

DISCLOSURE OF REGISTERED AGENT

1. NOTES FOR THE COMPLETION OF FORM

• A separate form DA 185.D must be completed and submitted for each registered agent that is disclosed and be attached to the DA 185 application form.

| 2. PARTICULARS OF IMPORTER/EXPORTER/REMOVER IN BOND/SEARCHER OF OR FOR WRECK NOT LOCATED IN THE REPUBLIC | | | | | | | | | | | | | | | | | | | | | | | | |
|--|---|--------------|----------|------|------|--------|-------|------|-------------|------------------------------|------------------------|--|------|------|-------|------------------------|--|---|------------|---|--------|------|---|--------|
| I, Importer / Exporter / Remover in bond / Searcher of or for wreck not located in the Republic | | | | | | | | | | | | | | | | | | | | | | | | |
| Individual: | | Name: | | | | | | | | | | | | | | | | | | | | | | |
| marviduai. | | Surname: | | | | | | | | | | | | | | | | | | | | | | |
| Passport No: | | | | | | | | | | | (6 | Passport Country e.g. South Africa = ZAF) | | | | | | | | | | | | |
| Business address: Complex | | | | | | | | | | | | | | | | | | | | | | | | |
| Street name an | | | | | | | | | | | | | | | | | | | | | | | | |
| Un | | | | | | | | | | | | | | | | | | | | | | | | |
| Building name | • | | | | | | | | | | | | | | Stree | Street code: | | | | | | | | |
| Suburb/District | | | | | | | | | | | | | | | | | | | | | | | | |
| | City/Town | | | | | | | | | | | | | | | | | | | | | | | |
| | Country | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | |
| Postal Addre | ess: | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | |
| Postal code | | | | | | | | | | | | | | | | | | | | | | | | |
| Business telephone (including code) | | | | | | | | | | Fax number (including code): | | | | | | | | С | ode: (|) | [_ | Fax. |) | |
| Cellular phone number | | | | | | | | | | | | | | | | | | | | | | | | |
| Business e-mail address | | | | | | | | | | | | | | | | | | | | | | | | |
| JURISTIC PERSO | | | | | | | | | | | | | | | | | | | | | | | | |
| Registered name | of busine | ss (ju | risti | с ре | rson |): | | | | | | | | | | | | | | | | 1 | | |
| Company | | Close | | | | | Γrust | : | Sole propri | | | | | | | | | | artnership | | | | | |
| Co-operative | Or | gan of state | | | | | | | | | | | F | ٩ny | oth | ner juristic person | | | | | | | | |
| Registration nur | | | | | | whe | re | | | | | | | | | | | | | | | | | |
| I/We, | • | | | | | | • | | | | | | | | | | | | | | | | | |
| (name of person | ı(s) author | ised to | o ac | | beh | | | | | | | •••• | | | | •• | | | | | | | | |
| (1) | | | | | | | | | | | (| 2 | | | | | | | | | | | | |
| being duly autho | (Capacity/Designation) being duly authorised thereto by virtue of – | | | | | | | | | | (Capacity/Designation) | | | | | | | | | | | | | |
| (a) *a resolut | | | | | | of the | e Ro | hard | of 「 | ∩ire | cto | re h | neld | l at | | | | | | | | | | on the |

