1. Registered Person Particulars

<table>
<thead>
<tr>
<th>a. Debit Code</th>
<th>b. Assessment Period From</th>
<th>c. Client Type</th>
<th>d. To</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Benefactor</td>
<td>Dealer Producer</td>
</tr>
</tbody>
</table>

2. Declaration of Temporary Exports for this period

<p>| a. SAD 500 (Customs declaration form) Information |
|---------------------------------|-------------------------------------------------|</p>
<table>
<thead>
<tr>
<th>i) SAD number</th>
<th>ii) Line Number</th>
<th>iii) Date</th>
<th>iv) Office</th>
<th>v) Country of Destination</th>
<th>vi) Exemption Certificate Number</th>
<th>vii) Exemption Certificate Date</th>
<th>viii) Value</th>
</tr>
</thead>
</table>

b. Total value

(x) Acquitted

Yes/No
# DIAMOND EXPORT LEVY

## Relief for Election Purchases

(Section 6 of the Diamond Export Levy (administration) Act 2007 (Act No. 15 of 2007))

### 1. Registered Person Particulars

- **Client Code:**
- **Client Type:**
  - Beneficiary
  - Dealer
  - Producer
- **Assessment Period:**
  - From
  - To

### 2. Declaration of Exports for this period

<table>
<thead>
<tr>
<th>i) Number</th>
<th>ii) Line</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

- **iii) Date:**
- **iv) Office:**
- **v) Country of Destination:**
- **vi) Customs Export Value:**
  - (Section 2(c) of the Customs & Excise Act, 1964 (Act No. 31 of 1964))
- **vii) Fair Market Value:**
  - (Section 8(12) of the Diamond Act, 1956 (Act No. 55 of 1956))
- **viii) Election Reference number(s):**
- **ix) Election Reference date(s):**

<table>
<thead>
<tr>
<th>i) Number</th>
<th>ii) Line</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

- **b. Total Customs Value:**
- **c. Total Fair Market Value:**

---

**Staatskongerant, 31 Oktober 2008**

No. 31560 29
1. Registered Person Particulars

- Client Code: 
- Assessment Period: From:  
- To:  
- Client Type:  
- Beneficiary:  
- Producer:  

Note: If the space provided on this schedule is insufficient, the information must be summarised on a separate page, which must be attached to this form.

2. Declaration of Exemption particulars for Producers

a. Sales particulars for this period:

<table>
<thead>
<tr>
<th>i) Invoice number(a)</th>
<th>ii) Date</th>
<th>iii) Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

b. SAD 500 (Customs declaration) for this period:

<table>
<thead>
<tr>
<th>i) Number</th>
<th>ii) Line Number</th>
<th>iii) Date</th>
<th>iv) Office</th>
<th>v) Country of destination</th>
<th>vi) Customs Export Value (Section 72 of the Customs &amp; Excise Act, 1944 (Act No. 91 of 1944))</th>
<th>vii) Fair Market Value (Section 61(3) of the Diamond Act, 1985 (Act No. 36 of 1985))</th>
<th>viii) Exemption certificate number</th>
<th>ix) Exemption certificate date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

- Total Value: 

3. Declaration of Exemption particulars for Beneficiary

<table>
<thead>
<tr>
<th>i) Number</th>
<th>ii) Line Number</th>
<th>iii) Date</th>
<th>iv) Office</th>
<th>v) Country of destination</th>
<th>vi) Customs Export Value (Section 72 of the Customs &amp; Excise Act, 1944 (Act No. 91 of 1944))</th>
<th>vii) Fair Market Value (Section 61(3) of the Diamond Act, 1985 (Act No. 36 of 1985))</th>
<th>viii) Export Permit number (section 71F) of the Diamond Act, 1985 (Act No. 36 of 1985)</th>
<th>ix) Export Permit Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
DIAMOND EXPORT LEVY

Registration for Diamond Export Levy


1. Notes for the completion of this form

1.1. Please indicate with an "X" in the applicable box.
1.2. If the space provided on this form is insufficient, the information must be furnished on a separate page, which must be attached to this form.
1.3. Where an asterisk (*) appears, delete which ever is not applicable.
1.4. Please note that a separate application form must be completed for each client type.

2. Existing SARS and Regulator registration / licensee particulars

- SARS Custom client code number
- Regulator License number - Beneficiary
- Regulator License number - Dealer
- Regulator Registration number - Producer

3. Client type

- Beneficiary
- Dealer
- Producer

4. Purpose of application

- New registrant / renewal
- Amending existing information
- Cancellation

5. Assessment periods

- My assessment periods for returns in respect of Section 4(2) of the Diamond Export Levy Act No. 14 of 2007 as follows:

<table>
<thead>
<tr>
<th>From</th>
<th>To</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

6. Applicant particulars

- Name of applicant
- Business address
- Postal address
- Postal Code
- Contact numbers: Business telephone, Cellular phone, Facsimile
- Business e-mail address
7. Trading particulars

Please supply all trade names and physical addresses if the business is conducted from a different address or under a different name as stated in part 6 above.

