



NOMINATION OF REGISTERED AGENT

1. NOTES FOR THE COMPLETION OF FORM
<p>1. Please indicate with an "X" in the appropriate block(s) whichever is applicable</p> <p>2. Please reflect the relevant customs and excise client number for the registered agent, if already registered or licensed for any activity regulated by the Act.</p> <p>3. A separate form DA 185.D must be completed and submitted for each registered agent that is nominated and be attached to the DA 185 application form.</p>

2. FOREIGN PRINCIPAL PARTICULARS

I / We (herein after known as the "Principal):													
Individual:	First two Names:												
	Surname:												
Passport No:											Passport Country (e.g. South Africa = ZAF)		
Company Registered name:													
Company / CC / Trust Reg. No.													
Business Physical address:													
										Street code:			
Country Code													
Postal Address:													
										Postal code			
Business Telephone:			Code: (____)		Tel. (____)			Fax number:		Code: (____)		Fax. (____)	
Business e-mail address:													
Customs Number:													
Herein represented by:													
(1)						(2)							
(Capacity)						(Capacity)							
being duly authorised thereto by virtue of –													
(a) *a resolution passed at a meeting of the Board of Directors, held at on the day of (CCYY)													
(b) *express consent in writing of all the members of the close corporation /* partners of the partnership /* trustees of the trust; or													
(c) * being a person having the management of any other association;													
do hereby appoint / cancel the party specified under part 3 of this application as Registered Agent for the functions set out in part 4.													

3. REGISTERED AGENT PARTICULARS (as reflected on DA 185)

I / We accept / cancel the appointment as Registered Agent for the functions set out in part 4 of this application:																	
Individual:	First two Names:																
	Surname:																
Identity No:																	
Company Registered name:																	
Company / CC / Trust Reg. No.																	
SARS Identification Numbers	Customs Number:										Income Tax Number:						
Business Physical address:																	

				Street code:					
Country Code									
Postal Address:									
						Postal code			
Business Telephone:		Code: (____)		Tel. (____)		Fax number:		Code: (____) Fax. (____)	
Business e-mail address:									

Herein represented by:

(1) (Capacity) (2) (Capacity)

being duly authorised thereto by virtue of –

- (a) *a resolution passed at a meeting of the Board of Directors, held at on the day of (CCYY); or
- (b) *express consent in writing of all the members of the close corporation /* partners of the partnership /* trustees of the trust; or
- (c) * being a person having the management of any other association.

4. NOMINATED RELATIONSHIP:

Importer's registered agent:		Cancel relationship		Effective date:	C	C	Y	Y	M	M	D	D
Exporter's registered agent:		Cancel relationship		Effective date:	C	C	Y	Y	M	M	D	D
Licensed remover's registered agent:		Cancel relationship		Effective date:	C	C	Y	Y	M	M	D	D

5. SIGNED BY THE FOREIGN PRINCIPAL:

I/ We hereby declare that the particulars in the application are true and correct and undertake to comply with such customs and excise laws and procedures.

(1) (2)
Signature of Principal *Signature of Principal*

at on the day of
Name of Town or City *No.* *Month and Year*

In the presence of the subscribed witnesses:

Witnesses: (1) (1)
Signature *Signature*

(2) (2)
Signature *Signature*

6. SIGNED BY THE REGISTERED AGENT:

I/ We hereby declare that the particulars in the application are true and correct and undertake to comply with such customs and excise laws and procedures.

(1) (2)
Signature of Registered Agent *Signature of Registered Agent*

at on the day of
Name of Town or City *No.* *Month and Year*

In the presence of the subscribed witnesses:

Witnesses: (1) (1)
Signature *Signature*

(2) (2)
Signature *Signature*