

		Т.	RANSFORMEX CONSTANT CHANGE
COR01A-PART2 : REQUEST FOR VERIFICATION			
VOIR091024 COMPANY INFORMATION			
Description Please complete in Full			
Registered name of organisation			
Trading name			
Type of entity (Pty) CC, etc			
Company Registration Number			
Company VAT Number			
Industry classification: choose the industry where 50% or more of your turnover is derived from if you derive turnover from more than one industry	AGRICULTURE	CONSTRUCTION	DEFENCE
	FINANCIAL	FORESTRY	ICT
	LEGAL	MARKETING/ADVERTISING	PROPERTY
	TOURISM	TRANSPORT	OTHER (DTI AMENDED)
Products and services (as per the nature of business on the AFS)			
Physical address of entity			
Number of subsidiaries/divisions/branches (if applicable)			
Location of subsidiaries/divisions/branches (if applicable)			
Nominated Designated Contact person for BEE (If a third party to the measured entity, please submit a Power of Attorney with the application)			
Designated Contact person Tel Number			
Designated Contact person Email Address			
Company Turnover for the financial period to be verified			
Financial period to be rated (please note that the latest FYE must be used)	From:	To:	
Do you have signed audited financials for the above-mentioned FYE			
Total permanent staff members as at date of request			
Percentage Black ownership in the entity			
What percentage of the shares are held by an individual			
How many individuals own shares in the company , Please list shareholders and percentage			
What percentage of the shares are held by a company/institute			
Please provide detailed organogram of the ownership structure or list the institutes and percentages			
Do you require Transformex to collate BEE certificates from suppliers at a cost of R50 per supplier?			
Is this your first verification?	YES:	NO:	
If no to question above, please provide your previous BEE certificate and report received from the verification agency	Attached:	Not applicable:	
If you have been verified by Transformex previously, have there been any changes in your Ownership structure?	YES:	NO:	
ls your company a Black-owned QSE entity opting for a full verification on the Generic scorecard as opposed to using the affidavit?	YES:	NO:	
ls your company a Black-owned EME entity opting for a full verification on the QSE scorecard as opposed to using the affidavit?	YES:	NO:	
Are you currently in the process of being verified by another verification agency?	YES:	NO:	

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Please send the signed and completed form to info@transformex.co.za. Once received, we will send you a formal quote to conduct the BEE request.			
Please note this application must be completed, signed and submitted by a representative of the measured entity (unless a Power of Attorney is also submitted)			
DATE			
SIGNATURE OF DESIGNATED AUTHORITY OF THE MEASURED ENTITY	NAME AND DESIGNATION		
THE VERIFICATION PROCESS.	IT LISTED ABOVE AND TRANSPORMER WHICH WOOLD AFFECT THE CREDIBILITY AND IMPARTMENT OF		
4. I UNDERSTAND THAT SHOULD ANY INFORMATION DIFFER FROM THE ABOVE, IT WILL BE SUBJECT TO ADDITIONAL COST, WHERE APPLICABLE 5. I DO NOT HAVE ANY DEBT EQUITY RELATIONSHIPS WITH TRANSFORMEX AND THERE IS NO RELATIONSHIP THAT EXISTS BETWEEN THE COMPANY LISTED ABOVE AND TRANSFORMEX WHICH WOULD AFFECT THE CREDIBILITY AND IMPARTIALITY OF			
3. ALL INFORMATION PROVIDED IS TRUE AND CORRECT			
2. I HAVE ATTACHED MY COMPANY OWNERSHIP ORGANOGRAM			
I HEREBY DECLARE THAT:  1. I HAVE THE AUTHORITY TO COMPLETE AND SIGN THIS DOCUMENT			
DECLARATION BY DESIGNATED AUTHORITY OF THE MEASURED ENTITY			
How did you hear about Transformex?			
information.			
Did the BEE consultant make any promises in terms of fees, duration and scoring of the Transformex verification? If yes, please declare this			

Were the services of a BEE consultant used in the last 4 years? If yes please provide the name/entity.