

SALES PERMIT APPLICATION FORM

Business Name: _____

Business Registration number: _____

Postal address (Business): _____

Physical Address (Business): _____

Contact Person: _____ **Company Designation:** _____

Tel Number: _____

Fax Number: _____

Cell Number: _____

E- Mail Address: _____

Name of a product(s) for which the sales permit is applied for: _____

Commencement Date for Sales Permit as Requested: _____

Expiry date of sales Permit (if Applicable): _____

Description of Product(s)	Manufacturer	Brandname/ Trademark	Model (s)	Quantity
1.				
2.				
3.				
4.				

Description of Non Compliance: _____

Motivation:

Additional Relevant Documentation (Full description and number of pages)

1. _____

2. _____

3. _____

Non- Refundable fee R2970.00 (Attach proof of payment)

Details of manufacture/builder or importer (If not the applicant):

Date manufactured, built or imported: _____
Batch Details (If Non-Compliance on Products is from more than 1(one) batch).

Batch 1. _____

Batch 2. _____

Batch 3. _____

Comments: _____

Signature of Applicant
NRCS Banking Details:

Date

Account Holder: National Regulator for Compulsory Specifications (NRCS)

Account Number: 40 721 616 82

Bank: ABSA

Branch name: Brooklyn, PTA

Branch Code: 335 345

Customer Account Number: _____

Deposit Reference (ID) _____

Note: All applications must be done using online CRM system and attach this form plus the test reports. Applicant will be required to submit the sample of the product

