

APPLICATION FOR TRANSFER OF ACCOUNT

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REV	03
DATE	16 November 2022

Siza Water (RF) (PTY) Ltd

Co. Reg. No. 1998/19209/07 Reypark House, Rey's Place, Avondale, Ballito P O Box 1635, Ballito, 4420, South Africa Tel: (27) 0 32 946 7200

Email: info@sizawater.com Website: www.sizawater.com https://www.facebook.com/sizawater/ https://www.instagram.com/sizawater/

Application Name / Mr. / Mrs. / Ms. _____ Registration Deed Number: (Please enclose a copy) Registration Deed Number to be completed by Owner of property). Identity Number: (Please enclose a copy) Contact No. (__________Cell: ______ Date Of Move / / Contact Person And No. Of Next Of Kin Not Living At This Premises ______ Vat Registration No.: Close Corp, Company and Trustees to Complete Surety ship CK/Reg No: (Please enclose a copy with proxy/resolution) Physical Address Of The Connection. Postal Address Of The New Owner / Tenant P.O. Box: _____ Erf No. _____ Code_____ **Description of the Property:** Home Office Factory Other _____Units _____ (Please specify) Please stipulate number of internal sub meters (this applies to Developments / Body Corporates and Home Owner's Association) It is compulsory for all properties with more than one unit to install internal sub meters.



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Property	Owners	Details
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Owners Name N	Ir. / Mrs. / Ms	
Identity Number		(Please enclose a copy)
Contact No. ()	_
E-mail:		-
Postal Address		-
		_ Code:

A security deposit of R_____, ____ is required for this transfer. This deposit is based on approximately 2-3 months cover for consumption and of water services.

Should you pay via EFT, please use the reference 0000091 and email the proof of payment. Kindly notethis reference is strictly for the security deposit payment only.

PLEASE NOTE:

• Water Loss Charge

Siza Water has purchased its own insurance for protection against possible bad debt owing to underground leaks within domestic consumer property. A monthly water loss charge is applicable, and you can only apply for financial assistance if your account is debited with this charge.

• A Customer Who Is a:

- Company / close corporation must provide: -
 - 1.1 Proof of registration
 - 1.2 Authority to bind the Company or Close Corporation
- 2. Trust must provide: -
 - 2.1 Letters of Authority issued by the Master of the High Court
 - 2.2 Authority to bind the Trust.
- 3. Person married in community of property is to ensure that this Application is duly endorsed by his/her spouse.
- 4. Insolvent is to ensure that this Application is endorsed by the Trustee of the Insolvent Estate.

Responsibility For Payment of Account

Your signature below is an acceptance of the responsibility of payment of this account upon receipt of the monthly statements of account.

You accept the contractual obligations between yourself and Siza Water as set out in our Customer rules. (This document is available for viewing at our office.)

Owners shall be held jointly and severally liable, with their tenants who are registered as customers with Siza Water.



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Non-Payment

Account payments are due at the end of each month; it is your responsibility to ensure that your payments are made timeously. Any administration fees, disconnection fees, legal fees and all other costrelated to the recovery of payment will be for your account.

Should you default on your account payments, Siza Water will be compelled to hand you over to collection agents and this may result in you being listed on the National Credit Database (Credit Bureau).

This information will also be made available to other credit grantors where the persons may apply for credit facilities.

Siza Water Banking Details

Bank: First National Bank

Account Name: Siza Water (RF) (Pty) Ltd

Branch Name: Ballito Branch Code: 250102

Account No.: 62008147698

Protection of Personal Information Act, 4 of 2013

We're committed to protecting your privacy and ensuring the security of any personal information you share with us. Please review our PAIA manual and Privacy Policy to see how to request access to information on (link to URL) https://siza-water.squarespace.com/privacy-policy

Please sign below acknowledging that you have read and understood the above and all your information is correct.

Signature:	Signature (Spouse)
Full Name:	_Full Name:
Date:	_

(If you are signing on behalf of the owner a letter of authorisation is required).

OFFICE USE ONLY	
Name:	
Signature:	
Date:	_