



APPLICATION FORM
RENTAL OF COMMERCIAL PROPERTY

PROPERTY FOR WHICH YOU ARE APPLYING:

A APPLICANT

BUSINESS DETAILS

- ☐ Sole Proprietor ☐ Trust ☐ Partnership
☐ Private company [Pty Ltd] ☐ Close Corporation [CC]

Registered/Full name:

Trading name:

Registration/ID no: Contact no:

VAT no: Income tax no:

E-mail address:

Postal address:

Business address:

Registered/Residential address:

DETAILS OF REPRESENTATIVE(S) AUTHORISED TO SIGN LEASE AGREEMENT

- ☐ Director ☐ Member ☐ Trustee ☐ Partner

Full Names and Surname:

ID no:

Income tax number:

Cell no: Tel (H):

E-mail address:

Postal Address:

Residential Address:

- ☐ Director ☐ Member ☐ Trustee ☐ Partner

Full Names and Surname:

ID no:

Income tax number:

Cell no: Tel (H):

E-mail address:

Postal Address:

Residential Address:

B SURETIES

- ☐ *Shareholder*
☐ *Member* ☐ *Mark here if the details for Member are the same as section B*
☐ *Trustee* ☐ *Mark here if the details for Trustee are the same as section B*
☐ *Partner* ☐ *Mark here if the details for Partner are the same as section B*

Full Names and Surname:

ID no:

Income tax number:

Cell no: Tel (H):

E-mail address:

Postal Address:

Residential Address:

- ☐ *Shareholder*
☐ *Member* ☐ *Mark here if the details for Member are the same as section B*
☐ *Trustee* ☐ *Mark here if the details for Trustee are the same as section B*
☐ *Partner* ☐ *Mark here if the details for Partner are the same as section B*

Full Names and Surname:

ID no:

Income tax number:

Cell no: Tel (H):

E-mail address:

Postal Address:

Residential Address:

C TRADE REFERENCES

Please provide 3 (three) references for the business:

1. Name:

E-mail address: Contact no:

2. Name:

E-mail address: Contact no:

3. Name:

E-mail address: Contact no:

D FINANCIAL HISTORY

Name of current landlord:

E-mail address: Contact no:

Current business address:

Current rental being paid:

Has the business ever been summoned for debt? ☐ Yes ☐ No

If yes, complete the table below:

| Case Number | Name of Plaintiff | Amount |
|-------------|-------------------|--------|
| | | |
| | | |

E FICA

What is the nature of the business? Please provide the details of the nature and type of products and services offered by the business.

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Does the business have any branches or subsidiaries outside of South Africa? ☐ Yes ☐ No

If yes, please provide more details:

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Is the business, any of its branches, subsidiaries, or intermediaries domiciled in any of the countries below? ☐ Yes ☐ No

If the answer is yes, mark the applicable option below

- ☐ Algeria ☐ Angola ☐ Bulgaria ☐ Burkina Faso ☐ Cameroon ☐ Cote d'Ivoire ☐ Croatia
☐ Democratic Republic of the Congo ☐ Haiti ☐ Iran ☐ Kenya ☐ Korea ☐ Lebanon ☐ Mali ☐ Monaco
☐ Mozambique ☐ Myanmar ☐ Namibia ☐ Nigeria ☐ Philippines ☐ South Sudan ☐ Syria ☐ Tanzania
☐ Venezuela ☐ Vietnam ☐ Yemen

Is the business involved in cross-border operations? ☐ Yes ☐ No

If yes, please provide more details:

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Please see the list of FICA documentation on Page 6 that must accompany the Application Form

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|---------------------------|
| F DECLARATION |
|---------------------------|

I/WE DO HEREBY OFFER TO HIRE PROPERTY
subject to the conditions stated herein. Until signature of the Lease Agreement, I/We acknowledge that, upon acceptance thereof, the Applicant shall be bound by the Lease Agreement thus arising. I/We acknowledge further that completion of this Application Form and the payment of any deposit and/or lease fees and/or stamp duty by me/us does not constitute acceptance of this offer by the landlord or his agent, who reserves the right to refuse any application without having to offer any reason for such refusal.

I/WE ALSO CONFIRM THAT I/WE HAVE PERSONALLY SEEN THE INTERIOR OF THE PREMISES AND THAT I/WE ARE SATISFIED WITH THE CONDITION THEREOF.

I/we, the undersigned, hereby further declare that:

- all information provided in this application form is true, accurate and complete in every aspect;
- permission is granted to perform the necessary third-party checks and screenings required by FICA legislation; and
- permission is granted to perform the necessary credit checks with any credit reference agency.

Representative/Applicant signature: _____ Date: _____

Representative signature: _____ Date: _____

CMS PROPERTY SERVICES
Email: property@metricgroup.net
Tel: 051 447 5508

52A Kellner Street, Westdene
Bloemfontein
9301

PLEASE SEND:

- COMPLETED AND SIGNED APPLICATION FORM
- FICA DOCUMENTATION LISTED ON PAGE 6
- PROOF OF PAYMENT OF THE APPLICATION FEE

TO: METRIC PROPERTY MANAGEMENT T/A CMS PROPERTY SERVICES

52A Kellner Street, Westdene
Bloemfontein
9301

Email: property@metricgroup.net

APPLICATION FEE:

PAYMENT VIA EFT: R 800

PAYMENT VIA DIRECT DEPOSIT AT THE ATM/BANK: R 850

PLEASE PAY INTO THE FOLLOWING BANK ACCOUNT USING THE NAME OF THE APPLICANT AS REFERENCE:

| | |
|-----------------------|--|
| BANK: | First National Bank |
| ACCOUNT NAME: | Metric Property Management t/a CMS Property Services |
| BRANCH: | Brandwag |
| BRANCH CODE: | 253305 |
| INTERNET BRANCH CODE: | 23053400 |
| ACCOUNT NUMBER: | 5507 003 4620 |
| REFERENCE | Name of Applicant |

PRELIMINARY FICA DOCUMENTS

Please note that should your application be considered further, the beneficial owners of the business will be expected to complete further FICA questionnaires and provide supporting documentation. As an Accountable Institution, CMS Property Services is mandated to not only establish but also to verify and screen all beneficial owners of prospective lessees.

For preliminary FICA procedures, the following FICA documents must accompany this Application Form:

Sole Proprietor

- Certified copy of ID (not older than 3 months)
- Proof of business address (not older than 3 months)
- Proof of residential address (not older than 3 months)
- Three (3) months' bank statements (bank stamped)
- SARS Tax Compliance Status Pin

Partnership

- Partnership Agreement
- Written confirmation of the nature of business on a business letterhead
- Three (3) months' bank statements (bank stamped)
- SARS Tax Compliance Status Pin
- Proof of address (not older than 3 months)
For each Partner
- Certified copy of ID (not older than 3 months)
- Proof of residential address (not older than 3 months)
- Official SARS document reflecting Income Tax number

Company / Close Corporation

- CIPC disclosure (not older than 3 months)
- Written confirmation of the nature of business on a corporate letterhead
- Three (3) months' bank statements (bank stamped)
- SARS Tax Compliance Status Pin
- Proof of address (not older than 3 months)
- Resolution authorising the representative(s) to act on the entity's behalf
- Organogram / share register reflecting the individual Ultimate Beneficial Owners
For each representative/surety:
- Certified copy of ID (not older than 3 months)
- Proof of residential address (not older than 3 months)
- Official SARS document reflecting Income Tax number

Trust

- Letter of Authority
- Trust Deed
- Written confirmation of the nature of business on a business letterhead
- Three (3) months' bank statements (bank stamped)
- SARS Tax Compliance Status Pin
- Proof of address (not older than 3 months)
For each representative/surety:
- Certified copy of ID (not older than 3 months)
- Proof of residential address (not older than 3 months)
- Official SARS document reflecting Income Tax number