**Directorate: Financial Administration,**

**Private Bag X250, PRETORIA, 0001, Tel No. (012) 319 6938 Fax: (012) 319 6703**

**Private Bag X5015, STELLENBOSCH, 7599, Tel No. (021) 809-1612, Fax (021) 887-0020**

E-mail: [MargaretN@daff.gov.za](mailto:MargaretN@daff.gov.za); SylviaW@daff.gov.za

**APPLICATION TO OPEN AN ACCOUNT FOR SERVICES RENDERED**

**Individual/company name responsible for the settlement of the account: (please note this name must be the one to whom the invoice will be issued) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Physical Address:**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Postal Address:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Code: \_\_\_\_\_\_\_\_\_\_\_\_**

Individual ID Number/Company Registration Number(1):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Person: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone: Code: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Fax: Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cellular Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-mail address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please indicate the service you are going to apply for:

|  |  |  |  |
| --- | --- | --- | --- |
| Export (phyto) | Bulk (phyto) | Export (other) | Bulk (other) |
| Import (phyto) | Analysis (phyto) | Import (other) | Analysis (other) |

* **In terms of section 80 of the Public Finance Management Act, 1999 (Act 1 of 1999), the Minister of Finance by notice in the Government Gazette determines an interest rate that must be charged on debt to the State. This interest rate is SUBJECT to change from time to time and is applicable on all outstanding invoices older than 30 (thirty) days. PLEASE NOTE THAT the reversal of interest is NOT NEGOTIABLE and that payment should be made within 30 (thirty) days from the date of the issue of an invoice to avoid interest being charged.**
* **An electronic fund transfer facility is available. Please contact Ms M J Nieuwenhuis at Pretoria (012) 319 – 6938 or Ms S B Heyns at Stellenbosch (021) 809- 1612 in this regard.**
* **Please quote the account number at all times when making a payment. If the total amount on an account is not settled and interest is levied, the payment will be allocated firstly to the outstanding interest and thereafter to the oldest invoices payable irrespective whether debtors insist on payments being allocated otherwise.**
* **Accounts of debtors where the debt is outstanding for longer than 60 days will be suspended (blocked) and referred to the State Attorney for collection.**
* **If the invoice is not collected personally by the debtor, the debtor must ensure that a copy of the invoice is received from the agent, as the Department is not responsible for supplying copies.**
* **Please note that the original export certificate regarding Wine-on-Line (WOL) inspections serves as an original invoice issued by the Department.**
* **Attention is drawn to the fact that the importer/exporter is liable for all related costs to the application. The Department is not bound by arrangements between the importer/exporter and their clearing agents.**

I/we (2) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (please print) understand and accept the contents of this application:

Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Position: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signed at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ on the

\_\_\_\_\_\_\_\_\_\_\_\_ of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

FOR OFFICIAL USE:

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_**

**ACCOUNT NUMBER SIGNED DATE**

**Note: (1) An account will not be opened if the id number/company registration number is not supplied.**

**Note: (2) The individual/company will at all time be liable for the account irrespective of who signed this declaration.**