



# DVS BEE SERVICES

## Application Form

Thank you for your enquiry. Please note that the Application form must be completed and sent to our offices. Please answer all the questions. All information will be treated as confidential.

### 1. General Company Information:

Name of Business (Registered)												
Trading Name												
Registration Number												
VAT Registration number												
Postal Address												
Physical Address												
Contact Person												
Telephone no												
E-Mail address												
Please indicate your Financial Year end.	Feb		June		Dec		Other (specify)					
Please indicate the BEE verification period.	12 months ending on _____ (Month) _____ (Year)											
Annual Turnover for Financial period being measured. (R-value)	R											
Do you have <b>Audited / Independently reviewed</b> Financial Statements?												
% Black Shareholding	Black Male shareholding				%		Black Female shareholding				%	
Who holds the above black shareholding?	Individual/s				Company				Trust			
Current total number of employees												

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2. **Have you previously had a BEE Rating?** YES / NO (please circle)
3. **If YES, when does your certificate expire?** \_\_\_\_\_
4. **Did the company make use of the services of a BEE consultancy agency for the past 2 years?**

Name of Consultancy & Consultant: \_\_\_\_\_

5. **Do you have any Debt or Equity Relationship with DVS BEE Services?**  
**Debt:** Any amount owing to or from DVS BEE Services to yourself or the company that will be rated.  
**Equity:** Any form of shares held normal or preferential with DVS BEE Services?

Debt Relationship: YES / NO (please circle)  
 Equity Relationship: YES / NO (please circle)

6. **Nature of your Business - Sector: Please tick the applicable box**

Manufacturer	Retailer	Distributor	Wholesaler	Services	Exporter	Mining

Importer	Tourism	Forrest	Construction	Transport	Information/ Communication (ICT)	Agriculture

Trade	Personal Services	Financial Services	Property	Chartered Accountants	Media Advertising & Communication	Other (Please specify)

7. **YES Initiative**  
 Do you wish to be verified on the YES Initiative as per Gov. Gazette 41866 (in addition to the standard verification)  
 YES / NO (please circle)

8. **Please List Sites of operation including address (does not include sites of clients)**

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Safety protocols or procedures applicable when visiting any of the above-mentioned sites?**

\_\_\_\_\_  
 \_\_\_\_\_

**9. CONSTRUCTION ENTITIES ONLY– Automatic BEE Levels**

	Level of Black Ownership			
	100%	≥51% but <100%	≥30% but <51%	Less than 30%
<b>Exempted Micro Enterprise (EME)</b>				
Contractor turnover less than R3 million				
Contractor turnover less than R10 million				
BEP turnover less than R1.8 million				
BEP turnover less than R6 million				
<b>Qualifying Small Enterprise (QSE)</b>				
Contractor turnover more than R10 million but less than R50 million				
BEP turnover more than R6 million but less than R25 million				

Note that in order to avoid discounting by 1 level, construction entities must comply with the QSE Skills Development element. The entity can further choose to enhance their BEE status level by being verified on the Skills Development and Supplier Development elements on the QSE scorecard.

**Please indicate whether you will opt for the additional verification YES / NO (please circle)**

\_\_\_\_\_  
 Authorised Representative Signature

\_\_\_\_\_  
 Date

**Once Completed please send this form to:**

Attention: Administrator or Wilme Fourie  
 E-mail: admin@dvsbee.com or wilme@dvsbee.com

Please contact us should you need any assistance with the completion of this form at: 0861 99 50 55

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FOR OFFICE USE ONLY:

**ASSIGNMENT**

Analyst(s) Assigned:			
Scorecard:			
Site(s) to be visited:			
Notes to Analyst:			
Technical Signatory:		Signature:	

**DECLARATION OF IMPARTIALITY AND CONFIDENTIALITY**

We hereby declare that we do not have any compromising links or vested interest in the Measured Entity, nor have we had any in the past two years or intend having any in the future. There is no conflict of interest or influence that will risk impartiality in performing our role in the verification of the Entity.

We also declare that we did not provide the entity with any consulting related to any of the 5 elements of the BEE scorecard during the past two years.

Any information disclosed or provide by the Measured Entity will be treated as confidential and shall not be used for any purposes other than for BEE Verification and this information will not be disclosed, revealed, or published to any third party without obtaining prior written consent thereto or if required by law to do so.

Any disclosures to me made in this regard will be submitted to the verification manager by means of a full report.

**Declaration of Competence and Capacity**

The Technical Signatory hereby confirms that DVS BEE SERVICES has the capacity and competence to perform this BEE Verification based on the review of this application form.

Technical Signatory:		Signature:	
Verification Analyst:		Signature:	
Administrator		Signature:	

**Where DVS BEE Services or any of its employees are noted under point 4 as the Consulting agency or Consultant, the Technical Signatory to investigate and clarify if there is a conflict of interest or risk to impartiality:**

Finding / Comments / Recommendations:

Signed:

Date:

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