

COMPANY FORMATION INSTRUCTIONS

I/We the undersigned, being the beneficial owner(s) of the structure proposed to be registered and having attached a clear copy of the data pages of my/our passport(s) and recently-issued bank reference(s), hereby request from you the provision of the following services in relation to the registration and management of the following company:

Country of Registration	<input style="width: 100%;" type="text"/>		
Company Name	<input style="width: 100%;" type="text"/>		
Objects	<input style="width: 100%;" type="text"/>		
Est. Level of Turnover	<input style="width: 100%;" type="text"/>		
Share Capital	<input style="width: 100%;" type="text"/>		
Shareholder(s)	<i>(If more than 3 shareholders please give details on a separate sheet)</i>		

	Beneficial Shareholders	Number of Shares
Name	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Residential Address	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Telephone	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Fax	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
E-mail	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Nationality	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Passport No	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Name	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Residential Address	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Telephone	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Fax	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
E-mail	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Nationality	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Passport No	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Name	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Residential Address	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Telephone	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Fax	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
E-mail	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Nationality	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Passport No	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>

Director(s)

(If more than 2 directors please give details on a separate sheet)

Details of Directors	
Name	
Residential Address	
Telephone	Home Tel.
Fax	Mob Tel.
E-mail	
Nationality	
Occupation	
Passport No	Country

Name	
Residential Address	
Telephone	Home Tel.
Fax	Mob Tel.
E-mail	
Nationality	
Occupation	
Passport No	Country

Registered Address [to be provided by Exceed Financial Services (Pty) Ltd] (tick) Yes No

Contact Person

(If more than 1 contact person please give details on a separate sheet)

(for future correspondence) Documents required (tick) Afrikaans English

Name	
Residential Address	
Telephone	Home Tel.
Fax	Mob Tel.
E-mail	
Nationality	
Passport No	Country

Special Instructions

Bank account(s) (If a bank account is required, please complete the following:)

Name of the bank

Location (country) of bank

Currency required (tick)

ZAR

£

US\$

CHF

€

Type of account (tick)

Fixed Deposit a/c

2 days Notice a/c

Current a/c

Cheque book (tick) (zar only)

YES

NO

Name of authorized Signatory(ies)

Authorised signatories Signing (tick)

Individually

Jointly

Alone

Enclosed bank reference (tick)

For authorised signatory

For director

For Shareholder

Enclosed passport copy (tick)

For authorised signatory

For director

For Shareholder

Enclosed utility bill (tick)

For authorised signatory

For director

For Shareholder

Apostilled Documents (tick)

Yes

No

Additional Services Requested (Please ✓)

The provision of the Administrative Office of the Company.

Dealing with the day-to-day correspondence of the Company.

The provision of the Registered Office of the Company.

The maintenance of the book-keeping accounts of the Company.

The maintenance of the statutory records and the filing of any statutory returns of the Company.

The holding of all of the Directors' and the Shareholders' Meetings.

Other relevant information (Please ✓)

Source of Funds to Capitalise company.

Life Savings

Trading income

Other

Recommended by

Full Name

Signature

Date

Additional Shareholder(s) *(If more than 3 shareholders please give details on this sheet)*

Beneficial Shareholders		Number of Shares
Name		
Residential Address		
Telephone	Home Tel.	
Fax	Mob Tel.	
E-mail		
Nationality		
Passport No	Country	
Name		
Residential Address		
Telephone	Home Tel.	
Fax	Mob Tel.	
E-mail		
Nationality		
Passport No	Country	

Additional Director(s) *(If more than 2 directors please give details on this sheet)*

Details of Directors	
Name	
Residential Address	
Telephone	Home Tel.
Fax	Mob Tel.
E-mail	
Nationality	
Occupation	
Passport No	Country
Name	
Residential Address	
Telephone	Home Tel.
Fax	Mob Tel.
E-mail	
Nationality	
Occupation	
Passport No	Country

Additional Contact Person (If more than 1 contact person please give details on this sheet)

(for future correspondence) Documents required (tick)

Afrikaans

English

Name			
Residential Address			
Telephone	Home Tel.		
Fax	Mob Tel.		
E-mail			
Nationality			
Passport No	Country		
Special Instructions			