

Eswatini Revenue Service

CUSTOMS & EXCISE DEPARTMENT

Portion 419 of Farm 50, Along MR103, Ezulwini



Postal Address: PO Box 5628 Mbabane Eswatini

Tel: (+268) 2406 4000

Contact Centre: (+268) 2406 4050

Website: www.ers.org.sz

CE185

APPLICATION FORM FOR REGISTRATION/LICENSING

Notes for completion of the form

1. Please indicate with an "X" in the applicable box.

1. BUSINESS/PERSONAL PARTICULARS

- 2. If the space provided on form CE185 and applicable annexure (s) is insufficient, the information must be furnished on a separate page, which must be attached to the form CE185 and the annexure.
- 3. Where the asterisk(*) appears, delete whichever is not applicable
- 4. Please reflect the relevant ERS client number, warehouse number or rebate user number when applying for the amendment of existing information or for a total cancellation per client type.
- 5. Please take note that a separate application form must be completed for each client type.
- 6. Please complete Annexure CE110 where security must be furnished.
- 7. Please complete Annexure CE49A.02 for registration as an exporter.

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Registered Name of Business/Applicant:	Į	H		T		H			F	4	P
Business Address (street name)									T		
Building Name (Including Floor Number)											
Town:											
Business/Personal Contacts	4		ŢŢ						F		
Email							1	<u></u>			
2. NATURE OF BUSINESS (mark with "	X" where a	pplicable)									
2. NATURE OF BUSINESS (mark with ** Company Close Corporation	X" where a		v	Propri	etor	Pa	rtnersl	hip	Ind	ividua	I
	Trus		Sole	Propri Other		Pa	rtnersl	hip	Ind	ividua	ı
Company Close Corporation	Trus	st [Sole			Pa	rtnersl	hip	Ind	ividua	
Co-op Close Corporation Co-op Public Authority	Trus	st [Sole			Pa	rtnersl	hip	Ind	ividua	
Company Close Corporation Co-op Public Authority Company Registration Number	Trus	st [Sole			Par	rtnersl	hip	Ind	ividua	

ustoms Clien	t Number:																
currently registere	ed/licensed with Custo	oms)															
. PURPOSE	OF APPLICA	ATION	("X" whe	ere app	olicable)												
ew Registrati	on/ Licensee or	Renewa	al		mendr	ment	of exi	sting	inforr	matio	n		Cand	cella	ition		
. CLIENT T	YPES																
REGISTRAT	ION (section 5	51)					4B. L	ICEN	NSINC	3 (se	ction	1 60,6	31,62	2,63	and	64)	
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Exporter for						- 6-			ufactu			hous	е				
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	exporter for EU-				-				ial St			reho	use				
	r GSP(various	countrie	es)		-+		_		ring A	_							
Exporter for									over c			bon	d				
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Exportor to	r SACU - MER	000011															
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Email address			
Cellphone No:			
Capacity			
Capacity			
Please indicate w a) Has contrave b) Has failed to c)Has been convid) Has been core e) Has made an material fact which purpose under the	TION REGARDING CONTRAVENTIONS AND OTHER MATTERS. whether during the preceding five years, the business entity: ned or failed to comply with the provision of the Act comply with any condition, obligation or other requirement imposed by the Commissioner icted of any offence under the Act, invicted of any offence involving dishonesty by false or misleading statement in any material respect or omitted to state any with was required to be stated in any application for registration or for any other and Act. insolvent or in liquidation.	YES YES YES YES YES YES YES	NO NO NO NO
 Any applicant vertent, without and attached to 	may, where it is contended in respect of paragraphs (a) and (b) that the contravention or fraudulent intent or gross negligence a submission to this effect should be furnished on a the application.	failure was	inad-
9. DECLARAT	ION:		
1		here	by:
a) Declare that tb) Undertake to:	he particulars in the application and all enclosures are true and correct, and		
	ratini Revenue Service immediately of any changes in the particulars fumished in the ap ch customs and excise laws and procedures.	plication	
	d Surname Status/Capacity e.g. Director		
Signatu	re Date & Place		
10. FOR OFFI	CIAL USE		
Registration l	Number		
License Date			