

GENERAL NOTICE**DEPARTMENT OF TRADE AND INDUSTRY****NOTICE XXX OF 2006****NATIONAL CREDIT ACT, 2005 (ACT NO. 34 OF 2005)****Determination of Thresholds**

In terms of sections 7(1), 10(1) and 42(1) of the National Credit Act, 2005 (Act No. 34 of 2005) I, Mandisi Mpahlwa, Minister of Trade and Industry, do hereby make the determination of thresholds as set out in the schedule hereto.

SCHEDULE**1. Definitions**

In this Notice-

"GAAP" means generally accepted accounting practice; and

"the Act" means the National Credit Act, 2005 (Act No. 34 of 2005) and the Regulations made under the Act.

2. Threshold required in terms of sections 7(1)(a)

(1) The threshold required to be determined in terms of section 7(1)(a) of the Act is:

- (a) The combined annual turnover of all related juristic persons, at the time the agreement is made, equals or exceeds R1 000 000.00; or
- (b) The combined asset value of all related juristic persons, at the time the agreement is made, equals or exceeds R1 000 000.00.

(2) For the purposes of section 7(1)(a) of the Act, the assets and the turnover of a juristic person in, into or from the Republic, must be calculated in accordance with Annexure "A".

3. Threshold required in terms of section 7(1)(b)

(1) The lower threshold required to be determined in terms of section 7(1)(b) of the Act is R15 000.00.

(2) The higher threshold required to be determined in terms of section 7(1)(b) of the Act is R250 000.00.

(3) The provisions of the Act in respect of a small agreement apply if the credit limit under a credit facility or principal debt under any other credit transaction falls below the lower threshold.

(4) The provisions of the Act in respect of an intermediate agreement apply if the credit limit under a credit facility or principal debt under any other credit transaction -

(a) equals or exceeds the value of the lower threshold; but

(b) falls below the value of the higher threshold.

(5) The provisions of the Act in respect of a large agreement apply to a credit transaction if the principal debt under such transaction equals or exceeds the higher threshold.

4. Threshold required in terms of section 10(1)

The threshold required to be determined in terms of section 10 (1)(b)(i) of the Act is determined as follows:

- (a) The principal debt under any credit agreement between a credit co-operative as credit provider and a member of a credit co-operative as consumer, to qualify as a developmental credit agreement, may not exceed R15 000.00

5. Threshold required in terms of section 42(1)

The threshold required to be determined in terms of section 42(1) of the Act is determined as follows:

- (a) The total principal debt owed to a credit provider under all outstanding credit agreements, other than incidental credit agreements exceeds R500 000.00

Annexure "A"**METHOD OF CALCULATION****1. Generally accepted accounting practices apply**

The assets, and the turnover, of a juristic person must be calculated in accordance with GAAP, subject only to the provisions of this Notice.

2. Valuation of Assets

(1) The asset value of a juristic person at any time is based on the gross value of the juristic person's assets as recorded on the juristic person's balance sheet for the end of the immediately preceding financial year, subject to sub-items (2) and (3).

(2) For greater certainty in applying sub-item (1)-

- (a) the asset value equals the total assets less any amount shown on that balance sheet for depreciation or diminution of value;
- (b) the combined assets include all assets on the balance sheets of the juristic persons concerned, including any goodwill or intangible assets included in their balance sheets;
- (c) no deduction may be taken for liabilities or encumbrances of the juristic person;
- (d) assets in the Republic includes all assets arising from activities in the Republic.

(3) If, between the date of the financial statements being used to calculate the asset value of a juristic person, and the date on which that calculation is being made, the juristic person has acquired any subsidiary company, associated company or joint venture not shown on those financial statements, or divested itself of any subsidiary company, associated company or joint venture shown on those financial statements -

- (a) The following items must be added to the calculation of the juristic person's asset value if these items should, in terms of GAAP, be included in the juristic person's asset value:
 - (i) the value of those recently acquired assets; and
 - (ii) any asset received in exchange for those recently divested assets.

- (b) The following items may be deducted in calculating the juristic person's asset value if these items were included in the juristic person's asset value:
 - (i) the value of those recently divested assets at the date of their divestiture; and
 - (ii) any asset that was shown on the balance sheet and was subsequently used to acquire the recently acquired asset.

3. Calculation of annual turnover

(1) The annual turnover of a juristic person at any time is the gross revenue of that juristic person from income in, into or from the Republic, arising from the following transactions and events as recorded on the juristic person's income statement for the immediately preceding financial year, subject to sub-items (2), (3) and (4):

- (a) the sale of goods;
- (b) the rendering of services; and
- (c) the use by others of the juristic person's assets yielding interest, royalties and dividends.

(2) For greater certainty in applying sub-item (1)-

- (a) when calculating turnover the following amounts may be excluded:
 - (i) any amount that is properly excluded from gross revenue in accordance with GAAP.;
 - (ii) taxes, rebates, or any similar amount calculated and paid in direct relation to revenue, as for example, sales tax, value added tax, excise duties, and sales rebates, may be deducted from gross revenue;
- (b) revenue excludes gains arising from non current assets and from foreign currency transactions; and
- (c) for banks and insurance firms revenue includes those amounts of income required to be included in an income statement in terms of generally accepted accounting practice, but excluding those amounts noted in 3(2)(c).

(3) If, between the date of the most recent financial statements being used to calculate the turnover of a juristic person, and the date on which that calculation is being made, the juristic person has acquired any subsidiary company, associated company or joint venture not shown on those financial statements, or

divested itself of any subsidiary company, associated company or joint venture shown on those financial statements -

- (a) the turnover generated by those recently acquired assets must be included in the calculation of the juristic person's turnover if this turnover should in terms GAAP. be included in the turnover of the juristic person; and
- (b) the turnover generated by those recently divested assets in the immediately previous financial year may be deducted from the juristic person's turnover if this turnover was included in the turnover of the juristic person.

(4) If the financial statements used as a basis for calculating turnover or the turnover included in terms of sub-item 3(a) are for more or less than 12 months, the values recorded on those statements must be pro-rated to the equivalent of 12 months.

4. Combined valuation of firms

(1) If the juristic person is a subsidiary of a group of companies as contemplated in the Companies Act, 1973 (Act No. 61 of 1973) for the purposes of calculations required in terms of this notice -

- (a) the combined assets of the juristic person that are part of that group, and the combined turnover of those juristic person, must be consolidated;
- (b) the consolidated assets and turnover of the group are to exclude turnover or assets arising as a result of transactions by one part of the group with another part of the same group.

5. Form of financial statements

Financial statements used as a basis for calculating assets or turnover of a juristic person-

- (a) must be the juristic person's audited financial statements, if -
 - (i) in terms of any law, the juristic person is required to produce such statements; or
 - (ii) the juristic person has audited statements for the relevant period; and
- (b) otherwise, must be prepared in accordance with GAAP.

NCR Form 1

NATIONAL CREDIT REGULATOR

APPLICATION FOR APPROVAL BY THE MINISTER IN TERMS OF SECTION 4(1)(d) OF THE NATIONAL CREDIT ACT

Name of Applicant
Address of Applicant
Tel Number
Name of Credit Provider
Address of Credit Provider
.....
..... Code: (.....)

To The Minister of Trade and Industry

Address
.....
..... Code: (.....)

I, the above mentioned Applicant, hereby request approval from
the Minister of Trade and Industry to exempt the proposed credit agreement to be entered into between myself and the
abovementioned credit provider located outside of the Republic of South Africa.

A copy of the proposed agreement is attached hereto as "A". {attach copy of agreement to be signed}.

Signed at [place] on this [day] of [month] 2006.

Signature

Full Name of Signatory

NATIONAL CREDIT REGULATOR

APPLICATION FORM FOR REGISTRATION AS A CREDIT PROVIDER IN TERMS OF SECTION 40

General information

The applicant must pay the prescribed fees to the National Credit Regulator as set out below:

(Still under consideration by National Treasury)

The application form, fees and documentation must be submitted to the National Credit Regulator at the following address:

.....

.....

.....

.....

APPLICATION PART 1 - REGISTER AS A CREDIT PROVIDER

Instructions:

16. In terms of section 63 of the Act, a credit provider must make a submission to the National Credit Regulator to make documents available to consumers in at least 2 official languages. If you propose to use the same official languages throughout the Republic complete 16.1. If you choose to use different official languages for different parts of the Republic please complete 16.2.

17. Information under 17 must only be completed in the event of the applicant simultaneously applying for supplementary registration.

1. Name of applicant

2. Trading name of applicant

3. Legal Status

3.1 Individual

3.2 Trust

3.3 Private Company

3.4 Public Company

3.5 Partnership

3.6 Close Corporation

3.7 Co-operative

3.8 Other(specify)

4. CIPRO/other official registration number

5. Date of commencement of trading

6. Financial Year-End

7. Income Tax registration number

8. VAT registration number

9. Which, if any, other regulated activity does the applicant engage in?

- 9.1 Banking
- 9.2 Insurance
- 9.3 Debt Collectors
- 9.4 Financial Advisory
- 9.5 Other (specify)

10. Contact detail of the Applicant

Physical Address

..... Postal Code

Postal Address

..... Postal Code

Telephone number ()

Fax number ()

Cell phone number ()

e-mail address (if applicable)

11. Contact person

Title

Name and initials

Surname

Telephone number (office) ()

Cell phone number ()

e-mail address (if applicable)

12. Auditor / Accounting Officer

Name of Firm

Postal Address

..... Postal Code

Physical Address

..... Postal Code

Name of Auditor or Accountant

Telephone number ()

Fax number ()

e-mail address (if applicable)

Practice number

Name of professional body

registered with

13. Compliance Officer (if applicable)

Name of Compliance Officer

Telephone number ()

Fax number ()

e-mail address

If external compliance officer, name of firm

Postal Address

Postal Code

14. Products

14.1 Mortgage agreements

14.2 Credit facilities

14.3 Unsecured credit transactions

14.4 Vehicle finance

14.5 Clothing retail

14.6 Furniture retail

14.7 Pawnbroking

14.8 Developmental Credit

14.10 Other products, specify

15. Which of the following ancillary financial products does the Applicant sell in conjunction with its credit products?

15.1 Life Insurance

15.2 Funeral cover

15.3 Credit Life Insurance

15.4 Short term insurance

15.5 Other, specify

16. Submission regarding official languages to be used by credit provider as required in section 63(2)(a)

Reflect the code in relation to each of the area in which the lender operates. (see list of codes on last page)

Area

Code:

1st Language:

2nd Language:

16.1

16.2

16.3

16.4

16.5

17. Compliance with section 48(1)(a) and (b) of the National Credit Act.

17.1 Please indicate the Applicant's commitments, if any, made with regard to the Broad Based Black Economic Empowerment Act, 2003 (Act No. 53 of 2003) (add additional pages if required)

.....

