

REGISTRATION CLIENT TYPE 4A19 – PRODUCER OF GOODS NOT CAPABLE OF USE IN ANY ENGINE (SECTION 37A(4) AND RULE 37A.11)
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- Please complete the appropriate section (A and B or C)
- A separate application should be submitted for each location which manufactures independently
- The output of the manufacturing operation must consist entirely of goods or a range of goods which can only be used as burning fuel not capable of use as a fuel in any engine as defined in Chapter 85 to 87 of the Harmonised Tariff
- The applicant's attention is drawn to Rule 37A.11 and also the applicable provisions of Rules 37A.06 and 37A.07 of the Customs and Excise Act No.91 of 1964
- Copies of the following documents **must** be submitted with each application:
 - I.D. or Company/CC registration certificate
 - Tax Clearance Certificate
 - Plan of the premises indicating the production and storage facilities
- Any change in any particulars contained in this application must be brought to the attention of the Commissioner immediately

A	New application
Full name of applicant	
Postal address of applicant	
Postal code	
Physical address of applicant where production takes place	
VAT registration number	
Income tax number	
Company/CC registration number (or ID no. if applicant is an individual)	
Code and telephone number of applicant	
Code and Fax number of applicant	
E- mail address of applicant	
B	Business Activities and Description of Goods
Name and address of supplier/s of marked goods	
Name and address of supplier/s of goods with which marked goods will be mixed	

Customer number with supplier		
Name and estimated quantity of each of the goods produced (per annum)		
Formula of blend of goods to be mixed		
Total number and marks of tanks to be used for production/storage purposes		

Capacity of each tank referred to above	
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C	Change of: (Mark with a "X")
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Name	Address	Cancellation	Other
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If change of name and/or address and/or other particulars please insert new particulars in the appropriate fields in A or B

Previous name of applicant	
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Previous postal address of applicant	
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Previous physical address of applicant	
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If other, please indicate	
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I HEREBY DECLARE THAT THE INFORMATION REFLECTED ABOVE IS TRUE AND CORRECT

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Name (in print)	Signature	Capacity	Date
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