



**VENDOR APPLICATION FORM
2019**

Glen Arum Farm (Pty) Ltd Supplier Application Form - South African Entity

Glen Arum Farm (Pty) Ltd Return Address							
Postal Address: 47 Shongweni Road Mkhombe Office Park Hillcrest, KZN 3610	Physical Address: 47 Shongweni Road Mkhombe Office Park Hillcrest, KZN 3610	Contact Details: Mr Michail Kemp Tel: +27 31 765 5663 Email: mike@glenarum.co.za					
1. Information							
Registered Name of Legal Entity							
Trading Name (If Applicable)							
Business Registration Number of Legal Entity							
Previous Registered Name (If Applicable)							
2. Type of Legal Entity (Please mark applicable entity hereunder)							
<input type="checkbox"/> Sole Proprietor	<input type="checkbox"/> Partner-Ship	<input type="checkbox"/> Closed Corporation	<input type="checkbox"/> (Pty) Ltd Company	<input type="checkbox"/> Ltd Company	<input type="checkbox"/> Trust	<input type="checkbox"/> NPO	<input type="checkbox"/>
3. Address							
3.1 Head Office – Physical Address							
Street Name And Number							
City And Region							
Postal Code							
3.2 Head Office – Postal							
P.O. Box				Private Bag			
City				Postal Code			
3.3 Regional Office - Physical (If applicable)							
Street Name And Number							
City And Region							
Postal Code							

3.4 Regional Office - Postal			
P.O. Box		Private Bag	
City		Postal Code	
4. Contact Information			
Name of Managing Director / CEO			
Telephone Number		Fax Number	
Email Address			
Name of Marketing/ Branch Manager			
Telephone Number		Fax Number	
Email Address			
5. Supplier Communication (for electronic document exchange)			
Electronic Document Exchange	Communication method (select one)		
	Fax:		
	Email:		
6. Accounting Information			
Name of Accounting Officer			
Telephone Number		Fax Number	
Email Address			
See Annexure 1 for details regarding submitting bank institution details / information See Annexure 2 for proof of signatories			
Preferred Method of Invoicing			
Manual Invoice Matching		Automatic Invoice Generation	
7. Please provide details of the core business of the Legal Entity (Please attach legal entity profile)			

8. Contactable References				
(give details of three orders/contracts you/the Legal Entity have successfully completed)				
Client				
Contact				
Type Of Product/Service				
Month/Year				
Estimated Amount Paid				
Client				
Contact				
Type of Product / Service				
Month/Year				
Estimated Amount Paid				
Client				
Contact				
Type Of Product/Service				
Month/Year				
Estimated Amount Paid				
9. Additional Information				
Have any of the owners or directors of the legal entity been declared insolvent previously?				
<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
If yes, please provide the following details:				
Name of Director/Owner				
Date				
Name of Legal Entity				
Do any of the owners or directors have relatives employed by Glen Arum Farm (Pty) Ltd?				
<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Name of Employee employed by Glen Arum Farms (Pty) Ltd				
Please disclose the nature of the relationship with the identified Glen Arum employee				
Has the Legal Entity previously performed work for another Glen Arum Farm (Pty) Ltd company?				
<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Name of division employed at by Glen Arum Farms (Pty) Ltd				
Contact Person At Glen Arum Farm (Pty) Ltd				

Annexure A1

Banking detail request for Glen Arum Farm (Pty) Ltd suppliers:

This document will be used by Glen Arum Farm (Pty) Ltd to verify the authenticity of any request to change/amend any banking detail information of the entity. Any change of signatories shall be approved by the original signatories as submitted to Glen Arum Farm (Pty) Ltd during application ONLY.

Approved signatories (Managing Member e.g. Directors, Owners, Partners or any other appointed signatory) need to be captured on this document.

Corporate number		Vendor number	
Registered name of legal entity			
First signatory (Managing Member/Director/Owner/Partner)			
Full name and surname			
ID number			
Designation			
Direct telephone number			
E-Mail address			
_____ First signatory – Signature 1		_____ First signatory – Signature 2	
Second signatory (Any other appointed signatory)			
Full name and surname			
ID Number			
Designation			
Direct telephone number			
E-Mail address			
_____ Second signatory - Signature 1		_____ Second signatory – Signature 2	
Official entity stamp	Certification by Commissioner of Oath		

NOTE:

1. If more than two signatories, copy this form and complete accordingly for all signatories.
2. If signatories should change

Glen Arum Farm (Pty) Ltd Business Units to also benefit from this Application:	Yes	No
Glen Arum Farm (Pty) Ltd		
EggTech (Pty) Ltd		

Application completed by:

I, the undersigned (print name)

.....

Identity number:

In my capacity as (designation)of
..... (hereinafter the

company) hereby warrant that I am duly authorised by the company to make this application on its behalf and that the above information is true and correct and that any false information provided could lead to the immediate *de listment* by Glen Arum Farm (Pty) Ltd from its approved suppliers list of the business represented herein.

I further undertake to inform Glen Arum Farm (Pty) Ltd immediately and in writing of any changes with regard to the shareholders / partners / members or proprietor of this business as well as any vested interest which may occur at any stage after signing this document.

I accept that all orders placed for goods and/or services shall be subject to Glen Arum Farm (Pty) Ltd terms and conditions, as amended from time to time.

Signature (On behalf of company)

On the day of year

At

Administrative use only			
<i>Supplier no:</i>		<i>Processed By:</i>	