.....

17.2 Please indicate the Applicant's commitments, if any, made with regard to the combating of over-indebtedness (add additional pages if required)

.....

.....

18. Developmental Credit: Section 41 of the Act.

18.1 If this application includes an application for supplementary registration to provide developmental credit, please state which of the following types of developmental credit will be provided:

18.1.1 Co-operative loans to members

18.1.2 Educational Credit

18.1.3 Small Business Credit

18.1.4 Low Income Housing Credit

18.1.5 Other, specify

18.2 Human, financial and operational resources

In a separate document to be attached to the supplementary registration form, either:

(a) explain in detail why the credit provider believes that its human, financial and operational resources are sufficient to enable the applicant to function efficiently and effectively carry out its function in terms of the Act, or

(b) present a credible plan to the National Credit Regulator to acquire or develop sufficient human, financial and operational resources to enable the applicant to function efficiently and effectively carry out its function in terms of the Act

18.3 Administrative Procedures

In a separate document to be attached to the supplementary registration form, either:

- (a) explain in detail why the credit provider believes that it has adequate administrative procedures and safeguards to justify the application of statutory exceptions from this Act, or
- (b) present a credible plan to the National Credit Regulator to develop adequate administrative procedures and safeguards to justify the application of statutory exceptions from this Act before entering into any developmental credit agreement.

18.4 In a separate document to be attached to the supplementary registration form, indicate what measures have been put in place / will be put in place to ensure that credit extended to consumers will be used for developmental purposes only.

PART 2 – FINANCIAL INFORMATION

The following financial information must reflect the value of credit agreements as defined in the National Credit Act. It should exclude credit agreements to which the Act does not apply as indicated in Section 4: Application of the Act.

Net value of loan book as at the end of the most recent financial year end

Total number of credit agreements that made up the loan book as at the end of the most recent financial year

Total value (principal debt) of credit agreements entered into during the most recent financial year

Total number of credit agreements entered into during the most recent financial year.

PART 3 - MEMBERS, DIRECTORS, TRUSTEES, PARTNERS AND GENERAL MANAGERS OF THE APPLICANT

1. Does the Applicant or any natural person exercising general management or control whether alone or in conjunction with others, hold a controlling interest in any of the following businesses:

A credit bureau	Yes	No
A debt collection agency	Yes	No
An alternative dispute resolution agent	Yes	No
A credit repair agency	Yes	No

2. If the answer to any of the above is "yes", please provide details:
-

PART 4 – DISQUALIFICATION OF NATURAL PERSONS

THE APPLICANT NEED NOT COMPLETE THIS PART IN THE CASE WHERE THE APPLICANT IS A BANK AS DEFINED IN THE BANKS ACT 1990, ACT NO 94 OF 1990,

THIS FORM MUST BE COMPLETED AND SIGNED IN RESPECT OF EACH NATURAL PERSON WHO EXERCISES GENERAL MANAGEMENT OR CONTROL OF THE APPLICANT, WHETHER ALONE OR IN CONJUNCTION WITH OTHERS. MAKE ADDITIONAL COPIES.

Name of natural person completing form:

Identity number:

Date:

NCR Form 2

Questions:

- | | | |
|---|-----|----|
| 1. Are you, as a result of a court order, listed on the register of excluded persons in terms of section 14 of the National Gambling Act, 2004 (Act no 7 of 2004) | Yes | No |
| 2. Are you subject to an order of a competent court holding you to be mentally unfit or disordered? | Yes | No |
| 3. Have you ever been removed from office on account of misconduct relating to fraud or the misappropriation of money, whether in the Republic or elsewhere? | Yes | No |
| 4. Have you ever been a director or member of a governing body of an entity at the time that such entity has been de-registered in terms of public regulation? | Yes | No |
| 5. Have you ever been a director or member of a governing body of an entity at the time that such entity has brought the consumer credit industry into disrepute? | Yes | No |
| 6. Have you ever been a director or member of a governing body of an entity at the time that such entity has acted with disregard for consumer rights generally? | Yes | No |
| 7. Have you ever been convicted during the previous ten years, in the Republic or elsewhere, of theft, fraud, forgery or uttering a forged document, perjury, or an offence under the Corruption Act, 1992 (Act No 94. of 1992), or comparable legislation of another jurisdiction and been sentenced to imprisonment without the option of a fine? | Yes | No |

If your answer is yes, when providing full details in respect thereof, indicate whether you received a grant of amnesty or free pardon for the offence.

- | | | |
|--|-----|----|
| 8. Have you ever been convicted during the previous ten years, in the Republic or elsewhere, of a crime involving violence against another natural person and been sentenced to imprisonment without the option of a fine? | Yes | No |
|--|-----|----|

If your answer is yes, when providing full details in respect thereof, indicate whether you received a grant of amnesty or free pardon for the offence.

- | | | |
|---|-----|----|
| 9. Have you ever been convicted during the previous ten years, in the Republic or elsewhere, of an offence in terms of this Act, a repealed law or comparable provincial legislation and been sentenced to imprisonment without the option of a fine? | Yes | No |
|---|-----|----|

If your answer is yes, when providing full details in respect thereof, indicate whether you received a grant of amnesty or free pardon for the offence.

- | | | |
|---|-----|----|
| 10. I, the undersigned, hereby give permission to the SAPS Criminal Record Centre to furnish the National Credit Regulator or its authorised agents with my previous convictions and any relevant information in their possession, including any directions by the Court for my detention in a mental hospital or prison as well as any court order listing myself on the register of excluded persons in terms of the National Gambling Act, if any, in the form SAPS69. | Yes | No |
|---|-----|----|

I hereby indemnify the SAPS Criminal Record Centre, its employees, the National Credit Regulator, its agents and its employees and hold them harmless against any claims by myself or any other person that may arise out of or be connected with such disclosure as well as any legal costs, including attorney and client costs.

11. I certify that the information contained herein is true and correct.

Signature

PART 5 - BUSINESS PREMISES

THIS FORM MUST BE COMPLETED IN RESPECT OF ALL BUSINESS PREMISES FROM WHICH THE APPLICANT CONDUCTS / INTENDS TO CONDUCT THE BUSINESS OF A CREDIT PROVIDER MAKE ADDITIONAL COPIES IF REQUIRED.

1. Total number of business premises

2. Information required per business premises

Trading name

Physical Address

.....

..... Postal Code

Contact person

Telephone number ()

Fax number ()

E-mail address

Trading name

Physical Address

.....

..... Postal Code

Contact person

Telephone number ()

Fax number ()

E-mail address

PART 6 - DECLARATION BY CREDIT PROVIDER

1. The applicant hereby permits the National Credit Regulator or any person authorised by the National Credit Regulator to enter any place at or from which the applicant conducts the registered activities during normal business hours, and to conduct reasonable inquiries for compliance purposes, including any act contemplated in section 156(1)(d) to (h) of the Act.

2. The applicant confirms that the information contained in this application is accurate and complete.

Date:

Capacity:

Signatory:

Duly authorized representative of Applicant

NCR Form 2

PART 7 - LIST OF ATTACHMENTS

Forms	Completed	No of forms attached
Part 1 – Application
Part 2 - Financial Information
Part 3 – Members, Directors, Trustees, Partners and General Management
Part 4 – Disqualification of Natural Persons
Part 5 - Business Premises
Part 6 – Declaration by applicant
Part 7 – List of attachments
2. Certificate of CIPRO or other official registration		
3. Resolution authorising the signatory to sign the application form on behalf of the applicant		

NATIONAL CREDIT REGULATOR

APPLICATION FORM FOR SUPPLEMENTARY REGISTRATION IN TERMS OF SECTION 41 TO PROVIDE DEVELOPMENTAL CREDIT

General information

Only registered credit providers who wishes to provide developmental credit must complete this form;

The applicant must pay the prescribed fees to the National Credit Regulator as set out below:

(Still under consideration by National Treasury)

The application form, fees and documentation must be submitted to the National Credit Regulator at the following address:

PART 1 - BUSINESS INFORMATION

1. NCR registration number
2. Which of the following types of developmental credit will be provided?
 - 2.1 Co-operative loans to members
 - 2.2 Educational Credit
 - 2.3 Small Business Credit
 - 2.4 Low Income Housing Credit
 - 2.5 Other, specify

3. Date of commencement of trading:

4. Human, financial and operational resources

In a separate document to be attached to the supplementary registration form, either:

- (a) explain in detail why the credit provider believes that its human, financial and operational resources are sufficient to enable the applicant to function efficiently and effectively carry out its function in terms of the Act, or
- (b) present a credible plan to the National Credit Regulator to acquire or develop sufficient human, financial and operational resources to enable the applicant to function efficiently and effectively carry out its function in terms of the Act

5. Administrative Procedures

In a separate document to be attached to the supplementary registration form, either:

- (a) explain in detail why the credit provider believes that it has adequate administrative procedures and safeguards to justify the application of statutory exceptions from this Act, or
- (b) present a credible plan to the National Credit Regulator to develop adequate administrative procedures and safeguards to justify the application of statutory exceptions from this Act before entering into any developmental credit agreement.

6. In a separate document to be attached to the supplementary registration form, indicate what measures has been put in place / will be put in place to ensure that credit extended to consumers will be used for developmental purposes.

PART 2 - BUSINESS PREMISES CONDUCTING DEVELOPMENTAL CREDIT

THIS PART MUST BE COMPLETED IN RESPECT OF EACH BUSINESS PREMISES FROM WHICH THE APPLICANT IS/WIL BE CONDUCTING BUSINESS. MAKE ADDITIONAL COPIES IF REQUIRED.

1. Total number of business premises from which developmental credit is conducted

2. Information required per business premises

Trading name

Physical Address

.....

Postal Code

Contact person

Telephone number ()

Fax number ()

E-mail address

Trading name

Physical Address

.....

Postal Code

Contact person

Telephone number ()

Fax number ()

E-mail address

Trading name

Physical Address

.....

