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Halfway House  
1685

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VETO INVESTMENT HOLDINGS (PTY) LTD

www.alphacom.co.za

**NEW CLIENT INFORMATION FORM**

Date \_\_\_\_\_

CLIENT(store) NAME _____	POSTAL ADDRESS _____
ID NUMBER(CONTACT) _____	_____
PTY/CK reg. NO _____	_____
CONTACT NAME (BUYER) _____	DELIVERY ADDRESS _____
CONTACT NAME (OWNER) _____	_____
CONTACT OWNER ID _____	_____
*AREA _____	_____
NUMBER OF YEARS TRADING _____	Chosen domicilium citandi et executandi
Have sequestration or liquidation proceedings ever been instituted against the business/directors/partners/names on this form? _____	

TEL 1 _____	FAX _____		
TEL 2 _____	EMAIL _____		
CELL _____	VAT _____		
I, the Client (Debtor) agree to the correct information supplied by myself as the authorized person on behalf of the company. Interest will be charged on overdue accounts at prime plus 5% of interest rate set by Standard Bank of South Africa. All costs involved in the collection process of monies will be for the clients account, this includes tracing costs, administration costs, legal costs and any other.			
FULL NAME :	SIGNATURE:	CAPACITY:	WITNESS:

**OFFICE USE:**

REP NUMBER
TERMS
CR LIMIT
SELL PRICE

**Directors:Garron Zlotnick Nicholas Katsapas**OFFICE

Sales

Administration &amp; accounts

Reception

[sales@alphacom.co.za](mailto:sales@alphacom.co.za)[ally@alphacom.co.za](mailto:ally@alphacom.co.za)[reception@alphacom.co.za](mailto:reception@alphacom.co.za)SALES

ROBIN

MARLON – KZN

GARRON

082 550 3946

083 324 1357

083 325 0777