

APPLICATION FORM FOR THE REGISTRATION OF SALES PERSONNEL



AGRICULTURAL PRODUCE AGENTS COUNCIL

Benvista Office Park No 5, Edgar Road, Jansen Park , Boksburg

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REMARKS:

- This form must be sent or delivered to the above address.
- All questions must be answered and the required information furnished.
- If the space provided herein is insufficient, please attach a separate page containing the relevant information.

PLEASE ATTACH A CONFIRMATION FROM THE MARKET MASTER THAT THIS APPOINTMENT IS ACCEPTABLE

Agency	
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Details of sales personnel

Surname	
Full names	
I D Number	

SIGNATURE

DATE

Surname	
Full names	
I D Number	

SIGNATURE

DATE

Surname	
Full names	
I D Number	

SIGNATURE

DATE

Surname	
Full names	
I D Number	

SIGNATURE

DATE

Surname	
Full names	
I D Number	

SIGNATURE

DATE