## **DEPARTMENT OF LABOUR**

NO. 1386 14 DECEMBER 2018

COMPENSATION FOR OCCUPATIONAL INJURIES AND DISEASES ACT, 1993
(ACT 130 OF 1993)

## **EMPLOYER REGISTRATION FORM**

I, Vuyo Mafata, in my capacity as Compensation Commissioner and acting in terms of section 6A(a)(b), hereby publishes the attached prescribed Employer Registration Form for the purpose of section 80 of the above named Act.

Vuyo Mafata

**Compensation Fund Commissioner** 

Date: 2018/12/04



Labour Department ' REPUBLIC OF SOUTH AFRICA

To be completed by all employers THE COMPENSATION COMMISSIONER P O Box 955, Pretoria, 0001

OF SOUTH AFRICA

OF SOU ACT No. 130 OF 1993, (Section 80 - Rules, forms and particulars of the Compensation Commissioner - Annexure 7]

rk with X where applicable										ı	For of	fice us	e only			
se Corporation		Sole Proprietor(including Farmers)												T	T	
mpany		artners				Н			-		_					Τ
st	T P	ublic/Loca	Author	rities		Н										1
ganisation/Association	$\dashv \vdash$	ther				Н		-		BP	Numi	per				4
yanisalion/Association		ulici				Ш		-								4
B. ALL ITEMS MUST BE COMPLETED N.B. THE DOCUMENT MUST BE S				website	e)			1		CA	Numb	er				
ART 1 PARTICULARS OF	EMPLOYE	ER														
Date on which first employe (Item 1.1 must be complete	ed)		YY				M	Λ					DD			
2 Trading name and postal address	s of busine	ess / farm	ng / or	ganisa	tion / tr	ust :										
						-			-							
		+	+		+	+		+	+	+	-	-	· V	• IMP		
													LE.	USE OI TTERS		
														THIS	FOR	Λ.
Physical Address of Business/		Farm(s)														
,	(0)															
												_Code	:		-	
Magisterial district:													FC	OR OFFIC	E USE	
					Contac	t Pers	on:					1				
Contact details Tel:										_	_					
Contact details Tel:					Cell:											
Fax: Email:	E OWNED	/ CI OSE	COR		Cell:	OMB	ANVITI	DUST								
Fax: Email: PART 2 PARTICULARS OF		/ CLOSE	CORF		Cell:	OMP/	ANY/TI	RUST								
Fax: Email:  PART 2 PARTICULARS OF 2.1 Name of owner / partners / trustee	es		na ana ananaga <del>ana anana</del> an an	PORAT	Cell:	OMP/	ANY/TI	RUST								T
Fax: Email: PART 2 PARTICULARS OF	es /ner(s)/ partn	ers of busin	na ana ananaga <del>ana anana</del> an an	PORAT	Cell:	OMP	ANY/TI	RUST								T
Fax: Email:  PART 2 PARTICULARS OF the second of the secon	ner(s)/ partn JST BE ATT	ers of busin	na managa <del>ana pampa an</del>	PORAT	Cell:	OMP/	ANY/TI	RUST								
Fax: Email:  PART 2 PARTICULARS OF the second of the secon	es /ner(s)/ partn JST BE ATT	ers of busin ACHED ation	ess / far	PORAT	Cell:			RUST	40°410-M							
Fax: Email:  PART 2 PARTICULARS OF 2.1 Name of owner / partners / trustee 2.1.1.Name(s) and ID number(s) of ow N.B. COPY OF ID DOCUMENT(S) MU.2.2 Registered name of company or cl	vner(s)/ partn JST BE ATT	ers of busin ACHED ation	e Corp	PORAT	Cell:	th DTI:			-97-917-90-90-90-90-90-90-90-90-90-90-90-90-90-							
Fax: Email:  PART 2 PARTICULARS OF PARTICULARS OF PART 2 PARTICULARS OF PARTICULA	vner(s)/ partn JST BE ATT	ers of busin ACHED ation	e Corp	PORAT	Cell:	th DTI:						100000000000000000000000000000000000000				
Fax: Email:  PART 2 PARTICULARS OF PARTICULARS OF PART 2.1 Name of owner / partners / trustee Partners / tru	vner(s)/ partn JST BE ATT. lose corpora Compan	ers of busin ACHED ation ation by or Clos	e Corp	PORAT	Cell:	th DTI:	EATTA	CHED.	ACTIV	VITIES	SOR	TYPE (	OF OR	GANIS	ATIO	N N
Fax: Email:  PART 2 PARTICULARS OF 2.1 Name of owner / partners / trustee 2.1.1.Name(s) and ID number(s) of ow N.B. COPY OF ID DOCUMENT(s) MU.2.2 Registered name of company or cl.  NB: COPY OF CIPC DOCUMENTS, PART 3 PARTICULARS OF THE	orner(s)/ partn JST BE ATT. lose corpora Compan TRUST DOO	ers of busin ACHED ation by or Clos CUMENT OF	e Corp	PORAT	Cell:  TION/C  rust:  n no. wi  CATE M	th DTI: UST B	E ATTA	CHED.						GANIS	ATIO	N N
Fax: Email:  PART 2 PARTICULARS OF 2.1 Name of owner / partners / trustee 2.1.1.Name(s) and ID number(s) of own.B. COPY OF ID DOCUMENT(s) MU.2.2 Registered name of company or classic copy of CIPC DOCUMENTS,  PART 3 PARTICULARS OF THE	orner(s)/ partn JST BE ATT. lose corpora Compan TRUST DOO	ers of busin ACHED ation by or Clos CUMENT OF	e Corp	PORAT	Cell:  TION/C  rust:  n no. wi  CATE M	th DTI: UST B	E ATTA	CHED.						GANIS	ATIO	N N
Fax: Email:  PART 2 PARTICULARS OF 2.1 Name of owner / partners / trustee 2.1.1.Name(s) and ID number(s) of own.B. COPY OF ID DOCUMENT(S) MU.  Registered name of company or com	vner(s)/ partn JST BE ATT. lose corpora  Compar  TRUST DOC  NATURE re of busin	ers of busin ACHED ation by or Clos CUMENT OF	e Corp	PORAT	Cell:  TION/C  rust:  n no. wi  CATE M	th DTI: UST B	E ATTA	CHED.						GANIS	ATIO	N .
Fax: Email:  PART 2 PARTICULARS OF 2.1 Name of owner / partners / trustee 2.1.1.Name(s) and ID number(s) of own N.B. COPY OF ID DOCUMENT(S) MU.  Registered name of company or cl.  NB: COPY OF CIPC DOCUMENTS,  PART 3 PARTICULARS OF THE 3.1 Detailed description of the nature 3.2 Describe the following if applications are considered as a constant of the constant of the nature 3.2 Describe the following if applications are constant of the constan	res	ers of busin ACHED ation by or Clos CUMENT OF E OF BUS ess-, farm	e Corp	PORAT	Cell:  TION/C  rust:  n no. wi  CATE M	th DTI: UST B	E ATTA	CHED.						GANIS	ATIO	N N
Fax: Email:  PART 2 PARTICULARS OF 2.1 Name of owner / partners / trustee 2.1.1.Name(s) and ID number(s) of own.B. COPY OF ID DOCUMENT(S) MU.  Registered name of company or com	res	ers of busin ACHED ation by or Clos CUMENT OF E OF BUS ess-, farm	e Corp	PORAT	Cell:  TION/C  rust:  n no. wi  CATE M	th DTI: UST B	E ATTA	CHED.						GANIS	ATIO	N .