- Trade name: [Blank]
- If currently registered with SARS, please state allocated customs client code number: [Blank]
- Physical address: [Blank]
- Postcode: [Blank]

8. Nature of business

- Company: [Blank]
- Close Corporation: [Blank]
- Trust: [Blank]
- Sole Proprietor: [Blank]
- Partnership: [Blank]
- Individual: [Blank]
- Co-Op: [Blank]
- Public Authority: [Blank]

- Company registration number: [Blank]
- Close corporation registration no: [Blank]
- Trust registration number: [Blank]
- Other number and specialty: [Blank]

9. Registration particulars

a. SARS Revenue Identification numbers:
- VAT registration number: [Blank]
- Income Tax reference number: [Blank]
- PAYE registration number: [Blank]
- SDL number: [Blank]
- UIF number: [Blank]

b. Particulars of *Solo Proprietor and/or all *Partners(es) / *Managing Director / *Financial Director / *Director(s) / *Member(s) / Trustee(s):

- Initial(s): [Blank]
- Surname: [Blank]
- Capacity: [Blank]
- RSA ID number: [Blank]
- Passport number: [Blank]
- Residential address: [Blank]
- Postcode: [Blank]

- Institute(s): [Blank]
- Surname: [Blank]
- Capacity: [Blank]
- RSA ID number: [Blank]
- Passport number: [Blank]
- Residential address: [Blank]
- Postcode: [Blank]
10. **Contact person** – Particulars of person who can be contacted regarding this application

- **Surname**
- **First name(s)**
- **Capacity**
- **Business telephone**
- **Cellular phone**
- **Facsimile**
- **Contact number(s)**
- **Business e-mail address**

11. **Accountant / Accounting firm particulars**

- **Name of accountant / Accounting firm**
- **Particulars of the accountant / auditor of the accounting office**
  - Initial(s) **Full name(s)**
  - **Surname**
  - **Business address**
- **Postal code**
- **Posta address**
  - **Postal code**
  - **Business telephone**
  - **Cellular phone**
  - **Facsimile**
- **Contact number(s)**
- **Business e-mail address**

12. **Authority**

I, We, name of applicant, hereby represented by 1, being duly authorised thereto by virtue of –

(a) *a resolution passed at a meeting of the Board of Directors held at__ on the__ day of__ or

(b) *the express consent in writing of all members of the close corporation / partners of the partnership / trustees of the trust; or

(c) *being a person having the management of any other association; or

(d) *delegated officer of an organ of state,

13. Cancellation of Registration

I hereby declare that all my liabilities under this Act have been met and apply for cancellation in terms of sections 31(1) and (2) of this Act.

Initiai & Surname          Signature          Capacity          Date (CCYY-MM-DD)

14. Declaration

I hereby declare that the particulars in the application and all enclosures are true and correct and undertake to inform the South African Revenue Service immediately of any changes in the particulars furnished in the application.

Initiai & Surname          Signature          Capacity

Date (CCYY-MM-DD)

15. Originals or certified copies to accompany the application

a) In the case of a producer, a copy of the document in terms of which the Regulator issued the producer concerned with a unique registration number as prescribed in the Regulations to the Diamonds Act;
b) In the case of a dealer or diamond beneficiator, a copy of the licence issued by the Regulator to the dealer or diamond beneficiator concerned in terms of the provisions of the Diamonds Act;
c) In the case of the holder of a permit, a copy of such a permit in terms of the provisions of the Diamonds Act;
d) A tax DSP in respect of any licence described in section 8 of the Administration Act.

16. For SARS use

File number
Registration number
District Office
Date
# DIAMOND EXPORT LEVY

**Departmental Diamond Export Levy**

<table>
<thead>
<tr>
<th>Code</th>
<th>Levy Amount</th>
<th>Code</th>
<th>Penalty Amount</th>
<th>Code</th>
<th>Interest Amount</th>
<th>Amount Due</th>
</tr>
</thead>
<tbody>
<tr>
<td>640</td>
<td></td>
<td>641</td>
<td></td>
<td>642</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**REMARKS**

Notice of Assessment Reference No.:

Date:

Place of Issue:


Name of Officer (Printed)

Signature of Officer
**Diamond Export Levy**

**Voucher of Correction: Departmental**

<table>
<thead>
<tr>
<th>Code</th>
<th>Levy</th>
<th>Amount</th>
<th>Code</th>
<th>Penalty</th>
<th>Amount</th>
<th>Code</th>
<th>Interest</th>
<th>Amount Due</th>
</tr>
</thead>
<tbody>
<tr>
<td>640</td>
<td></td>
<td></td>
<td>641</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>640</td>
<td></td>
<td></td>
<td>641</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>640</td>
<td></td>
<td></td>
<td>641</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Remarks**

Date:

Place of Issue:

Original Notice of Assessment:

**SARS Customer Personal Identification:**

**Name of Officer (Printed):**

**Signature of Officer:**