



**Registration No.: 1998/017963/08**

### **APPLICATION FOR ADMISSION OF MEMBERSHIP BY A PRIVATE INDIVIDUAL**

To the Board of the Sea Point City Improvement District NPC, I, \_\_\_\_\_

hereby apply for admission of membership of the NPC to be entered into the NPC's Membership Register.

#### **General Note on Information**

Under the Companies Act, the Members' Register must contain the following information in respect of each member:  
(a) name; (b) business, residential *or* postal address; (c) email address (*unless person has declined to provide an email address*); and (d) an identifying number unique to that person (*e.g. a RSA ID number*).

**However, the Sea Point City Improvement District NPC will keep your unique identity number and email address provided confidential when any member or outside third party requests access to the Members' Register under the Companies Act, unless you give your written consent.**

#### **Details of Owner representing the property**

Name(s): \_\_\_\_\_

Surname: \_\_\_\_\_

ID number: \_\_\_\_\_

Residential Address:

Postal Address:

**Note:** Where your residential address differs from your postal address, only your postal address will be recorded in the Members' Register.

#### Contact Details:

Home tel.: \_\_\_\_\_

Work tel.: \_\_\_\_\_

Cellular: \_\_\_\_\_

Fax: \_\_\_\_\_

Email address: \_\_\_\_\_

Notices and communication need to be addressed to the (*tick appropriate box*):

- The physical address
- The postal address
- The email address

## Details of Co-owner(s)

Owner 2 – Name(s): \_\_\_\_\_ Surname: \_\_\_\_\_

ID number: \_\_\_\_\_ Email address: \_\_\_\_\_

Notices and communication to be emailed: Yes  No

Owner 3 - Name: \_\_\_\_\_ Surname: \_\_\_\_\_

ID number: \_\_\_\_\_ Email address: \_\_\_\_\_

Notices and communication to be emailed: Yes  No

## Details of Property

I, \_\_\_\_\_, am the registered owner/ co-owner (*circle whichever is applicable*), of the following property located within the Sea Point City Improvement District NPC.

Erf No.	Physical Address

Signed at \_\_\_\_\_ on this the \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Submission of application

Please return the completed application form by email to: [wayne@seapointcid.co.za](mailto:wayne@seapointcid.co.za) by fax to 021 434 8075, or deliver to the Sea Point City Improvement District NPC office at 2 Kloof Road, Sea Point or post to Box 1997, Cape Town, 8000.

## For office use only

When details of the property owner differs from the City's property database, request relevant proof from the applicant to verify and correct accordingly.