

CUSTOMER INFORMATION

PRIVATE CUSTOMER:

SURNAME: _____

FULL NAMES: _____

COMMON NAME: _____

RESIDENTIAL ADDRESS: _____

PLACE OF EMPLOYMENT:

(i.e. Employer's Name & Branch)

If self employed: Business Name: _____

IDENTITY NUMBER: _____

VEHICLE REGISTRATION NUMBER: _____

CONTACT DETAILS:

WORK: _____

HOME: _____

CELL: _____

WHATSAPP: _____

(if different from cellphone number)

E-MAIL: _____

COMMERCIAL CUSTOMER: (COMPANY)

COMPANY TRADING NAME: _____

CONTACT PERSON: _____

POSITION IN COMPANY: _____

PHYSICAL ADDRESS: _____

DIRECTORS/OWNERS/PARTNERS/MEMBERS:

1. _____

2. _____

3. _____

COMPANY VAT NUMBER: _____

COMPANY REGISTRATION NO.: _____

PLEASE LIST ANY PERSON AUTHORISED BY YOU TO HIRE ON THIS PROFILE:

NAME & SURNAME

1. _____

2. _____

3. _____

CONTACT TEL. NO.:

1. _____

2. _____

3. _____

IDENTITY NUMBER / DATE OF BIRTH

1. _____

2. _____

3. _____

I HEREBY CONFIRM THAT I WILL BE FULLY RESPONSIBLE AND LIABLE FOR ALL GOODS HIRED OR SERVICES RENDERED TO THE ABOVE LISTED PERSONS

CUSTOMER FULL SIGNATURE