

# SSA1 - IND SUPPLIER APPLICATION FORM - INDIVIDUAL



Thank you for your interest in supplying products and services to SAIPA.

Please complete these forms and provide the requested supporting information specified. From there, your application will be assessed, and if successful, you will be added to our preferred supplier database.

**Please take note:**

1. Completion of this form does not mean that SAIPA has accepted you as a supplier.
2. Qualifying as a supplier does not necessarily mean that SAIPA will invite you to tender every time SAIPA puts out tenders or requests for quotations.
3. SAIPA will use the information that you fill on this form to pre-qualify you in terms of the criteria stipulated below. This will apply for both existing and new suppliers.
4. SAIPA will treat all the information that you supply with strict confidentiality.
5. SAIPA reserves the right to request additional information or documents regarding answers you provide in this form.
6. SAIPA reserves the right to perform an audit to confirm or check any of the answers that you supply.
7. No services should be rendered without an official Purchase Order, as SAIPA will not take any responsibility for the services delivered and may therefore not pay for these services and/or goods delivered.
8. Please respond to all questions in the application as incomplete forms will not be processed.

**The completed documents should please be**

**marked for the attention of:**

The Financial Manager

**and returned by either:**

Posting to:

SAIPA, PO Box 2407, Halfway House, 1685

Or delivering to reception, between 8am and 4pm from Monday to Friday, at:  
SAIPA House, Howick Close, Waterfall Business Park, Midrand, 1685

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**SUPPLIER APPLICATION FORM - INDIVIDUAL**



**A. General Information**

Surname \_\_\_\_\_

Name \_\_\_\_\_

Salutation \_\_\_\_\_

ID number \_\_\_\_\_

Email address \_\_\_\_\_

Physical address \_\_\_\_\_

Postal address \_\_\_\_\_

Telephone number \_\_\_\_\_

Income tax registration number \_\_\_\_\_

VAT registration number  
(if applicable) \_\_\_\_\_

**B. Broad-Based Black Economic Empowerment (“B-BBEE”) details**

Please complete the attached document “Sworn affidavit – B-BBEE Exempted Micro Enterprise”.

**C. Banking details**

Banking details:

Account holder \_\_\_\_\_

Bank \_\_\_\_\_

Branch code \_\_\_\_\_

Account number \_\_\_\_\_

Account type: \_\_\_\_\_

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- Current / Cheque
- Transmission
- Savings
- Other(specify)

**D. Management and ownership**

D.1 Please complete form SSA2 (Declaration of interests).

D.2 Were you at any time convicted by a court of law (including a court outside of the Republic of South Africa) for fraud or corruption during the past five years? Yes / No

D.3 Was any contract between yourself any of your customers terminated during the past five years on account of failure to perform on or comply with the contract? Yes / No

If the answer to D.2 or D.3 is "Yes", please provide further details:

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**I. Declaration**

I hereby declare that the above information is correct at the time of completion.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

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**Checklist of documents to be attached:**

Certified copy of ID

Completed form SSA2 (Declaration of interests)

Valid Tax Clearance Certificate / SARS electronic PIN

BBBEE sworn affidavit

Proof of banking details - cancelled cheque or certificate from bank

Yes	No	n/a