Exporter Membership Application Form



Private Bag X5 Century City 7446 (Tel) 021-526 0474

Company Legal Name	
Trading Name (if applicable)	
Applicant's Name	
Applicant's Position	
Company's Postal Address	
Company's Physical Address	
Tel:	
Fax:	
Applicant's Mobile:	
E-mail:	
Website Address:	
Applicant's Signature	
	By signing this application, I accept that all information declared herein accurately reflects the details of the company.
Date	

BUSINESS INFORMATION REQUIRED

1.	Type of Business (CC, Pty Ltd, etc.) Also indicate whether SMME, Corporation or Multinational.	
		☐ SMME ☐ Corporation ☐ Multinational
2.	Company Registration Number	
3.	VAT Registration Number	
4.	Country of Registration	
5.	Date Business Commenced	
6.	Is the Company Women-Owned?	☐ Yes ☐ No
7.	Is the entity BEE compliant and if so, what is the entities BEE compliance level?	☐ Yes ☐ No Level:
8.	Any Previous Trading Names	
9.	APAC-Registered? If yes, please provide the registration number.	☐ Yes ☐ No
		Registration Number:
10.	PPECB Registration Number	
11.	Date of PPECB Registration	
12.	Fruit Types Exported	 ☐ Citrus ☐ Pome ☐ Stone ☐ Berries ☐ Exotic ☐ Table Grapes ☐ Pomegranates ☐ Subtropical ☐ Other:
13.	Vegetable Types Exported	 □ Butternut □ Carrot □ Onion □ Potato □ Tomato □ Baby Veg □ Other:
14.	Do you export organic fruit? If yes, please specify which fruit type(s).	☐ Yes ☐ No Fruit Type(s):
15.	Do you produce your own fruit?	☐ Yes ☐ No
16.	List the export market(s) you target	☐ Europe ☐ UK ☐ Middle East ☐ Far East ☐ Asia ☐ Canada ☐ Russia ☐ USA ☐ Africa

17.	If targeting the Far East, which of these countries do you export to?	 □ Bangladesh □ China □ Hong Kong □ India □ Indonesia □ Japan □ Korea □ Malaysia □ Singapore □ Sri-Lanka □ Thailand □ Vietnam
18.	Approximate Annual Turnover	
19.	Volumes Exported	
20.	Owner(s) Name and ID number	
21.	Other Companies Owned	
22.	Management Team, including position (Please add additional rows if necessary).	
23.	Name of Holding Company (including contact details if applicable).	
24.	Name of Subsidiary Company (including contact details if applicable).	
25.	Declaration of Shareholding	
26.	FPEF References: Please include at least two current FPEF member references on a signed letterhead by the company CEO or MD.	
27.	Company Bank Account Details	Name and Branch:
		Account Number:
		Branch Number:
28.		Name:
	Financial Manager/Accountant Details	Email address:
		Contact No: