

Address 170 Main Road, Somerset West, 7130

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Email sw@pty-online.co.za

Docex 26, Somerset West

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Bank Account Shelf Company Warehouse Cape Town

Bank (Pty) Ltd

Branch First National Bank
Account Number Somerset West
Branch Code 62355309826

200-512

VAT Reg. No. 4310218948 Reg. No. 2003/001757/07

Directors: Christian Gouws B.A. B.Proc.

# **Non Profit Company Registration**

- 1. Please complete parts A, B, C and Power of Attorney.
- 2. **A Non Profit Company requires at least three directors/members**. Please make a copy of Part C and Power of Attorney for each director/member.
- 3. The registration fees are:

CIPC Fee R 675.00 Our Fee R 525.00

TOTAL R1,200.00

This amount must be deposited into the following bank account:

Shelf Company Warehouse Cape Town (Pty) Ltd First National Bank Somerset West Account number. 62355309826

Branch Code. 200-512

As we require the original powers of attorney, please post the documents to the above postal address, or deliver the documents to our office.

(PLEASE NOTE THAT R70 IS NOW PAID TO THE REGISTRAR FOR EACH SET OF NAMES LODGED REGARDLESS OF WHETHER THE NAMES ARE APPROVED. SO, IF NONE OF THE NAMES YOU PROVIDED ARE APPROVED, WE WILL HAVE TO BILL YOU FOR A FURTHER R70.00 WHEN THE NEW SET OF NAMES ARE LODGED)

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## **NON PROFIT COMPANY REGISTRATION\***

PART A: INVOICING INFORMATION							
TAX	INVOICE TO BE MADE OUT TO						
YOU	R NAME & SURNAME						
POS	TAL ADDRESS:						
	TEL	FAX					
CE	ELL NO	EMAIL					
WE WILL CONFIRM RECEIPT OF YOUR APPLICATION AND WILL GIVE YOU A REFERENCE NUMBER. PLEASE INDICATE BY TICKING THE BOX BELOW, HOW YOU WANT US TO NOTIFY YOU. THIS REFERENCE NUMBER IS TO BE USED WHENEVER YOU MAKE ENQUIRIES.  EMAIL TO FOLLOWING EMAIL ADDRESS							
IF YOU POSTED YOUR INSTRUCTION TO US, AND DO NOT RECEIVE CONFIRMATION WITHIN A REASONABLE PERIOD, PLEASE MAKE CONTACT WITH US, AS WE THEN DID NOT RECEIVE YOUR APPLICATION.							
PLEASE INDICATE WHETHER WE SHOULD POST THE COMPANY DOCUMENTS AFTER REGISTRATION OR WHETHER YOU WILL COLLECT THE DOCUMENTS FROM OUR OFFICE. PLEASE TICK APPROPRIATE BOX.							
	PRIORITY MAIL (REMEMBER TO ADD R125.	00)					
	WILL COLLECT						

#### PART B: PARTICULARS OF COMPANY:

Name of Company						
3 Alternative names in case the above name is rejected						
1						
2						
3						
Do you have another registered company/CC with a similar name? If so, please state name						
and registration number						
Main object of company						
Registered physical address of the company (MUST BE A STREET ADDRESS)						
and not a Post Box						
Street Code						
Postal Address of company						
Postal Code						
Financial YEAR-END						
Email address of company						
Telephone number of company						

WE NEED *ALL* THE INFORMATION TO BE ABLE TO PROCEED WITH THE REGISTRATION.

#### PART C: PARTICULARS OF DIRECTOR:

#### MAKE A COPY OF THIS PAGE FOR EACH DIRECTOR/MEMBER

#### A NON PROFIT COMPANY REQUIRES AT LEAST 3 DIRECTORS/MEMBERS

Surname												
Full forenames												
Any previous name												
Identity number: (13 DIGI	TS). If	not So	outh-Af	rican <sub>l</sub>	olease	provid	le date	e of bir	th.		<u> </u>	
Copy of Identity Document is required (THE APPLICATION FORMS CANNOT BE LODGED AT CIPRO WITHOUT COPIES OF EACH DIRECTOR/MEMBER'S IDENTITY DOCUMENT ATTACHED)												
Residential address												
Street code												
Business address												
Street code												
Postal Address												
Postal code												
Nationality												
Occupation												
Tel. No												
Cell. No												
Fax. No												
Email address												
How did you come to hea	r of us	?										

NB. ALL STREET AND POSTAL CODES MUST BE FURNISHED.

NB. WE NEED A COPY OF EACH DIRECTOR/MEMBER'S IDENTITY DOCUMENT.
THE COPY IS LODGED WITH THE APPLICATION FORMS AT CIPC.

### **POWER OF ATTORNEY FOR REGISTRATION OF COMPANY**

I, the	undersigne	ed .						
		(full forenan	nes and surname)					
being	desirous o	of forming a company to b	e registered under th	ne name of :				
		or any othe	r approved name					
do he	reby nomir	nate, constitute and appoi	nt :					
CHRISTIAN GOUWS and/or Destiny - Mae Jacoby with full power of substitution, to be my lawful agent in my name, place and stead :								
•	To apply for and obtain the registration of the Company under the Companies Act of the Republic of South Africa.							
•	To deliver to the Registrar of Companies, the CoR 14.1, CoR 15.1C, CoR 15.1D or CoR 15.1E and/or any other documents or form which might be required for the registration of the Company.							
•	To make such amendment, addition or alteration and to any such documents and forms which my said attorney or agent may deem fit or which may be required by CIPC and to initial or sign as may be required, each of such amendments, additions or alterations.							
•	To alter the name of the Company, if the proposed name is not available, in such manner as my said attorney or agent may think fit.							
■ To uplift all documents from CIPC after the registration of the Company.								
Signed at		on	20					
			(Sign	eature of director/member)				