SARS

Mineral and Petroleum Resources Royalty Application Form

MPR1

Particulars of Person/Company/Unincorporated Body of Persons

IUINF01

Purpose: Register ☐ Deregister ☐

Application date (CCYYMMDD)

Company / CC registration no.

Are you an individual? Y ☐ N ☐

Are you an unincorporated body of persons? Y ☐ N ☐

Financial year end (CCYYMMDD)

Initials

First name

Home tel no.

Surname / Registered name

Bus tel no.

ID/Passport no.

Income tax ref no.

Cell no.

Fax no.

Email address

Business Address

BUSAD01

Unit No.

Complex (if applicable)

Street No.

Street/Name of Farm

Suburb/ District

City/Town

Postal Code

Postal Address

POSAD01

Mark here with an "X" if same as above or complete your Postal Address ☐

Postal code

Declaration

I declare that:
- The information furnished in this Application form is true and correct in every respect; and
- I have the necessary permit certificate to support all my declarations on this form which I will retain for inspection purposes.

Signature

Date (CCYYMMDD)

For enquiries go to www.sars.gov.za or call 0800 00 SARS (7277)

ID/Passport No.: XXXXXXXXXXXXXXXX IT No.: XXXXXXXXXXXXXX

Registered Name / Surname:

Application Type:

Time Stamp:

Registration Date:

FormID:

Bank Account Details

BANIF01

Mark here if you do not have a local savings or cheque account ☐

Account no. ____

Branch no. ____

Account type: Current ☐ Savings / Transmissions ☐

Bank name ____

Branch name ____

Account holder name ____

Permit Details

PDINF01

Number of Permits ____

Permit

Type of Permit ____

Type of Mineral ____

Quantity ____

Type of Permit ____

Type of Mineral ____

Quantity ____

Unincorporated Body of Persons

BPINF01

Has a unanimous decision been reached? Y [ ] N [ ]

Number of entities [ ]

Entity

Registered name [ ] Income tax ref no. [ ]

Registered name [ ] Income tax ref no. [ ]