



**PERSONAL DETAILS**

Title : \_\_\_\_\_  
 Surname : \_\_\_\_\_  
 Full Name(s) : \_\_\_\_\_

Identity Number / Passport:

Tax number (if issued):

**NB:** (Enclose an original certified copy of your identity document and a document issued by SARS in order to verify your tax number)

Postal Address: \_\_\_\_\_ Physical Address: \_\_\_\_\_

: \_\_\_\_\_ Physical Address: \_\_\_\_\_

: \_\_\_\_\_ Physical Address: \_\_\_\_\_

Postal Code: \_\_\_\_\_ Postal Code: \_\_\_\_\_

**NB:** (Enclose an original certified copy of a Service Bill)

Cellphone Number

Telephone

Email Address

Facsimile number

**BANKING DETAILS**

**NB:** (Enclosed an original certified copy of your bank statement or request your bank to verify your account details by stamping and signing this form)

Account name:

Bank Name

Branch Code

Branch Name

Account Number

**NB:** (Please note that third party banking details cannot be accepted)

**DECLARATION**

The client shall at all times be bound by the provisions of the Securities Legislation and must comply with any other provisions that may be required by legislation as a result of the nature of the Client.

**STRATE RULES:** It is the responsibility of the Client to keep abreast with the Strate Rules and Directives. Please visit [www.strate.co.za](http://www.strate.co.za) to obtain the latest Strate Rules and Directives.

AUTHORISED SIGNATORY: \_\_\_\_\_ DATE: \_\_\_\_\_