

## Application for a Customs Bond

### Notice:

This document is intended for existing clients of PCBS Construction & Customs Bonds Services (Pty) Ltd who wish to apply for a new trade bond. Companies that are not clients of PCBS MUST complete both this application form and the Bond Facility Application Form for a Customs Bond Facility approval.

To avoid delays you are requested to complete the forms in full.

### Instructions:

1. Print this questionnaire,
2. Complete the questionnaire and email it back to PCBS.
  - a. Beneficiary Request Letter/Instruction,
  - b. Guarantee wording requirements, i.e. Beneficiary Proforma Wording template e.g. SARS CB09, SARS CB03, etc.
  - c. Latest Statement Payment History

### Applicant

Registered name:			
Facility number:			
Address:			Postal code:
Registration number:		VAT number:	
Contact name:		Telephone number:	
E-mail address:		Mobile number:	

**Broker**

Company name:			
Postal address:			
		Postal code:	
Telephone number:		Mobile number:	
Contact person:		E-mail address:	

**Please attach list of bonds presently operative.**

**Existing Bonds**

Name of bank / insurance company	Facility	Bond outstanding	Rate charged

How secured?

**New Request**

Bond in favour of:			
Address:			
		Postal code:	
Telephone number:		Fax number:	
Contact person:		E-mail address:	
Start date			
End date	(12 months from start date and Annually Renewable)		
Date bond required			

**List of creditors: Please provide a list of your 5 biggest creditors**

Institution/Creditor	Account number	Amount outstanding	Contact details

**DECLARATION**

I/we hereby declare that the details and information furnished in this application, to the best of my/our knowledge, fairly represent the true state of affairs of the company/business and I/we authorise the verification of any aspect of this application. I/we have not concealed any material facts relevant to this application. We consent to the sharing of this information for the purpose of our approval

\_\_\_\_\_  
Signature\_\_\_\_\_  
Date\_\_\_\_\_  
Name  
(Being duly authorised to sign this document)\_\_\_\_\_  
Designation