number:		Capacity:
1.				
2.				
3.				
It is	hereby resolved that any of			
	Name:	Identity Number:		Capacity:
1.				
2.				
d. e. f.	do all things necessary and sign a and to sign and/or despatch all do aforesaid agreements and docum documents to which it is a party; sign any agreement, contract, app. TERAKA (PTY) LTD. Such business shall, without prejugoods, and the provision of securit that may exist or may arise from the In relation to such security or sure of the Companies Act, 1973 (or such a such as a contract of the Companies Act, 1973 (or such a contract of the undersigned, in our capacities)	comments and notices to be signed an ents and to perform whatever act migolication, suretyship or documents regulation to the generality thereof, include ty or a suretyship for any third party o time to time. Letyship, the signatories warrant that in uch corresponding legislation as replated as *directors/members/trustees of the general to the signatories warrant.	olutions cond/or despa ght be requirarding any e any appliar associated insofar as naces it) have	entained herein, on behalf of the Company atched by it under or in connection with the uired under the aforesaid agreements and business whatsoever with or in relation to cation for credit, the purchase and sale of ed company for any obligations or liabilities may be necessary, the provisions of S.226
We, is a spe		nging the person/s authorised by the		esolution of the Company, is the true and
We, is a spe gen	cimen signature/s hereunder, belo uine signature/s of the said individu	nging the person/s authorised by the	e above re	
We, is a spe gen	cimen signature/s hereunder, belo uine signature/s of the said individu me:	nging the person/s authorised by the	e above re	solution of the Company, is the true and
We, is a spe gen	cimen signature/s hereunder, belo uine signature/s of the said individu me:	nging the person/s authorised by the lal/s.	e above re	solution of the Company, is the true and