

Sasol Supplier Application Form - International Entity

| Return address for completed applications: | | | | | |
|---|--------------------------|-----------------|-------------------|--|--|
| Contact Centre Tel: +27 17 610 4777 E-mail: supplieradministrator@sasol.com | | | | | |
| Sasol Supplier | Application Forr | n: Internationa | I–All sections to | be completed in this document are compulsory | |
| 1. Information | 1 | | | | |
| Registered Nar Entity | me of Legal | | | | |
| Trading Name (If Applicable) | | | | | |
| Registration N Entity | umber of Legal | | | | |
| Previous Regis (If Applicable) | | | | | |
| How many per employees em Legal Entity | manent ployed by your | | | | |
| Has the Legal | Entity previously | performed any | work for anoth | er Sasol Business Unit | |
| Yes | | No | | | |
| Name of Sasol | Business Unit | | | | |
| Contact Person Business Unit | n At Sasol | | | | |
| Provide details of the work pre performed for identified Saso Unit. | eviously the above | | | | |
| Does any of the owners or directors have relatives employed by Sasol | | | | | |
| Yes | | No | | | |
| Name of Sasol | employee | | | | |
| Please disclos the relationshi identified Saso | | | | | |

| 2. Type of Legal Entity (Please mark applicable entity hereunder) | | | | | | | |
|---|---|------|-----------------------------|-------------|--------------|---|-------------------------|
| Sole Proprietor | Partners | ship | Public / Private Company | Trust | Non I Com | | Other(please stipulate) |
| | | | | | | | |
| 3. Address | | | | | | | |
| 3.1 Registered Ad | 3.1 Registered Address – Physical Address | | | | | | |
| Street Name and | Number | | | | | | |
| City | | | | | | | |
| Country | | | | | | | |
| Postal Code | | | _ | | | | |
| 3.2 Registered Ac | 3.2 Registered Address – Postal Address | | | | | | |
| P.O. Box | | | | Private Bag | | X | |
| City | | | | Postal Code | | | |
| 4. Contact Infor | 4. Contact Information | | | | | | |
| Name of Managin Director / Membe | | | | | | | |
| Telephone Numb | er | _ | | Fax Number | | _ | |
| Email Address | | | | | | | |
| Name of Marketin Manager / Branch Manager | | | | | | | |
| Telephone Numb | er | | | Fax Number | | | |

Fax Number

Fax Number

Email Address

Name of Sales Person

Telephone Number

Name of Accounting

Telephone Number

Email Address

Email Address

Officer

| 5. Specify the exact services / products to be rendered to Sasol | | | | | |
|--|--|--|--|--|--|
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| 6. Trade References of prev | vious work completed as per above scope | | | | |
| Customer / Company Name | | | | | |
| Contact Person | | | | | |
| Type of Product/Service | | | | | |
| Month/Year | | | | | |
| Customer / Company Name | | | | | |
| Contact Person | | | | | |
| Type of Product/Service | | | | | |
| Month/Year | | | | | |
| | | | | | |
| 7. Requirements for Banking Details | | | | | |
| | udulent activities Sasol will only effect electronic transfer payments directly into I entity subject to satisfactory proof of bank details. | | | | |
| In order to register or amend banking details on the Sasol system, the provision of the following information is compulsory: | | | | | |
| For foreign bank accounts | | | | | |
| A signed letter from the entity and / or Bank confirming the following information: Account Holder Name Account number | | | | | |

Bank name Branch name

IBAN number Swift Code

Bank key / Branch code

♦ Country in which Bank account has been opened

| Documents Required | Sole proprietor | Partnerships | Public/ Private Company | Business trust | Non profit Organisation (NPO) | Other (please stipulate) |
|--|---|---|---|---|--|--|
| Company Registration (Proof of Ownership) | N/A Industry / Commercial Licence and permit | Duly Signed Partnership agreement and Industry / Commercial Licence and permit | Proof of registration and Industry / Commercial Licence and permit | Deed of Trust Agreement and Industry / Commercial Licence and permit | Proof of registration and Industry / Commercial Licence and permit | Proof of registration and Industry / Commercial Licence and permit |
| Supply proof of address of Registered offices | Official proof of address | Official proof of address |
| Proof of banking details | Banking details on Supplier Letterhead signed by Owner or Director and / or letter from the bank to confirm banking details | Banking details on Supplier Letterhead signed by Owner or Director and / or letter from the bank to confirm banking details | Banking details on Supplier Letterhead signed by Owner or Director and / or letter from the bank to confirm banking details | Banking details on Supplier Letterhead signed by Owner or Director and / or letter from the bank to confirm banking details | Banking details on Supplier Letterhead signed by Owner or Director and / or letter from the bank to confirm banking details | Banking details on Supplier Letterhead signed by Owner or Director and / or letter from the bank to confirm banking details |
| Certified Copy of Passport | Copy of Identity Documents of Owner and or directors | Copy of Identity Documents of Owner and or directors | Copy of Identity Documents of Owner and or directors | Copy of Identity Documents of Owner and or directors | Copy of Identity Documents of Owner and or directors | Copy of Identity Documents of Owner and or directors |
| Company Profile | Document describing core business and capabilities of entity | Document describing core business and capabilities of entity | Document describing core business and capabilities of entity | Document describing core business and capabilities of entity | Document describing core business and capabilities of entity | Document describing core business and capabilities of entity |

| I, the undersigned (| print name) | | |
|--------------------------------|--|--|---------------------|
| Identity number: | | | |
| In my capacity as (c | lesignation) | | of |
| and that any false o Sasol. | r incomplete information pool of Ethics code (available or | (hereinafter the company) hereby warrant ration on its behalf and that the above informatio rovided could lead to the immediate rejection of the internet at www.sasol.com). I fully understand | this application by |
| On the | day of | year | |
| At | | | |
| Signature: | | | |