

PAYROLL REGISTRATION

- Please complete parts A and B
- If the company has more than one Employee, make copies of Part B

We need ALL the information in order to be able to proceed with the registration

PART A

Company Information:

Company Name		
Company Registration Number		
Postal Address:		
Physical Address:		
Telephone Number:		Fax Number:
VAT: No:		PAYE Ref No:

Department of Labour Registration Number	
SDL Registered	

PART B

Individuals Information *(please complete for each employee):*

Surname	
Name	
ID Number/Passport Number	
Telephone Number	
Email Address	
Date of Birth	
Gender	
Marital Status	
Contact Spouse/Person	
Contact Details of above person	
Start date of work	

Postal Address	
Physical Address	
Tax Number	
<u>Banking Details</u> Name of Account Holder Type of Account Branch Number Account Number	

Monthly Salary (stipulate gross or nett):

Details of leave given to employee

Annual

Sick

Balance of leave due on the start date of taking over the payroll:

After completion of all forms we will contact you to request any further information we may require.

Please return completed document with copies of all directors ID's to:

Mari-Louise Stoltz | Professional Accountant

Email: ml@moifin.co.za | Cell: +2782 347 3748 | Tel: +2711 794 6551 | Fax: 086 695 0443

