

Please complete the attached LOGIS Credit Order Instruction Form.

KINDLY SUBMIT THE COMPLETE FORM WITH AN ORIGINAL TAX CLEARANCE CERTIFICATE AND CERTIFIED ID COPIES OF ALL SHAREHOLDERS TO:

Provincial Treasury
DSCM
Private Bag X5054
KIMBERLEY
8300

or
hand deliver to:

Metlife Towers (Post Office Building)
Corner of Knight and Stead Street
5th Floor, Room 520
KIMBERLEY



REF NO: _____

LSA-C1

Northern Cape Provincial Treasury



SUB-DIRECTORATE: LOGIS SUPPORT AND ADMINISTRATION

CREDIT ORDER INSTRUCTION FORM

PART 1. DEPARTMENTAL INFORMATION

Department: Northern Cape Provincial Treasury

Department Signature: _____

Name in print: _____

Tel: No: _____ **Date:** _____

PART 2. ENTITY DETAILS (please print clearly)

Company's full trading name (must be same as account name):
Eg. ABC Business

Year	Number				Type
Business Registration Number or SMME Number					
VAT Number:					
Identity/Passport/Persal Number					

Business Address: (Physical Address) **Number & Street:** _____

Suburb: _____

City: _____

Code: _____

Payment/Postal Address: **P.O Box/Str.** _____

Suburb: _____

City: _____

Code: _____

Telephone & Area Code: () _____

Fax Number & Area Code: () _____

Cellular phone Number: _____

E-Mail Address: _____

Beneficiary Details:

1. No. Type: _____

Number: _____

Name: _____

2. No. Type: _____

Number: _____

Name: _____

Cession documents attached (if applicable) YES NO