Postal Code

Contact person

Telephone number ()

Fax number ()

E-mail address

PART 6 - DECLARATION BY CREDIT PROVIDER

1. The applicant hereby permits the National Credit Regulator or any person authorised by the National Credit Regulator to enter any place at or from which the applicant conducts the registered activities during normal business hours, and to conduct reasonable inquiries for compliance purposes, including any act contemplated in section 156(1)(d) to (h) of the Act.
2. The applicant confirms that the information contained in this application is accurate and complete.

Date:

Capacity:

Signatory:

Duly authorized representative of Applicant

PART 7 - LIST OF ATTACHMENTS

Form previously submitted

Application Forms	Completed	No of forms attached
Part 1 – Business information of credit provider
Part 2 – Business Premises providing developmental credit
Part 3 – Declaration by applicant
Part 4 – List of attachments
2. Document – Human financial & operational resources		
3. Resolution authorising the signatory to sign the application form on behalf of the applicant		

NATIONAL CREDIT REGULATOR

APPLICATION FORM FOR REGISTRATION AS A DEBT COUNSELLOR IN TERMS OF SECTION 44

General information

The applicant must pay the prescribed fees to the National Credit Regulator as set out below:

(Still under consideration by National Treasury)

The application form, fees and documentation must be submitted to the National Credit Regulator at the following address:

PART 1 - PERSONAL INFORMATION

1. Name of applicant
 Title Surname
 First name and initials
2. Identity number
3. Income Tax registration number
4. VAT registration number (if registered)
5. Contact details
 Physical Address

 Postal Code
 Postal Address
 Postal Code
 Telephone number ()
 Fax number ()
 Cell phone number ()
 e-mail address

PART 2 – EDUCATION & EXPERIENCE

1. EDUCATION
 Qualification / Training
 Year achieved
 Institution that issued the qualification / certificate
2. EXPERIENCE
 Name of Employer
 Dates of employment
 Position held
 Responsibilities

PART 3 – DISQUALIFICATION OF NATURAL PERSONS

Name of natural person completing form

Identity number

Date

Questions:

1. Are you, as a result of a court order, listed on the register of excluded persons in terms of section 14 of the National Gambling Act, 2004 (Act no 7 of 2004) Yes No
2. Are you subject to an order of a competent court holding you to be mentally unfit of disordered? Yes No
3. Have you ever been removed from office on account of misconduct relating to fraud or the misappropriation of money, whether in the Republic or elsewhere? Yes No
4. Have you ever been a director or member of a governing body of an entity at the time that such entity has been de-registered in terms of public regulation? Yes No
5. Have you ever been a director or member of a governing body of an entity at the time that such entity has brought the consumer credit industry into disrepute? Yes No
6. Have you ever been a director or member of a governing body of an entity at the time that such entity has acted with disregard for consumer rights generally? Yes No
7. Have you ever been convicted during the previous ten years, in the Republic or elsewhere, of theft, fraud, forgery or uttering a forged document, perjury, or an offence under the Corruption Act, 1992 (Act No 94. of 1992), or comparable legislation of another jurisdiction and been sentenced to imprisonment without the option of a fine? Yes No

If your answer is yes, when providing full details in respect thereof, indicate whether you received a grant of amnesty or free pardon for the offence.

8. Have you ever been convicted during the previous ten years, in the Republic or elsewhere, of a crime involving violence against another natural person and been sentenced to imprisonment without the option of a fine? Yes No

If your answer is yes, when providing full details in respect thereof, indicate whether you received a grant of amnesty or free pardon for the offence.

9. Have you ever been convicted during the previous ten years, in the Republic or elsewhere, of an offence in terms of this Act, a repealed law or comparable provincial legislation and been sentenced to imprisonment without the option of a fine? Yes No

If your answer is yes, when providing full details in respect thereof, indicate whether you received a grant of amnesty or free pardon for the offence.

10. Are you subject to debt re-arrangement as contemplated in section 86 and 87 of the Act? Yes No

11. Are you subject to an administration order as contemplated in section 74 of the Magistrates' Court Act, 1944 (Act No. 32 of 1944) Yes No

12. Are you engaged in, employed by or acting as an agent for a person that is engaged in –

12.1 Debt collection Yes No

12.2 Operation of a credit bureau Yes No

12.3 Credit provision Yes No

13. I, the undersigned, hereby give permission to the SAPS Criminal Record Centre to furnish the National Credit Regulator or its authorised agents with my previous convictions and any relevant information in their possession, including any directions by the Court for my detention in a mental hospital or prison as well as any court order listing myself on the register of excluded persons in terms of the National Gambling Act, if any, in the form SAPS69.

I hereby indemnify the SAPS Criminal Record Centre, its employees, the National Credit Regulator, its agents and its employees and hold them harmless against any claims by myself or any other person that may arise out of or be connected with such disclosure as well as any legal costs, including attorney and client costs.

14. I certify that the information contained herein is true and correct.

Consumer's signature

PART 4 - BUSINESS PREMISES

THIS FORM MUST BE COMPLETED IN RESPECT OF ALL BUSINESS PREMISES FROM WHICH THE APPLICANT CONDUCTS / INTENDS TO CONDUCT THE BUSINESS OF A DEBT COUNSELLOR.

MAKE ADDITIONAL COPIES IF REQUIRED.

1. Total number of business premises
2. Information required per business premises

.....

Trading name

Physical Address

.....Postal Code

Contact person

Telephone number ()

Fax number ()

E-mail address

Trading name

Physical Address

.....Postal Code

Contact person

Telephone number ()

Fax number ()

E-mail address

PART 6 - DECLARATION BY DEBT COUNSELLOR

1. The applicant hereby permits the National Credit Regulator or any person authorised by the National Credit Regulator to enter any place at or from which the applicant conducts the registered activities during normal business hours, and to conduct reasonable inquiries for compliance purposes, including any act contemplated in section 156(1)(d) to (h) of the Act.
2. The applicant confirms that the information contained in this application is accurate and complete.

Date:

Capacity:

Signatory:

Duly authorized representative of Applicant

PART 6 - LIST OF ATTACHMENTS

Forms	Completed	No of forms attached
Part 1 – Personal Information
Part 2 - Education and Experience
Part 3 – Disqualification of Natural Persons
Part 4 – Business Premises
Part 5 - Declaration by applicant
Part 6 – List of attachments

NATIONAL CREDIT REGULATOR

APPLICATION FORM FOR REGISTRATION AS A CREDIT BUREAU IN TERMS OF SECTION 43

PART 1 - BUSINESS INFORMATION

General information

The applicant must pay the prescribed fees to the National Credit Regulator as set out below:

(Still under consideration by National Treasury)

The application form, fees and documentation must be submitted to the National Credit Regulator at the following address:

1. Name of applicant
2. Legal status
 - 2.1 Private Company
 - 2.2 Public Company
 - 2.3 Partnership
 - 2.4 Close Corporation
 - 2.5 Co-operative
 - 2.6 Trust
 - 2.7 Other (specify)
3. CIPRO/other official registration number
4. Date of commencement of trading
5. Financial Year-End
6. Income Tax registration number
7. VAT registration number
8. Contact detail of the Applicant
 - Physical Address Postal Code
 - Postal Address Postal Code
- Telephone number ()
- Fax number ()
- Website address (if applicable)

9. Contact person

Title

Name and initials

Surname

Telephone number (office)

Cell phone number

E-mail address (if applicable)

10. Auditor / Accounting Officer

Physical Address

Postal Code

Postal Address

Postal Code

11. Name of Auditor or Accountant

Telephone number ()

Fax number ()

E-mail address

Practice number

Name of professional body registered with

12. Compliance Officer (if applicable)

Name of Compliance Officer

Telephone number()

Fax number()

E-mail address

If external compliance officer, name of firm

Postal Address

Postal Code

Name of professional accredited body

13. Type of business conducted

Receive reports of credit applications

Receive reports of credit agreements

Receive reports of payment history or patterns

Receive reports of personal financial information

Investigate credit applications

Investigate credit agreements

Investigate payment history or patterns

Investigate personal financial information

Compile and maintain data from such reports

NCR Form 5

12. Other business interests

Does the applicant conduct business as a credit provider?	Yes	No
Does the applicant conduct business as a debt collection agency?	Yes	No
Does the applicant conduct business as an alternative dispute resolution agent?	Yes	No
Does the applicant conduct business as a credit repair agency?	Yes	No

PART 2 - MEMBERS, DIRECTORS, TRUSTEES, PARTNERS AND GENERAL MANAGERS OF THE APPLICANT

1. Does the Applicant or any natural person exercising general management or control whether alone or in conjunction with others, hold a controlling interest in any of the following businesses:
- Yes No

A credit provider

A debt collection agency

An alternative dispute resolution agent

A credit repair agency

2. If the answer to any of the above is "yes", please provide details:

PART 3 - DISQUALIFICATION OF NATURAL PERSONS

THIS FORM MUST BE COMPLETED AND SIGNED IN RESPECT OF EACH NATURAL PERSON WHO EXERCISES GENERAL MANAGEMENT OR CONTROL OF THE APPLICANT, WHETHER ALONE OR IN CONJUNCTION WITH OTHERS. MAKE ADDITIONAL COPIES.

Name of natural person completing form

Identity number

Date

Questions:

Yes

No

- | | | |
|---|-----|----|
| 1. Are you, as a result of a court order, listed on the register of excluded persons in terms of section 14 of the National Gambling Act, 2004 (Act no 7 of 2004) | Yes | No |
| 2. Are you subject to an order of a competent court holding you to be mentally unfit of disordered? | Yes | No |
| 3. Have you ever been removed from office on account of misconduct relating to fraud or the misappropriation of money, whether in the Republic or elsewhere? | Yes | No |
| 4. Have you ever been a director or member of a governing body of an entity at the time that such entity has been de-registered in terms of public regulation? | Yes | No |
| 5. Have you ever been a director or member of a governing body of an entity at the time that such entity has brought the consumer credit industry into disrepute? | Yes | No |
| 6. Have you ever been a director or member of a governing body of an entity at the time that such entity has acted with disregard for consumer rights generally? | Yes | No |
| 7. Have you ever been convicted during the previous ten years, in the Republic or elsewhere, of theft, fraud, forgery or uttering a forged document, perjury, or an offence under the Corruption Act, 1992 (Act No 94. of 1992), or comparable legislation of another jurisdiction and been sentenced to imprisonment without the option of a fine? | Yes | No |

If your answer is yes, when providing full details in respect thereof, indicate whether you received a grant of amnesty or free pardon for the offence.

8. Have you ever been convicted during the previous ten years, in the Republic or elsewhere, of a crime involving violence against another natural person and been sentenced to imprisonment without the option of a fine?

