

**Complete every field.** Email the signed form to [sales@kevlar.africa](mailto:sales@kevlar.africa). An agent code is issued once vetting is approved; commission cannot be paid before then. Questions: [sales@kevlar.africa](mailto:sales@kevlar.africa)

**A APPLICATION TYPE**

- ☐ Sales agent (individual)   ☐ Sales agency (company)   ☐ Reseller   ☐ Strategic / white-label partner\*  
☐ Installation subcontractor   ☐ Referral partner (introducer only)

\* Strategic / white-label status is subject to a 500 live-channel qualification and a signed surety and cession over the onboarded client base, prepared by Kevlar's attorneys.

**B COMPANY / ENTITY**

|                        |                                                          |                     |  |
|------------------------|----------------------------------------------------------|---------------------|--|
| COMPANY / TRADING NAME |                                                          | REGISTRATION NUMBER |  |
| VAT REGISTERED         | <input type="checkbox"/> Yes <input type="checkbox"/> No | VAT NUMBER (IF YES) |  |

**C DIRECTORS**

|                      |  |           |  |
|----------------------|--|-----------|--|
| DIRECTOR 1 FULL NAME |  | ID NUMBER |  |
| DIRECTOR 2 FULL NAME |  | ID NUMBER |  |
| DIRECTOR 3 FULL NAME |  | ID NUMBER |  |

List all directors per CIPC. More than three: attach a separate signed page.

**D PHYSICAL ADDRESS**

|                  |  |
|------------------|--|
| PHYSICAL ADDRESS |  |
|------------------|--|

**E CONTACT DETAILS**

|                |  |               |  |
|----------------|--|---------------|--|
| CONTACT PERSON |  | EMAIL ADDRESS |  |
| CELL PHONE     |  | LANDLINE      |  |

**F BANK DETAILS FOR COMMISSION PAYMENTS**

|                |  |                     |  |
|----------------|--|---------------------|--|
| BANK           |  | ACCOUNT HOLDER NAME |  |
| ACCOUNT NUMBER |  | BRANCH CODE         |  |

The account holder name must match the company / entity or signatory named on this form. Commissions are paid to this account only.

**G REQUIRED ATTACHMENTS**

- ☐ Clear copy of the signatory's ID document  
☐ Bank confirmation letter or bank-stamped statement, not older than 3 months  
☐ Proof of the company's physical address (utility bill or lease, not older than 3 months)  
☐ Resellers and strategic / white-label partners: copy of a current signed lease for physical office premises  
☐ Installation subcontractors only: current manufacturer installation certification for every camera brand installed (e.g. Hikvision, Dahua, Axis, Avigilon, Bosch), OR reference letters from at least 3 clients for vetting of workmanship

**H DECLARATION, CONSENT & SIGNATURE**

I confirm the information above is true and correct and that I am authorised to sign for the entity named. I consent, in terms of POPIA, to Kevlar Coastal (Pty) Ltd verifying this information and conducting identity, reference, credit and criminal-record checks on the entity, its directors and its signatory for vetting purposes, and to retention of this form under Kevlar's POPIA retention policy.

|           |  |           |  |
|-----------|--|-----------|--|
| FULL NAME |  | SIGNATURE |  |
| DATE      |  | PLACE     |  |