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| 3. REGISTERED AGENT PARTICULARS (as reflected on DA 185) | | | | | | | | | | | | | | | | | | | | | | |
|--|---------------------------------|------------|------------------|---------------|--------|----------|--------|-------|-------|-------------------------------|------|---------------------------------------|-------------|-----|----------|--------|------------------|--------------|------|-----------|---|--------|
| I / We accept | | | | | | • | | | | | | | | out | in na | rt 4 o | f thic | annli | cot | ion: | | |
| Individu | | | | ame: | | gistei | eu A | gent | 101 1 | uie i | uncu | JI 13 | ડ હા | out | пра | 11.40 | 1 11115 | арріі | Jai | .1011. | | |
| marviac | <i>.</i> | | | Surname: | | | | | | | | | | | | | | | | | | |
| Identit | y No | D: | | | | | | | Τ | | | | | | | | | | | | | |
| Business address: Complex | | | | • | | • | • | • | | | | 1 | | | <u>I</u> | | | | | | | |
| Street name and number: | | | | | | | | | | | | | | | | | | | | | | |
| Unit number: | | | | | | | | | | | | | | | | | | 1 | | | | |
| | Building name and floor number: | | | | | | | | | | | | | | | | | Street code: | | | | |
| Su | Suburb/District | | | | | | | | | | | | | | | | | | | | | |
| City/Town | | | | | | | | | | | | | | | | | | | | | | |
| Country Postal Address: | | | | | | | | | | | | | | | | | | | | | | |
| 1 00 | iai | radioss. | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | Р | osta | al code | | |
| Business telephone (including code): | | | Code (| Code: () Tel. | | | . () | | | | | Fax number (including code): Code: (_ | | | | | de: (| , |) | Fax. (| |) |
| Cellular phone number: | | | | | | | | | | | | | | | | | | | | | | |
| Business e-n | | | | | | | | | | | | | | | | | | | | | | |
| JURISTIC PERSON Registered name of business (juristic person): | | | | | | | | | | | | | | | | | | | | | | |
| Company | | corp | Close oration | l I ri | | | rust | | | Sole proprietor natural perso | | | | | | rtners | hip | | | | | |
| Co-operative | | Organ o | of state | state | | | | | | | | | | | An | y oth | er juri: per: | | | | | |
| Registration r | | | | | | | | | | | | | | | | | | | | | | |
| I/We, | | | | | | | | | | | | | | | | | | | | | | |
| (name of per | son | (s) autho | rised to | act o | n beha | alf of j | uristi | c ent | ity) | | | | | | | | | | | | | |
| (1) | | | | | | | | | | | | (2) |) | | | | | | | | | |
| being duly au | tho | rised ther | | | y/Desi | gnatio | on) | | | | | | | | •••• | | (Сара | acity/ | De | signation |) | |
| | | | | | | | | | | | | | | | | | | | | | | on the |
| (a) *a resolution passed at a meeting of the Board of Directors, held at | | | | | | | | | | | | | | | | | | | | | | |

| 4. DISCLOSURE OF RELATIONSHIP: | | | | | | | | | | | | | | | |
|---|--|------------|-----------------|----------------|----------|--------|------|--------|-------|---|---|--|--|--|--|
| | | | | | | | | | | | | | | | |
| Importer's registered agent: | Cancel relation | ship | Effective date: | С | С | Υ | Υ | M | M | D | [| | | | |
| Exporter's registered agent: | Cancel relation | ship | Effective date: | С | С | Υ | Υ | M | M | D | [| | | | |
| Remover in bond registered agent: | Cancel relation | ship | Effective date: | С | С | Υ | Υ | M | M | D | [| | | | |
| Searcher for wreck registered agent: | Cancel relation | ship | Effective date: | С | С | Υ | Υ | M | M | D | | | | | |
| For purposes of the rules unde contemplated in rules 8.5 | For purposes of the rules under section 8 submitting supporting documents on behalf of the carrier not located in the Republic a contemplated in rules 8.5 | | | | | | | | | | | | | | |
| 5. PERSONS SUBMITTING REPORTING DOCUMENTS IN TERMS OF RULES UNDER SECTION 8 ON BEHALI OF CARRIER | | | | | | | | | | | | | | | |
| Are you submitting reporting of not located in the Republic | documents on behalf of a carrier | r | Yes 🗌 | | | No [| | | | | | | | | |
| | 6. SIGNED BY THE IMPORTER/EXPORTER/REMOVER IN BOND/SEARCHER OF OR FOR WRECK NO LOCATED IN THE REPUBLIC | | | | | | | | | | | | | | |
| 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) | | | | | | | | | | | | | | |
| Sig | gnature | | Signature | | | | | | | | | | | | |
| at Name of Town or Ci | on the No. | day of | | Month and Year | | | | | | | | | | | |
| In the presence of the subscribed witnesses: | | | | | | | | | | | | | | | |
| Witnesses: (1) | Signature | | (1) | | Sig | ınatur | e | | | | | | | | |
| (2) | Signature | (2) | | Siar | natur | e | | | | | | | | | |
| | | | <u> </u> | | | | | | | | | | | | |
| 7. SIGNED BY THE REGI | STERED AGENT: | | | | | | | | | | | | | | |
| I/ We hereby declare that the customs and excise laws and | e particulars in the application procedures. | are true a | nd correct and | d unde | ertak | e to d | comp | ly wit | h suc | h | | | | | |
| (1) | (2) | | | | | | | | | | | | | | |
| Signa | ture | | Signature | | | | | | | | | | | | |
| atName of Town or Ci | on theNo. | day of | | N 4 1/- | ! | | | | | | | | | | |
| | | | ı | VIONTN | ana | rear | | | | | | | | | |
| In the presence of the subscril | | | | | | | | | | | | | | | |
| Witnesses: (1) | Signature | (1) | (1)Signature | | | | | | | | | | | | |
| (2) | | | | | | | | | | | | | | | |
| (2) | Signature | (2) | Signature | | | | | | | | | | | | |