

CAPE TOWN
Tel: 021 551 2066
Fax: 021 552 7792

JOHANNESBURG
Tel: 011 334 6263
Fax: 011 334 6947

www.capepreciousmetals.co.za
Reg. No. 2009/000145/07



PORT ELIZABETH
Tel: 041 365 1890
Fax: 041 365 1901

DURBAN
Tel: 031 303 5402
Fax: 031 303 5403

orders@capepreciousmetals.co.za
Vat No: 4350252799

APPLICATION FOR A CUSTOMER ACCOUNT (Ca-001)

Please attach the following documents with application:

Cape Precious Metals (Pty) Ltd (hereinafter referred to as "CPM") cannot begin the application process without a completed application form and the supporting documents. Please note all fields must be completed. Kindly ensure the original application is returned to CPM.

Identity document	YES	
Vat registration document	YES	NA
Company documents	YES	NA
2 nd hand license	YES	NA
Jewellers Permit	YES	NA
Deed of Suretyship	YES	

Customer Details

Customer Trading Name: _____

Date: _____

Company Registration Number: _____

VAT Number: _____

Identity Number: _____

Jewellers Permit Number (Attach copy) _____

Physical & Postal Address
(Including postal code) _____

Contact Person: _____

Landline Number: _____

Fax Number: _____

Mobile Number: _____

Email Address: _____

Website: _____

EXECUTIVE DIRECTOR: SHARON EADES

PROFESSIONAL EXECUTIVE: DR OLGA HOOD-EADES

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Preferred method of payment: CASH / CREDIT CARD / EFT

Would you like prices emailed to you: DAILY / WEEKLY / MONTHLY

Birthday of contact person: _____

Credential Verification Indemnity – I/we hereby authorize CPM to forward information supplied on this application form to a third party (e.g. credit bureau, data bases). We unconditionally indemnify CPM, its duly authorized verification agent and verification information suppliers against any liability that may result from furnishing information in this regard. I/we understand that this information is supplied for the purpose of CPM for the purpose of normal business operations (validate and verify information, level of indebtedness assessment, repayment history, risk assessments, prevention and detection of fraud and/or money laundering). I/we agree that this indemnity declaration remains valid for the current and future credential verification requests by CPM.

Do you agree to CPM conducting a Credit Bureau check: YES / NO

Trade Reference

Company Name: _____

Contact Person: _____

Contact Number: _____

How long have you been dealing with them? _____

Account credit facility with this company: _____

Customer signature: _____

Protection of Personal Information (POPI)

Please note that Cape Precious Metals will be processing information provided in accordance with its Privacy Policy which takes account of the requirements of the Protection of Personal Information Act, No 4 of 2013.

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OFFICE USE ONLY

Date of accountability search:	_____	Notes:	_____
Pastel customer code:	_____		_____
Sales code:	_____		_____
Price code:	_____		_____
Customer category:	_____		_____
Employee name:	_____		_____
Management authorisation:	_____		_____

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