

Distributor Application Form

Issue date: 06/04/2020



DISTRIBUTOR APPLICATION FORM

Name:	
Surname	
Identity / Passport Number	
Residential address	
Postal address	
Phone:	
Cell:	
Email:	

Company name:	
Registration number:	
Registered address:	
Postal address:	
Income tax number:	
VAT number:	
Phone:	
Fax:	
Email:	

More information required

Has your company ever attended to the installation of solar water heating systems before? If so, kindly attach herewith photographs and/or documentary proof. If not, do you have the ability to attend to installations alternatively do you require training?	
Which area is suitable to you?	

Which system is suitable to you? (Low / High Pressure or Split System)	
Please provide any additional information that may be of use to us in processing your application.	

REQUIRED SUPPORTING DOCUMENTATION - PLEASE TICK TO INDICATE WHAT YOU HAVE ATTACHED

PRIB Card	
Ck document	
Solar water heating training certificate	
ID or Passport Copy	
Existing installation pictures	

Kindly forward the duly completed form via facsimile alternatively email to the following addresses:

Email: **info@solargeyserstechnology.co.za**

I/we hereby consent to Solar Geysers Technology and/or its attorneys making enquiries about my/our credit record with any credit reference agency and any other party to confirm any or all information provided by me/ourselves.

I/we further consent to Solar Geysers Technology and or its attorneys carrying out our identity and fraud prevention checks and sharing information relating to this application through the South African Fraud prevention Service.

I hereby declare the above information to be true and correct.

Signed on this day of 202 for and on behalf of

Name of business

Full name

Signature

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