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OFFICE OF THE MUNICIPAL MANAGER

PROVINCE OF KWAZULU-NATAL
KZN 435

DATABASE INFORMATION UPDATE FORM

Supplier Code ☐

Tick Appropriate box

1. Company Registration Number ☐
2. CSD Registration Number ☐
3. Company Name ☐
4. Banking Details ☐
5. Contact Details ☐
6. Vat Number (If applicable) ☐
7. Tax Reference Number ☐

N.B The Database information form must be accompanied by documents for update, copy of CSD registration & copy of directors Identity Document .

Company Name: ……

Directors Identity Number: …… ……

Directors Name ……..

Directors Signature ……

Contact Details: ……..

Date ……..