



DR WEDER, KAUTA & HOVEKA INC
LEGAL PRACTITIONERS NOTARIES CONVEYANCERS

**THE FINANCIAL INTELLIGENCE ACT NO: 3/2007
RECORD OF PRESCRIBED CLIENT PARTICULARS**

(PRIVATE COMPANY)

REGISTERED NAME	
REGISTRATION NUMBER	
INCOME TAX NUMBER	
VAT REGISTRATION NUMBER (if applicable)	
PHYSICAL REGISTERED ADDRESS	_____ _____
TRADING NAME (if applicable)	
PHYSICAL BUSINESS ADDRESS (if applicable)	_____ _____
POSTAL ADDRESS	
TELEPHONE NUMBER	
E-MAIL:	
BANKING DETAILS OF COMPANY	
❖ Name of Bank	
❖ Account Holder	
❖ Branch	

Directors:

A. Swanepoel, B.Com., LL.B
G.J. Ligthelm, B.A., LL.B
P.U. Kauta, B.Jur., LL.B
A.A.J. Naudé, B.Jur., LL.B
A. Slabber, B.Com., LL.B
T.K. Kamuhanga, BS (USA), LL.B
E.H. Yssel, B.A., LL.B
S.F. Maritz, B.Jur., LL.B
C.P.J. Potgieter, B.Com., LL.B.
F. N. Kishi, B.Proc

Associates:

V N Hanongo-Haikali LL.B
R B Strauss B.Com. LL.B
L T van den Berg BLC LL.B

www.wkh-law.com

Dr Weder, Kauta and Hoveka Incorporated
(Reg. No. 2006/327)

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Tel: +264 65 220 637
Fax: +264 65 220 638



DR WEDER, KAUTA & HOVEKA INC

Details of Managing Directors/Chief Executive Officer

Full Names:
Date of Birth:
Namibian Identity number or passport number if not a Namibian citizen
Nationality:
Residential Address:
Telephone Numbers: (W) (CELL) (E-MAIL)

Details of all Natural Persons, Companies, Close Corporations, other legal entities, particulars of Trusts holding 25 % or more of the voting rights at a General Meeting of the Company**Natural Person**

Full names:
Date of Birth:
Namibian Identity number or passport number if not a Namibian citizen
Nationality:
Residential Address:
Telephone Numbers: (W) (CELL) (E-MAIL)

Natural Person

Full Names:
Date of Birth:
Namibian Identity number or passport number if not a Namibian citizen
Nationality:
Residential Address:
Telephone Numbers: (W) (CELL) (E-MAIL)

Or Company

Full Names:
Registration Number:
Physicall Address:
Full Names of Director:
Contact detail Director: (CELL) (E-MAIL)

Or Company

Full Names:
Registration Number:
Physicall Address:
Full Names of Director:
Contact detail Director: (CELL) (E-MAIL)



Please supply a copy of the following documents for the Company together with this form:

- ❖ Most recent Certificate of Incorporation (form CM1) and Notice of Registered Office and Postal Address bearing the stamp of the Registrar of Company Office and Postal Address (Form CM22).
- ❖ Identity Document or passport (if a foreign national) of the Managing Director/Chief Executive Officer;
- ❖ Identity Document or passport (if a foreign national) of each person authorised to conduct business on behalf of the Company with Dr Weder, Kauta & Hoveka Inc.
- ❖ Company's letterhead reflecting the trading name and business address or other means of verification thereof (if applicable);
- ❖ Proof of authorisation of representatives (e.g. authorising resolution or confirmation signed by the Managing Director/Chief Executive Officer).

Description of business (Brief description of type of business conducted and general source of funds)

I hereby confirm on behalf of the above named company that the above information and attachments are true and accurate.

Signature _____

Date: _____

Name: _____

Capacity: _____