



# DEPT TRADE AND INDUSTRY REPUBLIC OF SOUTH AFRICA

## SUPPLIER MAINTENANCE:

BAS ☐ PMIS ☐ LOGIS ☐ WCS ☐ CONTRACTOR  
CONSULTANT

### Head Office Only

Captured By: \_\_\_\_\_  
Date Captured: \_\_\_\_\_  
Authorised By: \_\_\_\_\_  
Date Authorised: \_\_\_\_\_  
Supplier code: \_\_\_\_\_

Enquiries. : \_\_\_\_\_  
Tel. No.: \_\_\_\_\_

OFFICE: .....

### The Director General : DEPT TRADE AND INDUSTRY

I/We hereby request and authorise you to pay any amounts, which may accrue to me/us to the credit of my/our account with the mentioned bank.

I/we understand that the credit transfers hereby authorised will be processed by computer through a system known as "ACB - Electronic Fund Transfer Service", and I/we understand that not additional advice of payment will be provided by my/our bank, but that the details of each payment will be printed on my/our bank statement or any accompanying voucher. (This does not apply where it is not customary for banks to furnish bank statements).

I/we understand that the Department will supply a payment advice in the normal way, and that it will indicate the date on which the funds will be made available on my/our account.

This authority may be cancelled by me/us by giving thirty days notice by prepaid registered post. Please ensure information is validate as per required bank screens .

I/We understand that bank details provided should be exactly as per the records held by the bank.

I/We understand that the Department will not assume responsibility for any delayed payments, as a result of incorrect information supplied.

### Company / Personal Details

Registered Name

Trading Name

Tax Number

VAT Number

Title:

Initials:

First Name:

Surname:

### Address Detail

Payment Address

( Compulsory if Supplier )

Postal Code

### New Detail

☐ New Supplier information ☐ Update Supplier information

Supplier Type:

☐

Individual

☐

Company

☐

CC

☐

Department

☐

Trust

☐

Other ( Specify )

☐

Partnership

Department Number

Supplier Account Details	
(Please note that this account MUST be in the name of the supplier. No 3rd party payments allowed).	
Account Name	
Account Number	
Branch Name	
Branch Number	
Account Type	<div style="display: flex; align-items: flex-start;"> <div style="width: 20px; height: 25px; border: 1px solid black; margin-right: 5px;"></div> <div> Cheque Account  Savings Account  Transmission Account  Bond Account  Other (Please Specify) </div> </div>
ID Number	
Passport Number	
Company Registration Number	
*CC Registration	
*Please include CC/CK where applicable	
Practise Number	

**Bank stamp**

It is hereby confirmed that this details have been verified against the following screens

**ABSA**-CIF screen

**FNB**-Hogans system on the CIS4

**STD** Bank-Look-up-screen

**Nedbank**- Banking Platform under the Client Details Tab

Contact Details		
Business	<input type="text"/>	<input type="text"/>
	Area Code	Telephone Number
Home	<input type="text"/>	<input type="text"/>
	Area Code	Telephone Number
Fax	<input type="text"/>	<input type="text"/>
	Area Code	Fax Number
Cell	<input type="text"/>	<input type="text"/>
	Cell Code	Cell Number
Email Address	<input type="text"/>	
Contact Person:	<input type="text"/>	

		<b>PLEASE RETURN TO THE RELEVANT REGIONAL OFFICE THAT SUPPLIED THE FORM OR THE FOLLOWING ADDRESS:</b>
Supplier Signature	Regional Office Sender	
Print Name	Print Name	
	Rank	
<div style="display: flex; justify-content: space-between;"> <span> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> / <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> / <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> </span> <span> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> / <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> / <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> </span> </div>		

**NB: All relevant fields must be completed**