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South African Institute of Professional Accountants

**RIAAN EKSTEEN**  
PROFESSIONAL ACCOUNTANTS AND FINANCIAL CONSULTANTS

**PLEASE COMPLETE  
ELECTRONICALLY**

### INFORMATION REQUIRED OF THE INDIVIDUAL

Surname:

Full names :

Initials :

Identity number :

Passport number :

Date of Birth

Passport Country (e.g. South Africa = ZAF)

Trading as :

Cell phone number :

Alternative contact number :

Physical address :

Postal code:

Postal address:

Name of Auditors / Accountants:

Financial Year End: (usually end of February)

Email:

**Bank Particulars :**

Name of bank :

Branch Code :

Account Number :

Type of Account :

### **SARS Registered Details :**

Tax number:

Registered :

Provisional Tax registered :

VAT NO:

Registered :

PAYE no:

Registered :

UIF NO:

Registered :

Compensation Fund No:

Registered :

**E-filing Profile Login Name :**

**E-filing Profile Login Password :**

### **Marital Status**

#### **Spouse Details**

Surname:

Full names :

Initials :

Identity number :

Passport number :

Passport Country (e.g. South Africa = ZAF )