

5th Floor 296 Kent Avenue Randburg Johannesburg
P O Box 3337 Cramerview 2060
South Africa
DX 147 Randburg
Tel +27 (0)11 521 4000
Sales Fax : +27 (0)11 521-4413
Claims Fax : +27 (0)11 521-4420
Admin Fax : +27 (0)11 521 4002
www.tic.co.za

Return to: _____
Fax : + 27 11 521 4002

Selling Application Form:

Date : _____

Company Name

Registration Number

Broker ? : Y / N

Travel Agent ? : Y / N Other (specify: _____)

Postal address

Physical Address

Tel (Code + Number) _____

Docex Number _____

Fax (Code + Number) _____

ACCOUNTS CONTACT DETAIL

Name _____

Tel (Code + Number) _____

Fax (Code + Number) _____

E-mail Address _____

BANKING DETAIL

Bank _____ Branch Code _____

Account Type _____ Account Number _____

SIGNED FOR ON BEHALF OF ABOVEMENTIONED BUSINESS Name (Please Print)

<p>TIC Office Use Only</p> <p>Account Number : _____</p> <p>Allocate to Group : _____</p> <p>Allocate to rep E-mail: _____</p> <p>Sales Manager : _____</p> <p>Captured by : _____</p>