Yes

No

If your answer is yes, when providing full details in respect thereof, indicate whether you received a grant of amnesty or free pardon for the offence.

9. Have you ever been convicted during the previous ten years, in the Republic or elsewhere, of an offence in terms of this Act, a repealed law or comparable provincial legislation and been sentenced to imprisonment without the option of a fine?

Yes

No

If your answer is yes, when providing full details in respect thereof, indicate whether you received a grant of amnesty or free pardon for the offence.

10. I, the undersigned, hereby give permission to the SAPS Criminal Record Centre to furnish the National Credit Regulator or its authorised agents with my previous convictions and any relevant information in their possession, including any directions by the Court for my detention in a mental hospital or prison as well as any court order listing myself on the register of excluded persons in terms of the National Gambling Act, if any, in the form SAPS69.

I hereby indemnify the SAPS Criminal Record Centre, its employees, the National Credit Regulator, its agents and its employees and hold them harmless against any claims by myself or any other person that may arise out of or be connected with such disclosure as well as any legal costs, including attorney and client costs.

11. I certify that the information contained herein is true and correct.

Signature

PART 4 – QUALIFICATION, COMPETENCE, KNOWLEDGE & EXPERIENCE

1. MINIMUM QUALIFICATION, COMPETENCE, KNOWLEDGE AND EXPERIENCE REQUIREMENTS

Employees & Outsource service providers

Do you maintain and impose minimum qualifications, competence, knowledge and experience requirements for employees and outsource services provider who will have the authority to represent the applicant in any function under this Act?

Yes

No

If so, please indicate the minimum qualification requirements imposed:

PART 5 - HUMAN, FINANCIAL AND OPERATIONAL RESOURCES

1. Human resources

Indicate the number of staff responsible for the general management of the credit bureau

Indicate the number of staff responsible for the daily operations of the credit bureau, excluding general management and support or administrative functions.

Indicate the number of staff responsible for support and administrative functions.

Are any of the services and functions of the applicant as credit bureau outsourced?

Yes

No

If, yes provide details of the services that are outsourced.

Are there written service level agreements in place between the applicant and the service provider?

Yes

No

Do you have processes in place to ensure that these service providers comply with the requirements of the National Credit Act and the regulations?

Yes

No

NCR Form 5

2. Financial resources

Assets	R
Fixed assets	R
Current assets	R
Liabilities	R
Long term liabilities	R
Short term liabilities	R
Equity	R

3. Operational resources

Do you have a fixed business address?	Yes	No
Do you have adequate access to communication facilities, including telephone, typing, fax and copying facilities?	Yes	No
Do you have adequate storage and filing systems for the safe-keeping of all records?	Yes	No
Do you have procedures in place and sufficient resources to accept the filing of consumer credit information?	Yes	No
Do you have procedures in place and sufficient resources to take reasonable steps to verify the accuracy of any consumer credit information reported to you?	Yes	No
Do you have procedures in place and sufficient resources to retain consumer credit information reported to you for the prescribed period?	Yes	No
Do you have procedures in place and sufficient resources to maintain your records of consumer credit information in a manner that satisfies the prescribed standards?	Yes	No
Do you have procedures in place and sufficient resources to promptly expunge from your records any prescribed consumer credit information that, in terms of the regulations, is not permitted to be entered in your records?	Yes	No
Do you have procedures in place and sufficient resources to issue a report to any person who requires it for a prescribed purpose or a purpose contemplated in this Act?	Yes	No
Do you have sufficient resources to comply with accounting and reporting requirements in terms of this Act?	Yes	No
Do you have sufficient resources to ensure compliance with the requirements of the Act and the regulations?	Yes	No

PART 6 – QUESTIONS, CONCERNS AND COMPLAINTS

1. Do you have a policy in place to handle questions, concerns and complaints?	Yes	No
2. Does this policy outline your commitment to handle questions, concerns and complaints as well as your internal systems and procedures for resolving questions, concerns and complaints?	Yes	No
3. Do these internal systems and procedures ensure that questions, concerns and complaints from consumer or credit providers are treated equitable and consistently?	Yes	No
4. Do these internal systems and procedures ensure that questions, concerns and complaints from consumers or credit providers are treated in a timely, efficient and courteous manner?	Yes	No
5. Are these internal systems and procedures transparent and visible to consumer and credit providers? (i.e. do consumers and credit providers have knowledge of these systems?)	Yes	No
6. Do you have sufficient human resources to handle questions, concerns and complaints from consumers and credit providers?	Yes	No
7. Are your human resources adequately trained to handle questions, concerns and complaints from consumer and credit providers?	Yes	No

- | | | |
|---|-----|----|
| 8. Do you have sufficient resources to handle questions, concerns and complaints from consumers and credit providers? | Yes | No |
| 9. Are your facilities accessible to consumers and credit providers? | Yes | No |

PART 7 - BUSINESS PREMISES

THIS FORM MUST BE COMPLETED IN RESPECT OF ALL BUSINESS PREMISES FROM WHICH THE APPLICANT CONDUCTS / INTENDS TO CONDUCT THE BUSINESS OF A CREDIT BUREAU. MAKE ADDITIONAL COPIES.

1. Total number of business premises
2. Information required per business premises

Trading name

Physical Address

.....

..... Postal Code

Contact person

Telephone number ()

Fax number ()

e-mail address

Trading name

Physical Address

.....

..... Postal Code

Contact person

Telephone number ()

Fax number ()

e-mail address

PART 8 - DECLARATION BY CREDIT BUREAU

1. The applicant hereby permits the National Credit Regulator or any person authorised by the National Credit Regulator to enter any place at or from which the applicant conducts the registered activities during normal business hours, and to conduct reasonable inquiries for compliance purposes, including any act contemplated in section 156(1)(d) to (h) of the Act.
2. The applicant confirms that the information contained in this application is accurate and complete.

Date:

Capacity:

Signatory:

Duly authorized representative of Applicant

PART 9 - LIST OF ATTACHMENTS

Forms	Completed	No of forms attached
Part 1 – Business information of credit bureau
Part 2 - Members, Directors, Trustees, Partners & General managers
Part 3 – Disqualification of Natural Persons
Part 4 – Qualifications, Competence, Knowledge & Experience
Part 5 - Human, Financial and Operational Resources
Part 6 – Questions, Concerns and Complaints
Part 7 – Business Premises
Part 8 – Declaration by applicant
Part 9 – List of attachments
2. Certificate of CIPRO or other official registration		
3. Resolution authorising the signatory to sign the application form on behalf of the applicant		

NATIONAL CREDIT REGULATOR

NOTICE OF DISQUALIFICATION OF NATURAL PERSON FROM REGISTRATION IN TERMS OF SECTION 47(3)(a) OF THE NATIONAL CREDIT ACT X

Name of Registrant.....

NCR Registration Number

Name of Natural Person disqualified from registration

Contact telephone number Code: (.....)

E-mail.....

To : The National Credit Regulator

Address.....

.....

And to : {insert name of the registrant}

Address.....

.....

I, the above mentioned natural person, in my capacity as{insert capacity}
of the above mentioned registrant hereby give notice to the National Credit Regulator and the Registrant that I have been
disqualified from individual registration in terms of Section 46(3) of the Act.

Signed at {place} on this {day} of {month} 2006.

Signature of individual registrant

Full name of signatory.....

NATIONAL CREDIT REGULATOR

NOTICE OF IMPOSITION OF CONDITIONS ON THE REGISTRATION OF REGISTRANT TERMS OF SECTION 48(3) OF THE NATIONAL CREDIT ACT X

Name of Registrant.....

NCR Registration Number

Contact telephone number (.....)

E-mail.....

Address

.....

Please take notice that in terms of Section 48(3) of the Act, the NCR imposes the following conditions on the registration of the registrant:-[insert conditions].

.....

.....

The above conditions are imposed on the registrant for the following reasons:-[insert reasons for conditions].

.....

.....

Signed at [place] on this [day] of [month] 2006.

On behalf of the NCR [insert signature]

Name of person signing on behalf of NCR:

NATIONAL CREDIT REGULATOR

REQUEST BY REGISTRANT FOR IMPOSITION OF NEW CONDITIONS IN TERMS OF SECTION 49(1)(a) OF THE NATIONAL CREDIT ACT X

Name of Registrant.....

NCR Registration Number

Contact telephone number (.....)

E-mail.....

Address

.....

To:

The National Credit Regulator.....

Address

.....

Identity number

Please take notice that the Registrant hereby applies to the National Credit Regulator in terms of Section 49(1)(a) to have its conditions of registration reviewed and new conditions be imposed, on the following grounds:-[insert grounds for application to review conditions of registration].

.....

.....

Signed at [place] on this [day] of [month] 2006.

Signature of Registrant

NATIONAL CREDIT REGULATOR

CERTIFICATE

This is to certify that

Identity number or company registration number

Insert registration number issued by National Credit Regulator

Insert Trading number or name of branch

Insert physical address

Has been registered as

insert activities that registrant is permitted to engage in as

in term of

insert section

of the National Credit Act xxxx of xxxx.

Chief Executive Officer

Certificate Number

Date Issued

NATIONAL CREDIT REGULATOR

NOTICE TO CANCEL REGISTRATION IN TERMS OF SECTION 58 OF THE NATIONAL CREDIT ACT

This form must be submitted to the National Credit Regulator at the following address:

XXXXXXXX

XXXXXXXX

XXXXXXXX

XXXXXXXX

or

P.O. Box XX

XXXXXX

XXXX

or

by fax: (xx)

or

by e-mail: <mailto:XXX@XXX.co.za>

Name of Registrant

NCR registration number

Contact telephone number ()

E-mail

The registrant hereby gives notice to the National Credit Regulator of its intention to voluntarily cancel its registration with effect from {insert date at least five business days from date of signature of this notice}.

The reason(s) for the cancellation is/are

.....

.....

Signed at [place] on this [day] of [month] 2006.

Signature of Registrant or duly authorized representative

Full name of Registrant's duly authorized representative

NATIONAL CREDIT REGULATOR

CERTIFICATE

This is to certify that

Insert name

Insert identity number or company registration number

is hereby appointed as an inspector/investigator in terms of section 25 of the Act.

This appointment allows the inspector/investigator to perform such functions and exercise such powers as assigned to or conferred upon an inspector / investigator by the Act.

