



**military veterans**

Department:  
Military Veterans  
REPUBLIC OF SOUTH AFRICA

PRIVATE BAG X943 PRETORIA 0001; 328 FESTIVAL STREET HATFIELD PRETORIA 0083

## BANK ENTITY MAINTENANCE FORM

BAS       LOGIS

### Company/School/Institution Details

Registered name:	<input type="text"/>
Trading hours:	<input type="text"/>
Tax Number:	<input type="text"/>
VAT Number:	<input type="text"/>
Title:	<input type="text"/>
Initials:	<input type="text"/>
First Name:	<input type="text"/>
Surname:	<input type="text"/>

### Address

Payment Address:	<input type="text"/>
	<input type="text"/>
	<input type="text"/>
	<input type="text"/>

Postal Code

### Contact Details

Contact Person

Work:

Home:

Email Address:

Cell:

Fax:

<input type="text"/>
<b>Entity Signature</b>
<input type="text"/>
<b>Print Name</b>
<input type="text"/>
<b>Date</b>

**Bank Account Details**

Please note that this account **MUST** be in the name of the entity. No third party payments allowed

Account Name

Name of bank

Account Number

Branch Name

Branch Number

Account Type  Cheque Account  
 Savings Account  
 Transmission Account  
 Bond Account  
 Other (Please specify)

Company Registration Number

CC Registration\*

\*Please include CC/BK where applicable

Practice Number

**NB NOTE:**

Please attach a copy of the following account information (screen prints) from the applicable Bank

**ABSA:** CIF Screen  
**FNB:** Hogans system on the CIS 4  
**Standard Bank:** Look-up-screen  
**Nedbank:** Banking Platform under the client details tab

Contact Nr: 012 7659379/97

Bank Date Stamp

**Please return to the following address:**

Department of Military veterans  
Finance Management Section  
328 Festival Street  
Hatfield  
Pretoria  
0083