

APPLICATION FOR CERTIFICATE OF FITNESS

CF 05

To be completed in the presence of the Commissioner of Oath.

I, _____ the undersigned, ID / passport number _____
hereby declare that the business (insert the business name) _____
ceased to operate on (date) _____ and I hereby like to deregister the business.

BUSINESS DETAILS

Erf _____ Suburb _____ Expiry date _____
Reasons for deregistration: _____

Applicant's signature: _____ Date: _____

FOR THE COMMISSIONER OF OATH

Sworn before me at: _____ (place) on this _____ day of _____ 20 _____
Commissioner of Oath Name: _____
Signature: _____
Date Stamp: _____

FOR OFFICE USE

The Certificate of Fitness for the abovementioned business was not renewed for year/s: _____ (indicate the years).

NB: Outstanding fees to be paid before the business is deregistered; no deregistration will be done if outstanding fee is not paid.

Confirm the outstanding fees with the Section Head: Business Registration