The appointment is for the investigation of the activities of:

Registrant

Registration number

Physical address

and is valid for a period of _____ days

Chief Executive Officer

Date Issued

NATIONAL CREDIT REGULATOR

NOTICE OF NON-COMPLIANCE IN TERMS OF SECTION 54(1) OF THE NATIONAL CREDIT ACT X

To:

Name of unregistered entity

Address

..... Code: (.....)

Kindly take notice that it has come to the attention of the National Credit Regulator that you are engaging in or offering to engage in or holding yourself out as authorized to be engaged in (insert details of activity)

..... which requires registration with the National Credit Regulator in terms of the Act.

In terms of Section 54(1) of the Act you are hereby notified to desist from engaging, offering to engage in or holding yourself out as authorized to engage in the aforementioned activity with effect from the (insert date)

Signed at [place] on this [day] of [month] 2006.

Signature

Capacity

On behalf of the NCR

NATIONAL CREDIT REGULATOR

NOTICE TO COMPLY IN TERMS OF SECTION 55(1) OF THE NATIONAL CREDIT ACT

Name of Registrant/Natural Person/Association of Persons*

NCR Registration Number (if applicable)

Contact Telephone Number

E-mail

Code: ()

In terms of Section 55(1) of the Act your attention is drawn to the fact that you:-

(a)* have failed to comply with the provisions of the Act in that you have {insert nature of non-compliance};

.....

(b)*Have engaged in / are engaging* in an activity that is inconsistent with the provisions of the Act in that you have {insert nature of non-compliance};

.....

(c)* you have failed to comply with the provisions of your registration in that you have {insert nature of non-compliance}.

.....

In terms of Section 55(3) of the Act you are hereby advised to rectify such non-compliance and {insert steps to be taken to comply} within x days from date hereof, failing which a penalty of Rx shall be imposed against you in terms of Section x of the Act.

Signed at [place] on this [day] of [month] 2006.

Signature

Name of Signatory

Capacity

On behalf of the NCR

(*delete which is not applicable)

NATIONAL CREDIT REGULATOR

OBJECTION TO NOTICE IN TERMS OF SECTION 56

General information

The notice and supporting documentation (if any) must be submitted to the Tribunal at the following address:

Attention: The Registrar of the National Consumer Tribunal

XX XXXX

XXXX

Or can be faxed to XXXX.

And to

2. The National Credit Regulator at the following address:

XX XXXX

XXXX

Or can be faxed to XXXX.

APPLICANT'S INFORMATION

1. Name of applicant

Identity number or company registration number

Is the applicant registered with the National Credit Regulator Yes No

If, yes provide registration number

2. Contact details of applicant

Contact person

Telephone number (work) ()

Telephone number (cellular)()

Fax number ()

Email address

PART 2 – DETAILS OF OBJECTION

1. Date of notice

2. Section of Act in terms of which the notice was issued Section 54 Section 55

3. If this application was not filed within 15 days of the date of notice, provide reasons why Tribunal should consider the notice in terms of section 56(1)(b)

4. Please provide reasons for the objection

.....
.....

NCR Form 14

PART 3 - DECLARATION BY APPLICANT

1. The applicant confirms that the information contained in this application is accurate and complete.

Date:

Name of duly authorized signatory

Signature

PART 6 - LIST OF ATTACHMENTS

Part 1 – Applicant's Information

Part 2 – Details of Ojection

Part 3 - Declaration by Applicant

2. Copy of the notice issued in terms of section 54 or 55

3. Attach any extra details about the referral in a separate document:

Representations, if attached

Other, please specify:

.....

.....

.....

NATIONAL CREDIT REGULATOR

NOTICE OF CREDIT EXCLUDED FROM RECKLESS LENDING PROVISIONS IN TERMS OF SECTION 78(2) OF THE NATIONAL CREDIT ACT X

Name of Credit Provider

NCR Registration Number

Contact telephone number Code: (.....)

E-mail

I, the above mentioned credit provider, hereby give notice to the National Credit Regulator that I have on the
(insert date) extended credit to the following consumer:-

Consumer's Surname

Consumer's Full Name

Consumer's Identity Number

Consumer's Address

..... Area Code

The credit extended to the consumer is in terms of Section 78(2) of the Act:- (Tick the relevant box)

(a) A school loan or student loan ☐

(b) An emergency loan ☐

(c) A public interest credit agreement ☐

Where the credit extended is an "emergency loan", please specify what proof was obtained and retained by the credit provider in support of this 'emergency loan':

Signed at [place] on this [day] of [month] 2006.

Signature of Credit Provider/duly authorized representative

Full name of Credit Provider's duly authorized representative

NATIONAL CREDIT REGULATOR

APPLICATION FOR DEBT REVIEW IN TERMS OF SECTION 86 OF THE NATIONAL CREDIT ACT 2005

Name of Credit Provider

NCR Registration Number

Contact telephone number Code: (.....)

E-mail

PART 1 - PERSONAL INFORMATION

1.Details of applicant:

Title

Surname

First name and initials

2.Identity number

3.Contact details

Physical Address

..... Postal Code

Postal Address

..... Postal Code

Telephone number (work) ()

Telephone number (home) ()

Fax number ()

Cell phone number ()

e-mail address

PART 2 – ASSETS

Description	Value
1. Fixed Property	R
.....	R
.....	R
.....	R
.....	R
2. Investments	R
.....	R
.....	R
.....	R
.....	R
3. Savings	R
.....	R
.....	R
.....	R
.....	R
4. Motor vehicles	R
.....	R
.....	R
.....	R
.....	R
5. Other assets	R
.....	R
.....	R
.....	R
.....	R

PART 3 – INCOME

1. Gross Salary R
2. Deductions: R
- Tax R
- Medical Aid R
- Pension R
- Other deductions (provide details below)
- R
- R
- R
3. Total net salary
4. Other income (state source of income)
5. Total income

PART 4 – FINANCIAL COMMITMENTS

A

Debt Servicing obligations	Name of Creditor and account number	Total amount outstanding	Monthly repayment amount
1 Bond repayment (primary residence)			
2 Rental agreement (primary residence)			
3 Rates & Taxes Account (municipality)			
4 Water & Electricity Account (Municipality)			
5 Vehicle finance repayment			
6 Furniture accounts, specify			
7 Other lease agreements, specify (e.g. appliances)			
8 Clothing accounts, specify			
9 Telephone account			
10 Cell phone account			
11 Insurance policies, specify			
12 Bank and personal loans, including overdrafts and credit cards, specify			
13 Other debts, specify			
Subtotal			

Living expenses

Further details (if applicable).....

Monthly expenditure

13 Groceries

14 School Fees

15 Clothing (excluding accounts repayments).....

16 Transport costs (excluding vehicle finance).....

17 Medical Expenses.....

C

Other expenses

Further details

.....

.....

PART 5 - DECLARATION BY APPLICANT

1.I undertake to comply with any reasonable requests by the debt counsellor to facilitate the evaluation of my state of indebtedness and the prospects for responsible debt re-arrangement.

2.I undertake to participate in good faith in the review and in any negotiations designed to result in responsible debt re-arrangement.

3. I hereby consent to the disclosure of any confidential information relating to myself by a credit bureau to a debt counsellor for the purposes of conducting a debt review.

4.I confirm that the information contained in this application is true and correct.

Date:.....

Name of applicant.....

Signature

PART 6 - LIST OF ATTACHMENTS

Documents required	Document attached	No of documents attached
1. Payslip.....		
3. Bank statements for all bank accounts, including credit cards.....		
4. Statements of account in respect of the following.....		
Municipality, rates & taxes.....		
Municipality, water & lights.....		
Mortgage loan agreement.....		
Vehicle finance agreement.....		
Furniture accounts.....		
Clothing accounts.....		
Telephone accounts (including cell phone accounts).....		
5. Copies of the following agreements.....		
Insurance policies.....		
Rental agreements.....		
Credit Agreements (if available).....		

NATIONAL CREDIT REGULATOR

(On the letterhead of the debt counsellor)

TO: (An individually addressed notification must be sent to credit department of each credit providers listed in application for debt review) "the listed credit provider"

(An individually addressed notification must sent to each registered credit bureau)

FROM: name of debt counsellor.....

"the registered debt counsellor"

address

contact number

contact person

NCR registration number

DATE: (insert date of notification)

NOTIFICATION IN TERMS OF SECTION 86(4) OF THE NATIONAL CREDIT BILL, 2005

TAKE NOTE THAT:

An application for debt review has been received by the office of the registered debt counsellor in terms of section 86 of the National Credit Bill, 2005 in respect of the following consumer:

Name: (insert name of consumer) "the consumer"

Identity number: (insert identity number of consumer)

And in respect of the following credit providers and credit agreements respectively:

Name of credit provider**Account number**

(list individual credit providers in tabular format)

(list account numbers of credit agreements in tabular format)

.....
.....
.....
.....
.....
.....
.....
.....
.....
.....
.....

REGISTERED CREDIT BUREAUS MUST FURTHER NOTE THAT:

All registered credit bureaus are required to reflect on the consumer's record that an application for debt review is currently pending, until they receive further notification.

LISTED CREDIT PROVIDERS MUST FURTHER NOTE THAT:

In terms of section 86(5) of the National Credit Bill, 2005, listed credit provider's must: comply with any reasonable requests by the debt counsellor to facilitate the evaluation of the consumer's state of indebtedness and the prospects for responsible debt re-arrangement; participate in good faith in the review and in any negotiations designed to result in responsible debt re-arrangement.

In terms of section 88(1) of the National Credit Bill, 2005, a consumer who has filed an application in terms of section 86(1) must not enter into any further credit agreement, other than a consolidation agreement, with any credit provider until one of the events listed in section 88(1) has occurred.

In terms of section 88(3) of the National Credit Bill, 2005, listed credit provider's who receive notice in terms hereof may not exercise or enforce by litigation or other judicial process, any right or security under that credit agreement until- the consumer is in default under the credit agreement; and one of the following has occurred:-
an event contemplated in section 88(1)(a)-(c)
the consumer defaults on any obligation in terms of a re-arrangement agreement between the consumer and credit provider, or ordered by a court or the Tribunal

In terms of section 88(4) of the National Credit Bill, 2005, if a credit provider entered into a credit agreement, other than a consolidation agreement contemplated in this section, with a consumer who has applied for a debt re-arrangement and that re-arrangement still subsists, all or part of that new credit agreement may be declared reckless credit, whether or not the circumstances set out in section 80 apply.

