

NOMINATION OF REGISTERED AGENT

1. NOTES FOR THE COMPLETION OF FORM

1. Please indicate with an" X" in the appropriate block(s) whichever is applicable

2. Please reflect the relevant customs and excise client number for the registered agent, if already registered or licensed for any activity regulated by the Act.

3. A separate form DA 185.D must be completed and submitted for each registered agent that is nominated and be attached to the DA 185 application form.

2. FOREIGN PRINC	PAL P	ARTIC	ULA	RS																							
I / We (herein after known as the "Principal):																											
Individual:	First two Names:																										
individual.		Surname:													•												
Passport No:																	(6	e.g. S	Pa Soutl			ounti = ZAF					
Company Registered name:																											
Company / CC / Trust Reg. No.																											
Business Physical	addres	s:																									
																				St	reet	code	:				
Cour	try Cod	le																									
Postal Address	:																										
	_																										
	_																						-				
			T																		tal c						
Busines	-			ode: (_/	Tel.	(_)				Fax	nur	mbe	r:	Code	e: ()	Fa	x. (_)
		usines		nail a	ddres	ss:			<u> </u>																		
Cu	stoms N	lumbe	r:																								
Herein represented by	y:																										
(1)											(2	2)															
being duly authorised	thereto			acity) of –															(C	apad	city)						
(a) *a resolution																										on	the
(b) *express cons	ent in v	vriting of	of al	l the r	nemt	oers o	of the	e clo	ose c	orp	oorat	on /*	pa	rtners	of th	ie pa	artn	ersh	ip /* t	truste	ees o	of the	e trus	st; or			
(c) * being a pers do hereby appoint / c												n as	Reg	gister	ed A	gent	t for	the	funct	ions	set o	out in	ı par	t 4.			
														-													
3. REGISTERED AG				-							otion	a cot	out	in na	rt 4 c	f thi	ic a	anlie	ation								
		rst two				eu A	gen	. 101			SUON	5 301	out	in pa	11 4 0			piic	ation								
Individual:				ame:																							
Identity No:										Т																	
	stered																										
Company Registered name:																											
Company / CC / Tru	ist Reg	. No.									_																
SARS Identification Customs Numbers Number:											In	com	e Ta	ax Nu	mber	:											
Business Physical ad	dress:																										

						Stre	et cod	e:				
Country Code												
Postal Address:												
						Posta	l code					
Business Telephone:	Code: ()	Tel. ()	Fax number:	Code: ()	F	ах. ()			
Busines	s e-mail address:											
Herein represented by:												
(1)	(Capad		(2)		(Ca	(Capacity)						
being duly authorised thereto b					(,					
(a) *a resolution pa	assed at a mee	ting of the Board of Direct	ors, held at						on	the		
day of (CCYY); or												
/1 > 4		day of	(CCYY)		; or							
(b) *express consent	t in writing of all the	e members of the close corpora	tion /* partners of th	e partnersh	; or ip /* tri	ustee		e trust	; or			
(b) *express consent	t in writing of all the	e members of the close corpora ement of any other association.	tion /* partners of th	e partnersh	; or ip /* tri	ustee		e trust	; or			
(b) *express consent	t in writing of all the	e members of the close corpora	tion /* partners of th	e partnersh	; or ip /* tri	ustee		e trust	; or			
(b) *express consent	t in writing of all the having the manag	e members of the close corpora	tion /* partners of th	e partnersh	; or ip /* tri	ustee		e trust	; or			
(b) *express consent (c) * being a person	t in writing of all the having the manag	e members of the close corpora	tion /* partners of th	c c	; or ip /* tri	ustee:		e trust	; or D	D		
(b) *express consent (c) * being a person 4. NOMINATED RELATIONS	t in writing of all the having the manag	e members of the close corpora ement of any other association.	tion /* partners of th	e partnersh	ip /* tri		s of the					
(b) *express consent (c) * being a person 4. NOMINATED RELATIONS Importer's registered age	t in writing of all the having the manag	e members of the close corpora ement of any other association.	Effective date:	c c	ip /* tri	Y	s of th	М	D	D		
(b) *express consent (c) * being a person 4. NOMINATED RELATIONS Importer's registered age Exporter's registered age Licensed remover's registered age	t in writing of all the having the manag	e members of the close corpora ement of any other association. Cancel relationship Cancel relationship	Effective date:	c c c	ip /* tri Y Y	Y Y	M M	M	D	D		
(b) *express consent (c) * being a person 4. NOMINATED RELATIONS Importer's registered age Exporter's registered age Licensed remover's registered	t in writing of all the having the manag	e members of the close corpora ement of any other association. Cancel relationship Cancel relationship	Effective date:	c c c	ip /* tri Y Y	Y Y	M M	M	D	D		
 (b) *express consent (c) * being a person 4. NOMINATED RELATIONS Importer's registered age Exporter's registered age Licensed remover's registered age 5. SIGNED BY THE FOREIG 	t in writing of all the having the manag	e members of the close corpora ement of any other association. Cancel relationship Cancel relationship	tion /* partners of th Effective date: Effective date: Effective date:	c c c c c c	ір /* tri	Y Y Y	M M M	M M M	D D D	D		
 (b) *express consent (c) * being a person 4. NOMINATED RELATIONS Importer's registered age Exporter's registered age Licensed remover's registered age 5. SIGNED BY THE FOREIG I/ We hereby declare that the 	t in writing of all the having the manag	e members of the close corpora ement of any other association. Cancel relationship Cancel relationship Cancel relationship	tion /* partners of th Effective date: Effective date: Effective date:	c c c c c c	ір /* tri	Y Y Y	M M M	M M M	D D D	D		

	Sigr	nature of Principal				Signature of Principal
at	lame of To	wn or City	on the	No.	day of	Month and Year
In the presend	ce of the su	bscribed witnesse	es:			
Witnesses:	(1)		Signature		(1)	Signature
	(2)		Signature		(2)	Signature
6. SIGNED B	BY THE RE	GISTERED AGEN	IT:			

I/ We hereby declare that the particulars in the application are true and correct and undertake to comply with such customs and excise laws and procedures.

(1)		(2	2)	
	Signature of Registe	red Agent	Sig	nature of Registered Agent
at		on the	day of	
	Name of Town or City	No	D	Month and Year
In the prese	ence of the subscribed with	esses:		
Witnesses:	(1)		(1)	
		Signature		Signature
	(2)		(2)	
		Signature		Signature