

33

PARTICULARS OF PERSON(S) IN CONTROL OF, OR RESPONSIBLE FOR THE MANAGEMENT OF THE COMPANY, CLOSE CORPORATION, TRUST OR PARTNERS IN CASE OF A PARTNERSHIP

34

Full names	Surname	Identity number	Capacity

F. OTHER DETAILS

1

Are you a member of an accredited association? (Indicate with an X) YES NO If yes, submit the following details:

2

Name of accredited association

3

Registration number of accredited association

4

Membership number

^{4.1} Date joined

^{4.2} Expiry date

5

Is a copy of the applicable Government Gazette attached indicating exemptions? YES NO If no, state reasons why

6

Reasons

7

Was your application handed in not more than 180 days and at least 90 days before the termination of the existing registration certificate? YES NO If no, state reasons why

8

Reasons

9

Was your application handed in after the due date, but before the termination of the existing registration certificate? YES NO If yes, state reasons why

10

Reasons

11

Was your application handed in after the termination of the existing registration certificate? YES NO If yes, state reasons why

12

Reasons

13	Are there currently any application(s) for registration pending in terms of the Act ? <small>(Indicate with an X)</small>			
	YES	NO	If yes, submit the following details:	
	<input type="checkbox"/>	<input type="checkbox"/>	Police station	Reference number
			Police station	Reference number
14	Was any application in terms of the Act refused in the past five (5) years? <small>(Indicate with an X)</small>			
	YES	NO	If yes, submit the following details:	
14.1			Business name	^{14.2} Business address
14.3			Police station	^{14.4} Reference number
15	Have you ever in the preceding five(5) years in the RSA or elsewhere been sentenced to imprisonment without the option of a fine in respect of any cases of fraud, theft or corrupt activities as referred to in the Prevention and Combatting of Corrupt Activities Act, 2004 (Act No. 12 of 2004), or any contravention of the Corruption Act, 1992 (Act No. 94 of 1992), or the commission of any other offence of which dishonesty is an element ? <small>(Indicate with an X)</small>			
	Yes	No	If yes, submit the following details	
15.1			Police station	^{15.2} CAS/Case number
15.3			Charge	
15.4			Outcome	
15.5			Police station	^{15.6} CAS/Case number
15.7			Charge	
15.8			Outcome	
16	Have you ever in the preceding five (5) years been convicted of an offence in terms of this Act irrespective of the sentence imposed? <small>(Indicate with an X)</small>			
	Yes	No	If yes, submit the following details:	
16.1			Police station	^{16.2} CAS/Case number
16.3			Offence	
16.4			Police station	^{10.5} CAS/Case number
20.6			Offence	
17	Have you been declared an un-rehabilitated insolvent in the past five (5) years? <small>(Indicate with an X)</small>			
	Yes	No	If yes, submit the following details:	
17.1			Date of sequestration or liquidation	
17.2			Details of sequestration or liquidation	
18	Have you by virtue of any other law been disqualified from carrying on a business in the past five (5) years? <small>(Indicate with an X)</small>			
	Yes	No	If yes, submit the following details:	
18.1			Details of such law and disqualification	
19	Provide any other information which may have an influence on the consideration of this renewal application			

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Additional conditions recommended (if any)	
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Name of Police Officer/ DSO in block letters

5

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Rank of Police Officer/ DSO in block letters

7

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Signature of Police Officer/ DSO

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Date						-												
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Place																			
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Persal number of Police Officer/ DSO