Yours sincerely

.....
(signature)

REGISTERED DEBT COUNSELLOR

NATIONAL CREDIT REGULATOR

NOTICE OF APPLICATION FOR DEBT REVIEW IN TERMS OF SECTION 86(9) OF THE NATIONAL CREDIT ACT X

IN THE MAGISTRATE'S COURT FOR THE DISTRICT OF

HELD AT CASE NO: X/X

In the matter of:- {insert name of consumer/applicant}

IN THE MATTER OF AN APPLICATION FOR DEBT REVIEW

TO: THE CLERK OF THE COURT {insert area}

AND TO: {insert name & address of all interested parties/creditors}

..... "PER HAND/REGISTERED POST"

AND TO: {insert name & address of all interested parties/creditors}

..... "PER HAND/REGISTERED POST"

KINDLY TAKE NOTICE: that application will be made to the above Honourable Court on the {day} of {month} 2006 at 8:30am or so soon thereafter as the matter may be heard for an order in the following terms:- (**delete which is not applicable*)

- (a) that the Applicant be declared over-indebted and/or*;
- (b) that the credit agreement/s between the Applicant and {insert name of credit provider/s} be and is hereby declared to be reckless and/or*;
- (c) that the Applicant's credit obligations be re-arranged in the following manner:-
 - (i)* that the repayment period for the following credit agreement/s namely {insert name of credit provider/s} be extended and the monthly installments be reduced to Rx per month and/or;
 - (ii)* that payment in terms of the following credit agreement/s namely {insert name of credit provider/s} be postponed for the following period {insert dates of postponement} and/or;
 - (iii)* that the repayment period for the following credit agreement/s namely {insert details of credit agreement} be extended and the payments postponed for the following periods {insert dates of postponement} and/or;
 - (iv)* that the following credit obligations of the Applicant namely {insert details of credit agreement} be recalculated as a result of the contravention of Section x of the Act.

KINDLY TAKE NOTICE FURTHER that the Applicant appoints the below mentioned address for service upon him/her of any notices and/or pleadings.

Signed at [place] on this [day] of [month] 2006.

Signature of Applicant/Consumer

Full name and address of Consumer.

NATIONAL CREDIT REGULATOR

CLEARANCE CERTIFICATE ISSUED IN TERMS OF SECTION 71(2)(b)(i)

Name of Debt Counselor:

NCR Registration No:

Address:

Telephone number (.....)

This is to certify that the following consumer, namely:-

Name of Consumer: {insert consumer's name}

Identity Number : {insert consumer's identity number}

Court Case Number: {insert court case number}

Has discharged all his/her obligations in terms of the debt re-arrangement order granted by the Consumer Tribunal*/ Magistrate's Court* of {insert name of court} on the {insert date of order} in terms of Section 86(7)(c) of the National Credit Bill 2005.

Signed at [place] on this [day] of [month] 2006.

DEBT COUNSELOR'S STAMP/WATERMARK/SEAL.

.....

DEBT COUNSELOR'S SIGNATURE

(* delete which is not applicable)

NATIONAL CREDIT REGULATOR

QUOTATION FOR SMALL AGREEMENTS IN TERMS OF SECTION 92(1) OF THE NATIONAL CREDIT ACT X

Name of Credit Provider

Physical Address

Date

Contact telephone number

PART A: QUOTE

Loan Amount/Principal Debt (being the capital advanced)	Rx
Proposed distribution of principal debt (section 102(1)(b)-(f))	Rx
Other ongoing credit costs	Rx
Service fee (stipulate monthly, annually, transaction based)	x%
Initiation fee	Rx
Rand value of interest	Rx
Residual / final amount payable (if applicable)	Rx
Total cost of proposed agreement	Rx
Annual interest rate	Rx
Basis for costs payable under section 121(3)(b)(i)	Rx
Reasonable rental to be charged in terms of section 121(3)(b)(ii)	Rx
Number of installments	.....
Installment amount	Rx

PLEASE NOTE THAT THIS QUOTATION IS VALID & BINDING FOR A PERIOD OF FIVE (5) DAYS FROM DATE HEREOF.

PART B: PRE-AGREEMENT DISCLOSURE

Type of agreement:	
Insurance (section 106)	{Nature/cost/fee or commissions/if applicable}
Default administration costs:	{Implications of default and charges to be imposed in case of default}
Payments:	{Frequency/date of first installment/duration of agreement}
Statement:	{Frequency/manner of delivery}
Security	{Description of security taken by credit provider, if applicable}
Consumer's right to rescind	{Section 121 if applicable}
Early settlement	{Section 125}
Consumer's right to terminate	{Section 122}
Credit provider's right to terminate	{Section 123}
Obligation to disclose location of goods	{Section 97, if applicable}
Surrender of goods	{Section 127, if applicable}

Signed at [place] on this [day] of [month] 2006.

Signature of Credit Provider or duly authorized representative

NATIONAL CREDIT REGULATOR

DISCLOSURE IN TERMS OF SECTION 106(5)(b) OF THE NATIONAL CREDIT ACT X

From:

Name of Credit Provider

NCR registration number

Contact telephone number Code: (.....)

E-mail

To:

Name of Consumer

Account/reference number

Identity number

Please take notice that, in terms of Section 106(5)(b) of the Act, the purchase of the insurance policy proposed by I (the Credit Provider) to you (the Consumer) accrues the following:-

(i) Costs of the insurance for which you are liable Rx

(ii) Additional fees, commission, remuneration or benefit* payable
to the Credit Provider in relation to the insurance policy Rx

Signed at [place] on this [day] of [month] 2006.

Consumer's signature

(*delete which is applicable)

NATIONAL CREDIT REGULATOR

AUTHORITY GRANTED IN TERMS OF SECTION 106(6)(a) OF THE NATIONAL CREDIT ACT X

Name of Consumer
Identity number
Name of insurance policy
Insurance policy reference number
Address
.....
Contact telephone number Code: (.....)

To:

Name of Credit Provider
NCR registration number
Account / reference number
Contact telephone number Code: (.....)
Email

I, the above named consumer hereby grant authority to the Credit Provider in terms of Section 106(6)(a) of the Act to:-

- (i) Pay any premium due in terms of the above mentioned insurance policy during the term of this credit agreement, on my behalf when it falls due and;
- (ii) To bill me for the amount of such premiums paid on my behalf:-
 - on a monthly basis in the case of small or intermediate agreements;
 - on a monthly or annual basis for large agreements.

Signed at [place] on this [day] of [month] 2006.

Signature of Consumer

NATIONAL CREDIT REGULATOR

NOMINATION & AUTHORITY GRANTED IN TERMS OF SECTION 106(6)(b) OF THE NATIONAL CREDIT ACT X

Name of Consumer

Identity number

Address

Contact telephone number Code: (.....)

To:

Name of Insurance company

Insurance policy reference number

Address

Contact telephone number Code: (.....)

And to:

Name of credit provider

NCR registration number

Account / reference number

Address

Contact telephone number Code: (.....)

I, the above named consumer hereby:-

(i)
nominate the above mentioned credit provider as a 'loss payee' in terms of the above mentioned policy up to the settlement value on the happening of the insured event and;

(ii)
authorize the insurer to make payment up to the settlement value to the credit provider on the happening of the insured event and/or;

(iii)
authorize the insurer to settle my obligations to the credit provider, as a preferred creditor, at any time during the term of the credit agreement on the happening of the insured event.

Signed at [place] on this [day] of [month] 2006.

Consumer's signature

NATIONAL CREDIT REGULATOR

NOTICE IN TERMS OF SECTION 97(2) OF THE NATIONAL CREDIT ACT X

Name of Consumer

Identity Number

Physical Address Code: (.....)

Contact telephone number Code: (.....)

To:

Name of Credit Provider

Address Code: (.....)

Account Reference Number

Contact telephone number Code: (.....)

E-mail

I, the above named consumer hereby notify you in terms of Section 97(2) of the Act that:

(a)* My residential/business* address has changed to {insert address}

(b)* The goods subject to this credit agreement is/are* now situated at the following premises, namely
{insert address where goods are kept}

(c)* Possession of the goods subject to this credit agreement has been transferred to the following person:-

Full name of person who has possession of the goods

Physical address of person in whose possession goods are

(* delete which is not applicable)

Signed at [place] on this [day] of [month] 2006.

Customers Signature

NATIONAL CREDIT REGULATOR

NOTICE IN TERMS OF SECTION 97(3) OF THE NATIONAL CREDIT ACT X

From:

Name of Consumer

Identity number

Physical address

.....

Contact telephone number Code: (.....)

To:

Name of Credit Provider

Address

.....

Account reference number

Contact telephone number Code: (.....)

E-mail

And to:

The Sheriff of the High / Magistrate's* Court

Address

.....

I, the above named consumer hereby notify you in terms of Section 97(3) of the Act that the goods subject to this credit agreement is/are* ordinarily kept at the following address:-

Physical address of premises where goods are kept

.....

Name of landlord of premises where goods are kept (if applicable)

Address of landlord of premises (if applicable)

.....

Signed at [place] on this [day] of [month] 2006.

Consumer's signature

NATIONAL CREDIT REGULATOR

STATEMENT AS AT YY/MM/DD

From:

Consumer Name

Credit provider Name & trading name:

Physical address of credit provider:

Postal address of credit provider

Telephone number Code: (.....)

NCR Registration Number:

ID Number: Principal debt

Account number: Annual rate of interest:

Start date: (Monthly/weekly/Fortnightly) Installment

End date: Remaining installments:

Original term

STATEMENT OF ACCOUNT FOR PERIOD xx/xx/xx to yy/yy/yy:

DATE	DESCRIPTION	DEBIT	CREDIT	BALANCE
------	-------------	-------	--------	---------

Opening balance

(include the following information, if applicable:)

Payments received;

Fees levied;

Interest accrued;

Insurance costs levied;

Collections costs levied;

Default administration costs levied;

Legal fees levied;

CURRENT	30 DAYS	60 DAYS	90 DAYS +	ARREARS	OUTSTANDING BALANCE

PLEASE MAKE PAYMENTS INTO THE FOLLOWING BANK ACCOUNT BY NO LATER THAN DD/MM/YY:

.....

NATIONAL CREDIT REGULATOR

NOTICE OF CHARGES OR SERIES OF CHARGES LEVIED IN TERMS OF SECTION 124(2) OF THE NATIONAL CREDIT ACT 34 of 2005

Name of credit provider
 NCR registration number
 Account/reference number
 Contact telephone number Code: (.....)
 E-mail

To:

Name of consumer
 Identity number
 Address

Please take notice that in terms of your authorization dated the [insert date]
 the following charges/series of charges*, namely:-

Details of charge/s* [specify what the charges are for]

Details of the obligation the charge/s* is intended to satisfy

Specify whether the charge is a single or multiple charge

Date/s* charge/s* to be deducted on

Amount of the charge/s*

will be deducted from:-

(a)* the asset deposited by you or for your benefit and held by the credit provider or third party, [insert name of third party];

(b)* the amounts held by you and for your benefit under account number [insert account number]

by the credit provider or third party, [insert name of third party].

