



Smart Phone (PTY) LTD
 T/A Smartcall
 PO Box 412041
 Craighall, 2024
 Tel +2711-507-4777
 Fax +2786-650-3554
 JacquesS@smartcall.co.za
 www.smartcall.co.za

Customer Information Schedule	Smartcall Account No.:	OFFICE USE ONLY
Company Details	Master Dealer SMS Ref.:	OFFICE USE ONLY

Incorporated form of business:	<input style="width:100%;" type="text"/>	
Registered company name:	<input style="width:100%;" type="text"/>	
Trade name:	<input style="width:100%;" type="text"/>	
Company registration number:	<input style="width:100%;" type="text"/>	
Date of registration:	<input style="width:100%;" type="text"/>	
VAT number:	<input style="width:100%;" type="text"/>	
Trading address:	<input style="width:100%;" type="text"/>	
	<input style="width:100%;" type="text"/>	
	<input style="width:100%;" type="text"/>	
Postal Address:	<input style="width:100%;" type="text"/>	
	<input style="width:100%;" type="text"/>	
	<input style="width:100%;" type="text"/>	
Telephone number:	<input style="width:60%;" type="text"/>	Fax number: <input style="width:40%;" type="text"/>
Master dealer Vodacom Cell No.:	MANDATORY	
Contact person:	<input style="width:100%;" type="text"/>	

Directors/Members Details		
	Director 1	Director 2
Full names:	<input style="width:100%;" type="text"/>	<input style="width:100%;" type="text"/>
ID Numbers:	<input style="width:100%;" type="text"/>	<input style="width:100%;" type="text"/>
Designations:	<input style="width:100%;" type="text"/>	<input style="width:100%;" type="text"/>
email addresses:	<input style="width:100%;" type="text"/>	<input style="width:100%;" type="text"/>
	Director 3	Director 4
Full names:	<input style="width:100%;" type="text"/>	<input style="width:100%;" type="text"/>
ID Numbers:	<input style="width:100%;" type="text"/>	<input style="width:100%;" type="text"/>
Designations:	<input style="width:100%;" type="text"/>	<input style="width:100%;" type="text"/>
email addresses:	<input style="width:100%;" type="text"/>	<input style="width:100%;" type="text"/>

Account Contact Details		
Credit Controller:	<input style="width:100%;" type="text"/>	
email address:	<input style="width:100%;" type="text"/>	
Telephone number:	<input style="width:60%;" type="text"/>	Fax number: <input style="width:40%;" type="text"/>
Cellular phone number:	<input style="width:100%;" type="text"/>	

Company Banking Details		
Bank:	<input style="width:100%;" type="text"/>	
Branch:	<input style="width:100%;" type="text"/>	
Branch code:	<input style="width:100%;" type="text"/>	
Account number:	<input style="width:100%;" type="text"/>	

File Delivery		OFFICE USE ONLY
Electronic copy of Inv/CN email address:	MANDATORY	Multiple Address Line 3

Accompanying Documents (Required)	
Copy of directors IDs	<input type="checkbox"/>
Proof of residence	<input type="checkbox"/>
Proof of banking details	<input type="checkbox"/>
Master Dealer form	<input type="checkbox"/>
e.g. Client name & bank details on a bank letterhead.	

Master Dealer Requirements (Where applicable)	
A-code required	<input type="checkbox"/>
Master Dealer training done	<input type="checkbox"/>
Receive commission daily into purse	<input type="checkbox"/>
R20 000 deposit done	<input type="checkbox"/>
Invoice monthly for commission	<input type="checkbox"/>
Created as Master RICA Agent	<input type="checkbox"/>

Signatories

**I hereby declare that the above information is true and correct.
 Any changes made to these details are to be made in writing or via email by the authorised signatory only.**

Authorised Signatory Name	Authorised Signatory Signature	Date
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