



BEE VERIFICATION AGENCY CC

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BEEVER NATIONWIDE

Application for QSE/GENERIC BEE Verification - F04-10

<p>Please complete <u>ALL</u> sections of the APPLICATION FORM in CLEAR PRINT and sent back to: BEE VERIFICATION AGENCY CC at Fax: (021) 979-4096 or E-mail: info@bee-verification.com PLEASE SUBMIT THE FOLLOWING DOCUMENTATION WITH THIS APPLICATION FORM</p> <ul style="list-style-type: none"> • Proof of payment • Signed Standard Terms and Conditions document • Copy of previous BEE Verification certificate (if any) 							
<p>NOTE: UPFRONT PAYMENT IS REQUIRED BEFORE THE VERIFICATION PROCESS WILL COMMENCE</p> <ul style="list-style-type: none"> • See Standard Terms and Conditions document for banking details 							
FEES (Incl. VAT)				R			
PLEASE INDICATE THE AREA CLOSEST TO YOUR HEAD OFFICE (✓)							
Cape Town		George		East London		Port Elizabeth	
Durban		Bloemfontein		Kimberley		Nelspruit	
Johannesburg		West Rand		East Rand		Vaal Triangle	
Centurion/Midrand		Tshwane		Polokwane		Witbank	
CLIENT DETAILS (MEASURED ENTERPRISE)							
Organisation Registered Name:							
Trade Name:							
Organisation Registration Nr:				VAT registration number:			
PHYSICAL ADDRESS OF YOUR HEAD OFFICE				POSTAL ADDRESS			
Postal code:				Postal code:			
CONTACT DETAIL							
Contact Person:				Position:			
Tel:				Fax:			
E-mail:				Cell:			

PLEASE TICK THE RELEVANT SECTOR CODE THAT APPLIES TO YOUR BUSINESS							
DTI	TOURISM	FORESTRY	CHARTERED ACCOUNTANT	CONSTRUCTION			
				CONTRATORS		BEP'S	
TRANSPORT							
AVIATION	BUS-COMMUTER/ COACH SERVICES	FORWARDING & CLEARING	PUBLIC SERVICES	MARITIME TRANSPORT & SERVICES	RAIL	ROAD FREIGHT	TAXI INDUSTRY
Annual Turnover as per last financial statements <i>Required to determine which scorecard to be used</i>			R				
Number of full-time employees							
Number of sites where operations occur							
TYPE OF ORGANISATION							
Single Business entity not involved in group structure			Higher Education Institution				
Group structure			Non-Profit Organisation				
Multinational Company			Public Entity				
Unincorporated Joint Venture			Enterprise wholly owned by organ of state				
Franchisee			Public Benefit scheme				
Franchisor			Sec. 21 Company				
Company Limited by Guarantee							
BLACK SHAREHOLDING: Complete this section <u>only</u> if you have Black Shareholding or Equity Equivalent Programme approved							
Type of Black shareholding and other allowable forms of ownership: (Please tick all those types of ownership applying to your business where black shareholding or other allowable forms of ownership is involved)							
1.	Ownership in personal capacity directly in the measured entity (Sole Proprietor/CC/(Pty) Ltd)		7.	Companies limited by guarantee			
2.	Ownership via a chain of ownership		8.	Trusts			
3.	Ownership via sale of assets		9.	Options and share warrants			
4.	Broad-based ownership scheme		10.	Equity instruments carrying preferent rights			
5.	Employee share ownership scheme		11.	Multi-national with equity equivalent programme approval			
6.	Private equity fund		12.	Recognition of ownership after the sale or loss of share by a black shareholder who held shares for longer than 3 years			
OTHER SHAREHOLDING TO BE EXCLUDED: Please indicate which of the following types of shareholding exists in your company							
Section 21 Companies							
Government Entities							
Mandated investments (Pension Funds, Insurance Fund, Medical Schemes, Banking Investments, Friendly Society, Mutual Schemes Unit Trusts)							
DECLARATION: The Chief Executive Officer or authorised official must authorise this form							
NOTE: Please ensure that the application form is submitted correctly and that all required documentation is attached							
Provide the name, if any, of the Consultancy Firm used to assist you with developing and implementing your BEE Strategy (This is not the institution who did your BEE Verification audit).							
<ul style="list-style-type: none"> The Measured Enterprise agrees to comply with BEE Verification Agency CC requirements as per its <i>Standard Terms and Conditions</i> I declare the information given in this application form is correct to the best of my knowledge and belief I undertake to inform BEE Verification Agency CC immediately of any changes with respect to the application and accept full responsibility for any costs incurred as a result of any changes not reported timeously to BEE Verification Agency CC BEE Verification Agency CC does not accept any responsibility for the actions or the results of any actions of a measured enterprise							
Name:			Signed:				
Capacity:			Date:				