Please take notice further that the above charge/series of charges are in respect of the following obligation(s)/account(s) namely

Account number	Nature of account
.....
.....
.....

and is/are calculated as follows:- [specify how charges calculated]

Signed at [place] on this [day] of [month] 2006.

Signature of Credit Provider

(*delete which is not applicable)

NATIONAL CREDIT REGULATOR

CERTIFICATE OF FAILED ALTERNATIVE DISPUTE RESOLUTION IN TERMS OF SECTION 134(5)

PART 1 - CERTIFICATE OF DECISION

1. Date of certificate
2. Certificate reference
3. Details of alternative dispute resolution agent
 Title (Hon/Dt/Mr/Mrs/Miss/Ms) Full name
4. Trading name or division of agent (if applicable)
5. CIPRO number
6. Contact details of agent
 Telephone number (work) ()
 Telephone number (cellular) ()
 Fax number () Email address
7. Complainant's details:
 7.1 Full names
 7.2. CIPRO number
 7.3. Contact details of complainant
 Telephone number (work) ()
 Telephone number (cellular) ()
 Fax number () Email address
- 10 Respondent's details:
 10.1 Full name of respondent
 10.2. CIPRO number
 10.3. Contact details of respondent
 Telephone number (work) ()
 Telephone number (cellular) ()
 Fax number () Email address
11. Findings of the agent
12. Description and reason for process failure
13. Attachments of relevant documentation (specify)

PART 2 - DECLARATION BY AGENT

1. The alternative dispute resolution agent confirms that the information contained in this certificate is accurate and complete.
 Date: Name of signatory:
- Signature

NATIONAL CREDIT REGULATOR

COMPLAINT INITIATION FORM

(Initiating a complaint to the National Credit Regulator in terms of S 136 of the Act)

General Information

1. A complainant that wishes to submit a complaint must complete this form in full. For help in filing in this form, please phone the National Credit Regulator on
2. If you are a third party, completing this form on behalf of an individual, kindly refer to regulation XX for details on the documentation that should accompany this form.
3. The complaint form and the documentation must be submitted to the National Credit Regulator at the following address:
Block G
DTI Campus
77 Meintjie Street
Pretoria
or can be faxed to (012) xxx xxxx

Complaint Initiation Form

1. Name of Complainant:
2. ID/Co reg. No.
3. Date:
4. Address:
.....
5. Tel:
- 6.1 Institution to which the complaint relates:
- 6.2 Branch (if relevant):
- 6.3 Person representing institution:
7. Short description of complaint. Add pages as required:
.....
.....
8. I confirm that I want the National Credit Regulator to consider my complaint.
9. I understand that:
 - The National Credit Regulator will handle my complaint according to the requirements of the National Credit Act, 2005.
 - Confidential information may be considered by the National Credit Regulator in the process of handling my complaint.
 - The National Credit Regulator may need to communicate with other organisations in respect of the complaint question and may need to exchange information in this regard.
10. Should the National Credit Regulator require me to issue a statement under oath in respect of information contained in this form, I will do so.

Date: Place:

Name of signatory:

(Complainant or person duly authorised to act on the complainant's behalf - power of attorney complying with Regulation XX must be enclosed)

Signature of call centre operator in the event of the complaint being initiated by a telephone call.

Signature:

NATIONAL CREDIT REGULATOR

REFERRAL TO TRIBUNAL IN TERMS OF SECTION 137 (Application by NCR to Tribunal)

PART 1 - APPLICANT INFORMATION

1.Details of applicant from the National Credit Regulator

Title (Hon/Dr/Mr/Mrs/Miss/Ms) Full name

2.Division of applicant (if applicable)

3.Contact details of applicant

Telephone number (work) ()

Telephone number (cellular) ()

Fax number () Email address

PART 2 - APPLICATION DETAILS

1.Full name of participant / s

2.CIPRO number

3.Sector of industry (if applicable)

4.Application reason

- ☐ For an order resolving a dispute over information held by a credit bureau, in terms of section Part B of Chapter 4
- ☐ For a declaration that all or part of a credit agreement is unlawful in terms of section 89 or 90
- ☐ For an order compelling the delivery of a statement of account or to review a statement in terms of Part D of Chapter 5
- ☐ To review the conduct of a sale of goods in terms of section 129 or 131, or the distribution of proceeds from such a sale
- ☐ For leave to bring a complaint or a debt re-arrangement application directly before the Tribunal
- ☐ For an order condoning late filing

5.Application reason (other)

6.National Credit Regulator reference number (if applicable)

7.Date of application

8.Description of application

9.Order / relief sought

PART 3 - DECLARATION BY APPLICANT

1.The applicant confirms that the information contained in this application is accurate and complete.

Date: Name of authorised signatory:

Signature

PART 4 - LIST OF ATTACHMENTS

Application Forms	Completed	No of forms attached
Part 1 – Applicant Information
Part 2 - Application Details / Information
Part 3 – Declaration by Applicant
Part 4 – List of Attachments

2.Resolution authorising the signatory to sign the application form on behalf of the complainant (power of attorney)

3.Attach letter from respondent

4.Attach any extra details about the complaint in a separate document

Loan contract

Dispute letter

Credit agreement

Statement of account

Sale of goods form

Leave form

Other (specify)

Reference number (official use only)

NATIONAL CREDIT REGULATOR

NOTICE OF NON-REFERRAL ISSUED IN TERMS OF SECTION 139(1)(a) (In respect of non-referral of a complaint)

PART 1 - NON-REFERRAL NOTICE

1. Date of notice
2. Details of complainant
Title (Hon/Dr/Mr/Mrs/Miss/Ms) Full name
3. Trading name or division of complainant (if applicable)
4. Legal registration number
5. Contact details of applicant
Telephone number (work) ()
Telephone number (cellular) ()
Fax number () Email address
6. Section of Act the non-referral applies to
☐ section 141(1)(a)
☐ section 142(1)(a)
7. Description and reason for non-referral

PART 2 - DECLARATION BY NATIONAL CREDIT REGULATOR

1. The National Credit Regulator confirms that the information contained in this form is accurate and complete.

Date:

Name of signatory (duly authorised to act on behalf of the National Credit Regulator)

Signature:

NATIONAL CREDIT REGULATOR

REFERRAL TO TRIBUNAL IN TERMS OF SECTION 140(4) or 141(2) (Application by the National Credit Regulator / Complainant to the Tribunal)

PART 1 - APPLICANT INFORMATION

1. Details of registrant matter relates to:

Name of Registrant

Registrant's NCR registration number

2. Division of NCR referring matter / Name of Complainant

3. Contact details of person referring the matter on behalf of the NCR / Complainant:

Telephone number ()

Telephone number (cellular) ()

Fax number ()

Email address

PART 2 - REFERRAL DETAILS

1. Section of Act the referral applies to

☐ section 142 (1)

☐ section 142 (2)

☐ section 142 (3)

☐ section 143(1)

2. Reason for referral

3. Order / relief sought

4. Has leave of the Tribunal been obtained? (if applicable)

* If you have answered YES to item 8, please give details here

PART 3 - DECLARATION BY APPLICANT

1. The applicant confirms that the information contained in this application is accurate and complete.

Date:

Name of signatory (duly authorised to act on behalf of the National Credit Regulator)

Signature:

PART 4 - LIST OF ATTACHMENTS

Application Forms	Completed	No of forms attached
Part 1 – Applicant Information
Part 2 – Referral Details
Part 3 – Declaration by Applicant
Part 4 – List of Attachments

2.Resolution authorising the signatory to sign the application form on behalf of the complainant

3.Attach letter from respondent

4.Attach any supporting documentation and specify:

- 4.1
- 4.2
- 4.3
- 4.4
- 4.5

Reference number (official use only)

NATIONAL CREDIT REGULATOR

NOTICE OF APPLICATION IN TERMS OF SECTION 141(2)(a) OF THE NATIONAL CREDIT ACT X

In the Consumer Tribunal for the [insert area]CASE NO: X/X.....

In the matter of:- (insert name of applicant)APPLICANT

AND

[insert name of respondent / other interested party]RESPONDENT

TO: THE RESPONDENT [insert area / address]

AND TO: THE CLERK / REGISTRAR National Consumer Tribunal

AND TO: [insert name & address of all interested parties]

....."PER HAND/REGISTERED POST"

KINDLY TAKE NOTICE: that application will be made to the above Honorable Court on [day]the
[date]of [month] 2006 at [time]am

or so soon thereafter as the matter maybe heard for an order in the following terms:-

(a)* that this matter be referred to the Consumer Court of [insert area/address];

(b)* that this matter be referred to the National Consumer Tribunal, [insert address].

KINDLY TAKE NOTICE FURTHER THAT the Affidavit of the Applicant [insert Applicant's name]
attached hereto shall be used in support of this application.

KINDLY TAKE NOTICE FURTHER THAT the Applicant chooses the below mentioned address for service upon him/her* of all
notices and pleadings in this matter.

Signed at [place] on this [day] of [month] 2006.

Signature of Applicant

Full name and address of Applicant

(*delete which is not applicable)

NATIONAL CREDIT REGULATOR

NCR REGISTER OF REGISTRANTS IN TERMS OF SECTION 53(1) OF THE NATIONAL CREDIT ACT X

PART A CREDIT PROVIDERS:

Registrant's NCR registration number

Registrant's full name

Registrant's trading name (if applicable)

Registrant's identity number or CIPRO or other official registration number

Activities which registrant is permitted to engage in

Date of registration

Conditions of registration (if applicable)

Physical address

Telephone No. Fax No.

Email address

Contact person

Alterations of registration (if applicable)

PART B DEBT COUNSELLORS:

Registrant's NCR registration number

Registrant's full name

Registrant's trading name (if applicable)

Registrant's identity number

Activities which registrant is permitted to engage in

Date of registration

Conditions of registration (if applicable)

Physical address

Telephone No. Fax No.

