

**REGISTRATION CLIENT TYPE 4A17 – TOBACCO LEAF DEALER****Notes:**

1. A separate application form must be submitted in respect of each tobacco leaf dealer.
2. Properly representative photographs that indicate the size, layout and other general identifying features of the facility for dealing with tobacco leaf products should accompany each application.

Details of applicant:

Full name/Company name:	Postal Address:
Identity Number / Company Registration Number:	Income tax reference number:
Physical address:	Cellular phone number:
Email address:	

Details of tobacco leaf dealer:

Describe the nature of tobacco processing or transactions carried out:	Volume of tobacco processed or transacted per year in tons:
	Size of facility for dealing with tobacco leaf products in square metres:
	Number of employees:
If you have failed to comply with the Customs and Excise Act, 1964 or any law relating to the illicit manufacture, conveyance, supply or possession of excisable tobacco products during the past two years, state the nature of the offence and penalty imposed:	

Declaration:

I hereby -

- (a) **declare** that the particulars in the application and all enclosures are true and correct; and
- (b) **undertake** to -
 - (i) inform the South African Revenue Service immediately of any changes in the particulars furnished in the application;
 - (ii) comply with the customs and excise laws and procedures.

..... (Initials and Surname) (Status / Capacity, e.g. Director)
..... (Signature) (Date & Place)

FOR OFFICIAL USE ONLY:		
Approved: <hr style="width: 80%; margin: 10px auto;"/> <div style="text-align: center;">Controller</div> <hr style="width: 80%; margin: 10px auto;"/> <div style="text-align: center;">Date</div>	Licence No. 	Office Stamp

DRAFT