

# NORTH WEST DEVELOPMENT CORPORATION (PTY) LTD



## IRREVOCABLE OFFER TO RENT

This offer is subject to ITC check

### 1. PERSONAL/BUSINESS PARTICULARS

NEW LEASE / RENEWAL *(Please tick)*

I/We: .....

Identity Number/Registration Number: .....

Trade Name: ..... VAT Number: .....

Telephone Number: ..... Facsimile Number: .....

E-mail Address: ..... Cell Number: .....

Represented by: ..... Postal Address:.....

.....

Directors / Partners / Members & Identity Numbers: .....

.....

.....

OFFER TO RENT AS FOLLOWS:

### 2. BANK DETAILS

Name of Bank: ..... Branch Name: .....

Account Number: ..... Account Type: .....

Account Holder: ..... Bank Code: .....

### 3. BALANCE SHEET DETAILS

	<u>Investments</u>		<u>Liabilities</u>	
Machinery/Equipment:	R .....	Loans:	R .....	
Raw Material/Stock:	R .....	Creditors:	R .....	
Debtors:	R .....	Owners Equity	R .....	
Working Capital:	R .....	Other:	R .....	
Total:	R .....	Total:	R .....	

_____	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%; text-align: center;">Black</td> <td style="width: 33%; text-align: center;">White</td> <td style="width: 33%; text-align: center;">Others</td> </tr> <tr> <td colspan="3" style="text-align: center;">Male</td> </tr> </table>	Black	White	Others	Male			<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%; text-align: center;">Black</td> <td style="width: 33%; text-align: center;">White</td> <td style="width: 33%; text-align: center;">Others</td> </tr> <tr> <td colspan="3" style="text-align: center;">Female</td> </tr> </table>	Black	White	Others	Female			<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%; text-align: center;">Black</td> <td style="width: 33%; text-align: center;">White</td> <td style="width: 33%; text-align: center;">Others</td> </tr> <tr> <td colspan="3" style="text-align: center;">Disabled</td> </tr> </table>	Black	White	Others	Disabled		
Black	White	Others																			
Male																					
Black	White	Others																			
Female																					
Black	White	Others																			
Disabled																					
Total Job Creation																					

### 4. PROPERTY DETAILS

Workshop/Factory/Shop/Flat/House/Office/Stall: .....of Erf No. ....of Township .....

Total Area:.....m2 of usable area: .....m2

For the purpose of: .....

On the following basic terms, the basic rental and operating costs payable during the initial period of the lease shall be as follows:

Basic Rental: .....m2 @ R ...../m2 = R .....per month excl. VAT

Parking:.....m2 @ R ...../m2 = R .....per month excl. VAT

Escalation rates, compounded annually, at the following percentages:

Basic Rental: ..... Renewal Period (Three months prior to expiry): .....

Moratorium: From(date) ..... To (date) .....

Commencement Date: ..... Expiry Date: .....

Lease Period: ..... Three (3) months rental deposit: R .....

Domicilia Citandi Et Executandi: ..... Top up deposit (Renewal): R .....

..... Stamp Duties: R .....

..... Document Cost: R .....

.....

Special Conditions to be included into the lease (Surety): .....

.....

.....

.....

..... Pg.1/3-IOR-NWDC(Pty) Ltd 270829

**5. PERSONAL DETAILS (Sole Proprietor)**

Title (Mr/Mrs/Ms/Dr/Prof): ..... Surname: .....

Names: ..... SA Citizen: .....

Home Address: ..... (If No which country): ..... 

Yes	No
-----	----

..... Identity Number: .....

How long have you stayed in this address: ..... E-mail Address: .....

Previous Address: ..... Postal Address: .....

.....

.....

**6. MARITAL STATUS**

Single	Married	Widow	Separated	Divorced
--------	---------	-------	-----------	----------

 Married 

ANC	COP	OTHER
-----	-----	-------

Date Married: .....

Spouse Name: .....

Number of dependants: ..... Identity Number: .....

**7. EMPLOYMENT DETAILS**

Name & Address of Employer: (Self) ..... (Spouse) .....

.....

.....

Occupation: ..... Occupation: .....

Employment No.: ..... Employment No.: .....

Period Employed: ..... Period Employed: .....

Salary per month: ..... Salary per month: .....

**8. INSURANCE DETAILS**

Name of Company: ..... Branch Name: .....

Type of Policy: ..... Surrender Value: .....

Policy Number: ..... Up to date: 

Yes	No
-----	----

Monthly Premium: R ..... May be ceded: 

Yes	No
-----	----

**9. HOME OWNERSHIP**

Do you own a house? 

Yes	No
-----	----

 In your name? 

Yes	No
-----	----

 or Spouse name? 

Yes	No
-----	----

Stand Number: ..... Town/Suburb: .....

Date purchased: ..... Rent/Bond: .....

Purchase Price: R ..... Current Balance: .....

Bond/Rent payment per month: R ..... Bond Holder: .....

Address: ..... Account Number: .....

..... Landlord: .....

.....



**17. ROUTE FORM**

Compiled by: Tenant Coordinator		
Approved: Area Manager		
Checked by: Senior Credit Controller		
Received by: Securities Officer		
Captured by: Property Admin Officer		
Contract drawn up, send to Regions		
Signed contract received at H/O		
Submitted for MD signature		
Contract bound and filed		