Email address

Contact person

Alterations of registration (if applicable)

PART C CREDIT BUREAUS:

Registrant's NCR registration number

Registrant's full name

Registrant's trading name (if applicable)

Registrant's CIPRO or other official registration number

Activities which registrant is permitted to engage in

Date of registration

Conditions of registration (if applicable)

Physical address

Telephone No. Fax No.

Email address

Contact person

Alterations of registration (if applicable)

NATIONAL CREDIT REGULATOR

NATIONAL CREDIT REGISTER IN TERMS OF SECTION 53(1)(b) OF THE NATIONAL CREDIT ACT X

PART A: CREDIT BUREAUS REGISTERED PROVINCIALY

NCR REG NO
NAME OF CREDIT BUREAU
ADDRESS (Physical / postal address)
CONTACT DETAILS (Telephone / fax / email)
STATUS (Eg: current, cancelled, altered)

PART B: CREDIT PROVIDERS REGISTERED PROVINCIALY

NCR REG NO
NAME OF CREDIT PROVIDER
REGISTERED TRADING NAME
ADDRESS (Physical / postal address)
CONTACT DETAILS (Telephone / fax / email)
STATUS (Eg: current, cancelled, altered)

PART C: DEBT COUNSELORS REGISTERED PROVINCIALY

NCR REG NO
NAME OF DEBT COUNSELOR
IDENTITY NUMBER
ADDRESS (Physical / postal address)
PROVINCE LOCATED
CONTACT DETAILS (Telephone / fax / email)
STATUS (Eg: current, cancelled, altered)

NATIONAL CREDIT REGULATOR

APPLICATION FOR INFORMATION IN TERMS OF SECTION 14(c)(ii) OF THE NATIONAL CREDIT ACT

Name of the Applicant:

Address

Telephone number Code: (.....)

To : The National Credit Regulator

Address

Fax number Code: (.....)

Email address

I, the above mentioned Applicant, hereby request the following information
regarding the undermentioned registrant: {insert information required and reason for such request}

.....
.....
.....

Name of Registrant

NCR Registration number (if available)

Address of Registrant

.....

Signed at [place] on this [day] of [month] 2006.

Signature of Applicant

Full name of signatory

.....

NCR Form 35

And to : {insert name of the registrant}

Address

.....

I, the above mentioned natural person, in my capacity as{insert capacity}
of the above mentioned registrant hereby give notice to the National Credit Regulator and the Registrant that I have been
disqualified from individual registration in terms of Section 46(3) of the Act.

Signed at [place] on this [day] of [month] 2006.

Signature of individual registrant

Full name of signatory

NATIONAL CREDIT REGULATOR

REGISTER OF MARKETING OPTIONS IN TERMS OF SECTION 74(7)(a) OF THE NATIONAL CREDIT ACT X

Consumer's full name

Consumer's account number

Consumer's contact details

.....

Tick which marketing option was selected by the consumer

- ☐ Date option selected by consumer
- ☐ Consumer declined pre-approved annual credit limit increases
- ☐ Consumer opted to be excluded from telemarketing campaigns by or on behalf of the credit provider
- ☐ Consumer opted to be excluded from marketing or customer list sold or distributed by credit provider
- ☐ Consumer opted to be excluded from distribution of any mass sms or email messages

Name of credit provider

NCR registration number

Contact details

NATIONAL CREDIT REGULATOR

REGISTER OF AGENTS IN TERMS OF SECTION 163(2)(b) OF THE NATIONAL CREDIT ACT X

No.

Full name(s) and surname of agent

Agent's identity number

Date of appointment of agent

Details of activities which agent is authorized to conduct on behalf of credit provider

.....

.....

.....

.....

.....

.....

.....

Name of credit provider

Address

.....

NCR registration number

Contact telephone number Code: (.....)

NATIONAL CREDIT REGULATOR

SHAPE * MERGEFORMAT

Lender Name & Logo

Optional text or corporate id

Agent/employee's photo. Position & size mandatory

Agent:

Name:

ID No/CIPR or other:

Optional text or corporate id

National Credit Regulator's Logo. 22mm in diameter

NATIONAL CREDIT REGULATOR

COMPLIANCE REPORT - debt counselor

Submitted in terms of Regulation xx of the Regulations to National Credit Act x.

TO: THE NATIONAL CREDIT REGULATOR

XXXXXXXXXXXXXXXXXXXX

XXXXXXXXXX

XXX

PERIOD COVERED BY THE RETURN:

From: (dd/mm/yy)

To: (dd/mm/yy)

DEBT COUNSELOR'S NCR REGISTRATION NUMBER:

1.Name and Surname of Debt Counselor

2.Contact details

Telephone Number

Fax Number

Cell Phone Number

Email Address

PART 2: CERTIFICATION OF COMPLIANCE BY THE REGISTERED DEBT COUNSELOR

I, the undersigned (insert name of Debt Counselor* or person authorized to complete the return on behalf of Debt Counselor*)

.....
 in my capacity as the duly registered Debt Counselor*/ the

of the Debt Counselor* (insert capacity of person completing return on behalf of Debt Counselor) do hereby declare that I/the registered debt counselor* have/has* complied with the requirements of the National Credit Act and that I am/we are* not aware of any substantial non-compliance with these requirements for the period (dd/mm/yy) to (dd/mm/yy) (insert the period of this report).

1.1 Is the Debt Counselor's certificate of registration with the National Credit Regulator is displayed prominently at the business premises situate at (insert address)

and which is registered with the National Credit Regulator? Yes No

If not, provide reasons:

1.2 Have the following documents been signed by the consumer and are contained in the files of each individual consumer ? Yes No

1.2.1 The application form for debt restructuring; Yes No

1.2.2 The debt assessment and client in-take form; Yes No

1.2.3 The social contract; Yes No

1.2.4 The power of attorney; Yes No

1.2.5 A copy of the consumer's identity document; Yes No

A copy of the consumer's salary advice/proof of income for three consecutive months; Yes No

Copies of the consumer's bank statements for three consecutive months (if any); Yes No

A print-out from the credit bureau to verify the consumer's financial history; Yes No

Proof of the consumer's expenses including all receipts/statements of account, credit agreements, etc; Yes No

Proof of any letters of demand and any court processes instituted against the consumer including but not limited to summons, default judgments, warrant of executions, etc. Yes No

If the answer to any of the above questions was 'no', please provide reasons:

.....

1.3 The terms and conditions of the documents referred to in items 1.2.3 and 1.2.4 have been explained to the consumer prior to the signature of the said documents.

Complete and accurate records are maintained, reflecting:

The debt assessment done in relation to each individual consumer applying for debt restructuring;

The number of consumers serviced;

The number of cases pending in each instance where the:

Debt Counselor is awaiting reply from credit provider;

Debt Counselor awaiting further information from consumer;

The number of case files closed in each instance where:

The case has been finalized;

The consumer absconded/renege

The consumer requested withdrawal from the programme

The category of age group of consumers serviced.

The category of gender of consumers serviced.

The category of race of consumers serviced.

The category of gross income of consumers serviced.

The category of employment sector of consumers serviced.

The total number of consumers that defaulted under the programme.

The category of debts incurred by the consumers serviced.

The total number of consumers referred to other organizations and reasons for the referral.

Signed at [place] on this [day] of [month] 2006.

Signature of Debt Counselor or authorized representative

Name of Debt Counselor or authorized representative

NATIONAL CREDIT REGULATOR

DRP RETURN NUMBER- {assign form number}
 QUARTERLY STATISTICAL RETURN VERSION {No} – RELEASED [DATE]

PART 1: PERSONAL DETAILS OF REGISTERED DEBT COUNSELOR

TITLE [TICK THE APPROPRIATE ONE] : MISS/MRS/MR

NAME & SURNAME

IDENTITY NUMBER

PHYSICAL ADDRESS

NCR REGISTRATION NUMBER

PERIOD COVERED BY RETURN

FROM : (dd/mm/yy)

TO: (dd/mm/yy)

PART 2: REPORTING PERIOD ANALYSIS

	CURRENT PERIOD	YEAR TO DATE
2.1 Total No of clients serviced:		
New clients
Clients carried forward from previous return
2.2 Total number of enquiries:		
current quarter
previous quarter
2.3 Total number of repeat visits from existing clients:		
Current quarter
Previous quarter
2.4 Total number of matters finalized:		
Current quarter
Cumulatively

NCR Form 42

2.5.1 Total number of matters pending:

Current quarter	.....	.....
Previous quarter	.....	.....

2.5.2 Reasons:

% per category

- | | |
|--|-------|
| i. awaiting reply from credit providers on proposed negotiations | ..... |
| ii. awaiting instructions from consumer | ..... |
| iii. other (specify) | ..... |

2.6. Total number of matters closed:

2.6.1 Current quarter

Previous quarter

2.6.2 Reasons:

% per category

- | | |
|--|-------|
| i. consumer reneged/absconded | ..... |
| ii. consumer requested withdrawal from programme | ..... |

2.6.3 Reasons for withdrawal from programme:

% per category

- | | |
|---|-------|
| i. consumer received financial aid from family | ..... |
| ii. consumer re-arranged directly with creditor | ..... |
| iii. other (specify) | ..... |

Category of age of clients serviced:

Age	No. of clients	% of clients
21- 25
26- 35
36- 45
46- 55
56- 65

Category of gender of clients serviced:

Gender	No. of clients	% of clients
Male
Female

Category of race of clients serviced:

Race	No. of clients	% of clients
Asian
African
Coloured
White

Category of gross income* of clients:

Gross	No. of clients	% of clients
R1 to R1000
R100 to R1500
R1501 to R3000
R3001 to R4000
R4001 to R5000
R5001 to R6000
R6001 to R7000
R7001 to R10 000

[*includes income received from employer, maintenance, child support grant, old age pension, other pension/provident fund, etc]

Category of sector in which clients are employed:

Sector	No. of clients	% of clients
Domestic
Civil service
Retail
Mining
Hospitality
Motor industry
Financial services
Non-Governmental
Other (specify)

NCR Form 42

2.15 Referrals to other organizations:

Reason for referral	No of clients referred
To apply for old age pension
To apply for maintenance
To apply for child support grant
To apply for disability grant
Other (specify)

PART 3: CLIENT RISK ANALYSIS

Total number of clients who defaulted:

	No of clients	% of clients
Current quarter
Cumulatively

PART 4: DEBT CATEGORY ANALYSIS

Category of debts:

Debt	No. of clients Owing such debts	% of clients Owing such debts
Micro Loan
Retail account
Insurance policies
Municipal accounts
Maintenance orders
Medical
School fees
Cell phone
Other (specify)