

SUPPLIER INFORMATION CHANGE FORM

SUPPLIER'S DETAILS			
Name of Company			
Name of Previous			
Company (if applicable)			
Physical Address			
•		City:	Postal Code:
Postal Address			
		City:	Postal Code:
Contact Person			
Telephone Number			
Fax Number			
e- mail address			
Information to changed	be	Tick the applicable box	Documentation required
Banking details		DOX	An original letter from the bank with a bank
Danking details			stamp or cancelled cheque
Company name			Certificate of name change (DTI) and existing company's SARS certificate proving that there are no outstanding tax issues.
Ownership details			Company registration document/share certificate
Contact details Address & telephone	i.e.		Request to be on a company letterhead
BBBEE status			Valid certificate from an accredited rating
			agency
INFORMATION TO BE CHANGED EFFECTIVE DATE OF THE CHANGE			
SIGNATURE		NAME OF SIG	NATORY CAPACITY

DATE OF SIGNATURE

Submit to: Zamantungwa Mhlongo Supply Chain Management 79 Harding street Newcastle 2940 P.O.Box 729 Newcastle 2940 Tel 034 328 5000 Fax 034 322 33 88

Email:

Zamantungwa.Mhlongo@uthukelawater.co.za