

PEC Utility Management (Pty) Ltd

Company Reg No 2004/032820/07

3 Tetra Street | Triangle Farm | Stikland | Cape Town

PO Box 3157 | Durbanville | 7551

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pecutilities.co.za clientservicescpt@pecgroup.co.za



SMART PREPAID E-WALLET AGREEMENT FORM - BUSINESS

Please complete and submit this agreement 3 business days before electricity is required, together with clear copies of the following documents:

- Copy of the authorised representative's ID or passport & company proxy
- Company registration documents & ID document/s of owner/s or director/s
- Signed Terms & Conditions (attached hereto)

Documents can be faxed or emailed to: clientservicescpt@pecgroup.co.za or (f) 021 949 0241. Kindly confirm receipt thereof. Partially completed forms may result in electricity not being connected.

BANKING DETAILS:

PEC Utility Management (Pty) Ltd | ABSA Bank | Branch code 632 005
Current account | Account number 4088722810

PLEASE USE REFERENCE:

16 digit wallet number

OFFICE USE

New Account No Primary BP No FB RC

Occupant Status Owner Tenant

Entity Type Close Corporation (Pty) Ltd Public Company Co-Operative Sole Proprietor
 Body Corporate Trust Consortium Government Partnership
 Section 21 Church Foreign Entity

Registered Name

Trading As

Registration No
(ID if Sole Proprietor or Partnership)

Country of Registration

VAT/TIN No

AUTHORISED REPRESENTATIVE

Title Mr Mrs Ms Dr Prof Initials

Full Names

Surname

Identification Type RSA ID Passport Temporary ID (E.G. Refugee ID)

Identification No Identification expiry date

Country of Issue

Position (MD, FD, Owner, etc.)

Email Address

Landline No Cell No

FINANCE DEPARTMENT CONTACT

Name & Surname

Role in Company Contact No

Email Address

FINANCE DEPARTMENT CONTACT CONT.

Physical Address

 Code

City

Province

Country

Postal Address

 Same as physical Code

City

Province

Country

COMPANY ADDRESS WHERE METER/S ARE LOCATED

Building Name

Unit No

Physical Address

 Code

Suburb

City

Province

Country

Occupation Date

Switch on Date

Cellphone No

*Of person responsible for payments and/or pre-paid management
All notifications will be sent to this number*

Email Address

1. I/We hereby confirm that I have the authority to complete this application, and certify that the information provided in this form is correct.
2. I/We accept that any false representation or information may lead to the immediate termination of services that may be rendered to the applicant in any agreement entered into with the Service Provider as a result of this.
3. I/We hereby indemnify PEC Utility Management (Pty) Ltd, it's owners and staff from any form of liability that may arise as a result of incorrect information provided by me/us.
4. I/We have read and understood the contents of this agreement, and agree to its Terms & Conditions.

Signed on this (day) of (month) 20 (year)

Signature

Full Names & Surname (PLEASE PRINT)

Position in Company

Department