

4. PARTICULARS OF BENEFICIARY **Entity**

Legal Entity Name:

 Individual

Full Name(s):

Surname:

Gender: Male Female**Physical Address**

Physical Address Line 1:

Physical Address Line 2:

Suburb:

City:

Province:

Postcode:

Country:

5. BANKING DETAILS

Account Holder Name:

Bank Name:

ABA/Routing Number (if applicable):

SWIFT Code:

Account Number/IBAN:

Country:

DECLARATION AND ACKNOWLEDGMENT

I/We, the undersigned, hereby declare that:

- I have read this document and know and understand the contents thereof;
- The information furnished above is in all respects both true and correct;
- The currency applied for will only be used for the specific purpose stated herein;
- The documentation presented in support of this application is in all respects authentic;
- I have been informed of the limit applicable to the above transaction and confirm that this limit will not be exceeded as a result of the conclusion of this transaction;

I/we consent to this information being provided to the South African Revenue Service and/or the Financial Intelligence Centre.

Signed at _____ on _____ (Date)

For and behalf of _____

Signature (who warrants he/she is duly authorised)_____
Signature (who warrants he/she is duly authorised)**DISCLAIMER**

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FOR OFFICE USE ONLY:

TRN Reference Number:

Ruling section:

Completed in terms of mandate dated:

Date Processed:

Other: