

## **DISCLOSURE INFORMATION REQUISITION FORM (MOO2)**

Applicant Name:		Customer Code	
Tel.NumberApplicant Email address			<del></del>
Postal Address:			
METHOD OF DELIVER	<u>Y</u>		
[ ]POST	[ ]EMAIL	[ ] DOCEX ADDRESS	
Details in respect of s	service required :		FEES (for office use only)
<ul><li>CC File</li><li>Reason for perusa</li></ul>	R5.00 X	(Number of files) (Number of files)	R
B] Copy of:  • Company Do	cument/s R1.50 X	(Number of copies) (Number of copies)	R
C] Certificate concerning:  Typed certificate for CO's R50.00 X (Number of certificates typed)  Typed certificate for CC's R20.00 X (Number of certificates typed)  Authentication letter R30 X (Number of letters)			R
<ul><li>D] Certification of co</li><li>Company Do</li><li>CC Document</li></ul>	cument/s R20.00 X	(Number of certifications)(Number of certifications)	R
E] Other			
		<u>TOTAL</u>	R
Signed:		Date:	
Companies and Intelle	ctual Property Commis	ssion: Date:	