

APPLICATION FOR ALTERATION OF REGISTRATION DETAILS: CHANGE OF SURNAME
1 APRIL 2018 TO 31 MARCH 2019

26 Victoria Link Road, Route 21 Corporate Park, Nellmapius Road, Irene. Postal Address: P O Box 40510, Arcadia, 0007
Tel: +27 (0)12 345 6360. Fax: +27 (0)12 345 6369. E-mail: registration2@savc.org.za / registration@savc.org.za.
Website: www.savc.org.za

PLEASE NOTE:

- A certified copy of your marriage certificate and proof of payment must accompany this form.
- Cheques must be crossed and made out to the SAVC, or alternatively be paid into the SAVC bank account: **ABSA, Hatfield Branch (Branch Code 335 545), Account No. 020166762.**

Please use your maiden surname, initials and reason for payment reference.

THIS FORM IS TO BE FAXED OR E-MAILED AND SENT BY SURFACE MAIL A COPY ALONE IS NOT ACCEPTABLE

ON RECEIPT OF THE ORIGINAL REGISTRATION CERTIFICATE, or a PHOTO OF THE DESTROYED CERTIFICATE, a NEW REGISTRATION CERTIFICATE WILL BE ISSUED

Change of Surname: **Please attach proof of payment of R 88.00**

Please complete this form in block letters.

- Maiden surname: _____
- Married surname: _____
- First Names: _____
- ID number: _____
- Addresses: _____

POSTAL	EMPLOYER	EMPLOYMENT SECTOR
Code:		

6. Tel: (W) _____ (H) _____

E-mail: _____ Cell: _____ Fax: _____

7. Money paid: R _____ **If paid into bank account,**

8. Have you been prosecuted / convicted of a criminal offence or been dismissed from employment.

Yes _____ No _____. If YES, please furnish the particulars.

I declare that the above information is true and correct and that I have never been discharged from a position of trust because of improper conduct and that I have never been convicted of blackmail, bribery, theft, fraud, forgery or the uttering of a forged document or perjury and been sentenced to imprisonment without the option of a fine.

ANY DISHONESTY IN THE COMPLETION OF THIS FORM WILL BE CONSIDERED A SERIOUS OFFENCE

SIGNATURE

DATE