



Application for (Pty) Ltd or (Pty) Ltd Amendment

Tell: 012 320 4550, Fax: 086 613 4840 Email: info@nablie.co.za.

Account holder: Nablie Accountants (Pty) Ltd

Bank : FNB

Branch : Pretoria's Street

Account No. : 62089618189

Branch Code : 250345

REF No. : Name or cell of contact person

Application Fee: R800.00

Applicants contact details:

Tell: -----, Cell: -----, Email: -----

Contact Person: Name: -----, Surname: -----

Postal Address (For Business Purposes):-----

-----Postal Code:-----

Physical Address (For business purposes):-----

-----Area Code:-----

Financial year End: -----

Application information:

1. Number of Members: -----



2. Member Details:

a. Surname:-----

First name: -----, Middle name: -----

ID No. -----

Gender: -----

Postal Address:-----

-----Postal Code:-----

Physical Address:-----

-----Area Code:-----

Tell: -----, Cell: -----, Email: -----

b. Surname:-----

First name: -----, Middle name: -----

ID No. -----

Gender: -----

Postal Address:-----

-----Postal Code:-----

Physical Address:-----

-----Area Code:-----

Tell: -----, Cell: -----, Email: -----



c. Surname:-----

First name: -----, Middle name: -----

ID No. -----

Gender: -----

Postal Address:-----

-----Postal Code:-----

Physical Address:-----

-----Area Code:-----

Tell: -----, Cell: -----, Email: -----

d. Surname:-----

First name: -----, Middle name: -----

ID No. -----

Gender: -----

Postal Address:-----

-----Postal Code:-----

Physical Address:-----

-----Area Code:-----

Tell: -----, Cell: -----, Email: -----

e. Surname:-----



First name: -----, Middle name: -----

ID No. -----

Gender: -----

Postal Address:-----

-----Postal Code:-----

Physical Address:-----

-----Area Code:-----

Tell: -----, Cell: -----, Email: -----

f. Surname:-----

First name: -----, Middle name: -----

ID No. -----

Gender: -----

Postal Address:-----

-----Postal Code:-----

Physical Address:-----

-----Area Code:-----

Tell: -----, Cell: -----, Email: -----

g. Surname:-----



First name: -----, Middle name: -----

ID No. -----

Gender: -----

Postal Address:-----

-----Postal Code:-----

Physical Address:-----

-----Area Code:-----

Tell: -----, Cell: -----, Email: -----

h. Surname:-----

First name: -----, Middle name: -----

ID No. -----

Gender: -----

Postal Address:-----

-----Postal Code:-----

Physical Address:-----

-----Area Code:-----

Tell: -----, Cell: -----, Email: -----

i. Surname:-----



First name: -----, Middle name: -----

ID No. -----

Gender: -----

Postal Address:-----

-----Postal Code:-----

Physical Address:-----

-----Area Code:-----

Tell: -----, Cell: -----, Email: -----

j. Surname:-----

First name: -----, Middle name: -----

ID No. -----

Gender: -----

Postal Address:-----

-----Postal Code:-----

Physical Address:-----

-----Area Code:-----

Tell: -----, Cell: -----, Email: -----



Name Reservation:

Come up with a minimum of 4 (Four) possible names. In this case your Pty will take at least (5 Five) Working days to be registered.

Please fill in the form below:

NAME RESERVATION FORM

Name must be filled in order of preference

1. -----
2. -----
3. -----
4. -----

Are any of the names above related to an existing business? -----

If yes, Supply the full name and Registration number of the already existing business: ----



POWERS OF ATTORNEY

I/We the undersigned hereby appoint "Sefu Sekgala" to register on my/our behalf a Company with any approved name.

Sefu Sekgala to sign as follows:-----

To sign on my/our behalf registration forms.

To clearly describe our principle business.

To determine our percentage share of the PTY

To fill in all the information on the forms.

To ensure that articles/memorandum of incorporation is in order and document is Notarized.

To deliver to the register of companies all documents and forms.

To make sure that amendment, additions or alterations to documents and forms are Up to the registrar's requirements.

To do anything to necessary,

Signed at: -----this----- day of -----
-----2013.

MEMBER NAME AND SURNAME (IN FULL)

SIGNATURE

1. -----
2. -----
3. -----
4. -----
5. -----
6. -----
7. -----
8. -----
9. -----
10. -----



The above process can be done in the comfort of your own office; you don't have to stand up at all.

All you need to do is fill in the form fax it to: 086 613 4840 and deposit R800.00 in the Following account:

Account holder: Nablie Accountants (Pty) Ltd
Bank : FNB
Branch : Pretoria's Street
Account No. : 62089618189
Branch Code : 250345
REF No. : Name or cell of contact person

Your certificates will be posted to you.

For any problem experienced, please call Sefu on 0720904906

**POST POWER OF ATTORNEY and CERIFIED
COPY OF ID TO:**

P O BOX 4460

PRETORIA

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