



THE NATURAL CHOICE

## APPLICATION FOR TRADE

Registered Name: .....

Company Registration Number: .....

VAT Registration Number: .....

Practitioner License Number: .....

Trading Name: .....

Delivery Address: .....

Postal Address: .....

Telephone Number: .....

E- mail Address: .....

Owner/Directors/Partner/s:

.....  
.....

Person responsible (position) for payment of A/C:

.....

Signature: ..... Date: .....

Name (print): ..... Designation: .....

**Mineralife SA (Pty) Ltd P.O. Box 31538 Tokai 7166**

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