

NOTES

The attached affidavit must be completed by **Black Persons ONLY**.

Black according to the **Broad-Based Black Economic Empowerment Act** includes only:

- **Africans**
- **Coloureds**
- **Indians**
- **Chinese**

Who are **SOUTH AFRICAN CITIZENS ONLY**

AND

Who were **BORN IN SOUTH AFRICA**

OR if born outside the borders of South Africa:

Whose **SOUTH AFRICAN CITIZENSHIP WAS GRANTED before 27 April 1994**

OR

Whose **Mother or Father or both parents were South African Citizens** on the date of the person's birth (by descent)

ALL OTHER PERSONS, REGARDLESS OF COLOUR, RACE OR ETHNICITY ARE EXCLUDED and MUST NOT COMPLETE this affidavit.

The Sworn Affidavits of **ALL** the members / shareholders / owners must be submitted with a **certified copy** of each Black person's ID document

If naturalised the naturalisation certificate or a document from the Department of Home Affairs to indicate when the citizenship was granted

If foreign born, a Birth Certificate or other documents to prove that one or both parents were South African citizens on the date of birth.

Please note:

A false declaration will lead to immediate termination of the verification process.

SWORN AFFIDAVIT

Enterprise Name	
Registration Number	
Physical Address	

I, the undersigned,

Full Names & Surname	
ID Number	

Hereby declare under oath as follows:

1. I am an adult male/female (delete whichever is not applicable)
2. I am a shareholder / member / owner of the Enterprise above (delete whichever is not applicable)
3. I am a Black Person (African, Coloured, Indian or Chinese **South African Citizen** by birth, descent or naturalisation prior to 27 April 1994)
4. My ownership is fully realised and I share in all profits declared and have full voting rights as per my ownership percentage in the above Enterprise.
5. My ownership percentage is:

_____, ____	%
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6. A certified copy of my Identity Document, and if foreign born only, a copy of my naturalisation - or birth certificate are attached hereto.

I know and understand the contents of this affidavit and I have no objection to take the prescribed oath and consider the oath binding on my conscience.

Your Signature: _____

Date: _____

Commissioner of Oaths
(Signature and Stamp)