



Annexure A
Registration as an employer in the Motor Industry
In accordance with Clause 8(1) of the MIBCO: Administrative Agreement

Motor Industry Bargaining Council
Free State/Northern Cape Region
P O Box 910
Bloemfontein 9300

Tel (051) 409 4000
Fax (051) 430 4636
e-mail address Natalie.Jansen@mibco.org.za
Website address <http://www.mibco.org.za>

New Registration Change of ownership Change of address Change of trading name

Name under which business is conducted

Previous trading name if applicable

Name and Registration of CC, Company
and / or Trust (*Please attach copies of
the registration documentation*)

Name
Registration No.

Street address (Site)	Postal address (Branch)	Head Office Address
Street/PO Box		
Suburb Name		
Town Name		
Postal Code		
Tel / Fax No.		
Branch Cell No.		Head Office Cell No.
Branch e-mail address		Head Office e-mail address
Magisterial District		
Preferred mode of Communication (e-mail/fax/post; indicate the fax no, e-mail, etc.)		
Nature of business		Date trading commenced
Activity Code		Date of change
Chapter		Sector

Details of Proprietors, Partners, Director, Members of CC or Trustees (Delete whichever is not applicable)

Name and Surname	Residential Address	ID Number*	Occupation

*Please provide certified copies of ID documents

Contact Person: Wage Clerk / Bookkeeper / Manager (Delete whichever is not applicable)

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Particulars of employees

No. of Journey men	<input type="checkbox"/>	No. of general workers	<input type="checkbox"/>	No of apprentices	<input type="checkbox"/>		
No. of clerical & sales employees	<input type="checkbox"/>	No. of RSA's / BSA's	<input type="checkbox"/>	No. of other employees	<input type="checkbox"/>		
Employer Organisation Member	<input type="checkbox"/>	RMI	<input type="checkbox"/>	FRA	<input type="checkbox"/>	Number	<input type="checkbox"/>

Signature of Employer /
Authorised Representative

Date

With this signature, I declare that I am authorised to confirm that the contents of this document are both true and correct.

Office Use	
Memo Number	File Prepared
Inspection Sheet Amended	Area
Inspection Sheet Compiled	Agent Area / Code
Chapter	Registered by
File No. / Employer No.	Sector

NOTE: In terms of Clause 8(2): REGISTRATION OF EMPLOYERS of the Administrative Agreement, it is the responsibility of the Employer to notify the relevant MIBCO Regional Council, within one month, of any change in terms of ownership, name, partner / director / member or manager composition, postal and/or physical address and trading status of the registered establishment.

Document Handover Control

Designation	Name	Signature	Date Compiled / Received	Date Released / Secured