



Address 323 Lynnwood Road, Menlo Park.
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Tel Tel. (086) 123 8899 (30 lines)
Fax 0866 789 406
Email info@pty-online.co.za
Account Enquiries admin@pty-online.co.za
Docex 181, Pretoria
Web <http://www.pty-online.co.za>
Bank Account Shelf Company Warehouse (Pty) Ltd
Bank First National Bank
Branch Clearwater Mall
Account Number 62100101360
Branch Code 251141
VAT Reg. No. 4780170371
Reg. No. 1997/05842/07

Directors: Christian Gouws B.A. B.Proc. & Adelle Uys

CK2A Registration

1. Please complete parts A, B and C.
2. The registration fee is either:

CHANGE OF REGISTERED ADDRESS AND/OR ACCOUNTING OFFICER

R57.00 if you either collect the document from our offices after registration or if we email the document to you; or

R110.45 if we send the document to you by priority mail after registration.

THE APPROPRIATE AMOUNT MUST BE DEPOSITED INTO THE FOLLOWING BANK ACCOUNT:

**Shelf Company Warehouse (Pty) Ltd
First National Bank
Clearwater Mall
Account number. 62100101360
Branch Code. 251141**

PLEASE REMEMBER TO FAX OF PAYMENT TO US AT 0866 789 406 WITH YOUR APPLICATION FORMS AS WE CAN ONLY PROCEED WITH PROCESSING OF THE DOCUMENTS AFTER WE RECEIVE CONFIRMATION OF PAYMENT.

PART A: INVOICING INFORMATION

TAX INVOICE TO BE MADE OUT TO _____

YOUR REF (IF APPLICABLE) _____

POSTAL ADDRESS: _____

DOCEX ADDRESS, IF APPLICABLE: _____

TEL _____ FAX _____

CELL 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.

<input type="checkbox"/>	SMS TO FOLLOWING CELL NO	_____
<input type="checkbox"/>	FAX TO FOLLOWING NO	_____
<input type="checkbox"/>	EMAIL TO FOLLOWING EMAIL ADDRESS	_____

IF YOU FAXED YOUR INSTRUCTION TO US, AND DO NOT RECEIVE CONFIRMATION WITHIN 24 HOURS, PLEASE MAKE CONTACT WITH US, AS WE THEN DID NOT RECEIVE YOUR APPLICATION.

PLEASE INDICATE HOW YOU WANT US TO DELIVER THE CERTIFICATE OF REGISTRATION (CK1) TO YOU AFTER REGISTRATION. PLEASE TICK APPROPRIATE BOX.

<input type="checkbox"/>	PRIORITY MAIL (REMEMBER TO ADD R53.45 TO COST - A TOTAL OF R110.45)	
<input type="checkbox"/>	EMAIL TO FOLLOWING EMAIL ADDRESS	_____
<input type="checkbox"/>	ORDINARY MAIL (NOT RECOMMENDED)	
<input type="checkbox"/>	WILL COLLECT	

PART B: PARTICULARS OF CLOSE CORPORATION:

Name of Close Corporation

Registration Number of CC

New registered address

New registered postal address

Name of New Accounting Officer

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

PART C SPECIAL POWER OF ATTORNEY FOR REGISTRATION OF CK2/CK2A

I/we, the undersigned

Full forenames and surname of members	Identity number If not SA citizen, date of birth											<i>Signature</i> on behalf of current/ new/ resigning member. (If under 21, signature of guardian and write guardian next to signature)	
1. _____													SIGNATURE HERE PLEASE
2. _____													SIGNATURE HERE PLEASE
3. _____													SIGNATURE HERE PLEASE
4. _____													SIGNATURE HERE PLEASE
5. _____													SIGNATURE HERE PLEASE
6. _____													SIGNATURE HERE PLEASE
7. _____													SIGNATURE HERE PLEASE
8. _____													SIGNATURE HERE PLEASE
9. _____													SIGNATURE HERE PLEASE
10. _____													SIGNATURE HERE PLEASE

being desirous of registering the amended founding statement of:

(your 1st choice for name of close corporation)

OR ANY OTHER APPROVED NAME

do hereby nominate, constitute and **appoint CHRISTIAN GOUWS/ADELLE VAN TONDER** with full power of substitution, to be my lawful agent in my name, place and stead:

To deliver to the Registrar of Companies the CK2/CK2A and any other documents or form which might be required for the registration of the founding statement and to sign the CK2/CK2A on my behalf.

Signed at _____ on 200 ____.

IMPORTANT:

1. Please note that all the information we request must be given fully. If we have to phone you for information requested on our forms but not given by you, or illegible handwriting, an additional R10.00 will be charged for each phone call. Due to the volume of applications we deal with, this will also lead to unnecessary delays.
2. Please also make sure that your handwriting is legible. We cannot be held responsible for any miss-spelling due to illegible handwriting.
3. Confirmation of payment must be faxed back to us with the application form. We are unable to proceed with the application before payment is received.

Fax//email the following documents to us:

1. Part A. Invoicing information.
2. Part B. Particulars of close corporation.
3. Part C. The power of attorney signed by each member.
4. Copy of CK1 or, if a CK2 has been registered, the last registered CK2.
5. Proof that payment (deposit slip or internet confirmation).

Please note that for the appointment of a new accounting officer, we require the original letter of appointment. You must therefore eitherpost or deliver the documents to us.

We can only start with the registration once we have all the documents stated above, as well as proof of payment.