	, 14. 1		ETE BOTH SIDES	ALL ITEMS														
PART 4	4 F	PARTICU	ILARS OF RI	ESPONSIBL	E PERSON	/ DIRE	CTOR / M	EMBER	OR P	ART	NER	OF BI	JSINES	SS / FAF	RMING	3		
1.1 Si	urname:												In	itials:				
ΙD	D. No.:					Positio	on/Capacity:											
	Residenti Postal Co		s:			To	elephone:											_
			ready registere	d at one of th	e offices of th													
		llocated b		ompensation		<u> </u>				nempl	loym	ent Ins	urance	Fund			T	
Re	egistratio	on numbe	r:				J.											
l.3 If	the busi	ness has	changed owne	rship, furnish	the following:													
4.	.3.1	Previous	trading name	of business/fa	arm													
4.3	.3.2	Name of	previous owne	r					1 1 1									-
4.3	3.3	Present r	esidential addr	ess of previou	us owner							7.4	house					
												Pos	tal Code	9				
4.	.3.4	Date of t	ake-over										manne	***************************************				
PART 5	5 N.B.	PART	ICULARS OF	EMPLOYE	ES MUST E	BE COM	<b>IPLETED</b>											
5.1					yed									_				
	<b>1.2</b> 2	Average Estimate	number of em	ployees <b>expe</b>	cted to be employed	nployed yees <b>up</b>	during the a	above-me	ention	ed pe	riod		_	RAI	NDS (	DNLY	T	
5.1	<b>1.2</b> 2	Average Estimate person pe	number of em d earnings ext er annum for th	ployees expe pected to be the period (0	cted to be employed March 2018	nployed yees <b>up</b> 3 to 28	during the a to a maxir February 2	above-me num of R 2019):	ention 430 9	<b>ed pe</b> 144 p	<b>riod</b> er		[	RAI	NDS C	DNLY	00	)
5.1	<b>1.2</b> 2	Average Estimate person person	number of emploid earnings exper annum for the Total estima	ployees expe pected to be the period (0	cted to be empaid to employ 11 March 2018 of employees	nployed yees <b>up</b> 3 to 28	during the a to a maxir 3 February 2	above-me mum of R 2019):	430 9	<b>ed pe</b>	riod er		r	RAI	NDS (	DNLY	00	
5.1	<b>1.2</b> 2	Average Estimate person person	number of em d earnings exp er annum for th Total estima	pected to be the period (0 ted earnings ted cash value)	cted to be emploid to emploid March 2018 of employees e of food and	nployed yees <b>up</b> 3 to 28	during the a to a maxir 3 February 2	above-me mum of R 2019):	430 9	<b>ed pe</b>	riod er		r	RAI	NDS (	DNLY		)
5.1	<b>1.2</b> 2	Average Estimate person person	number of em d earnings exp er annum for the Total estima Total estimated ca Estimated ca	ployees experiment of the period (0 ted earnings ted cash value of carnings of wo	cted to be employed to employees e of food and other in-kind borking directors.	yees up yees up 3 to 28 lodging enefits	during the a to a maxir 3 February 2	num of R 2019): ee by emp	430 9	ed pe	riod		r	RAI	NDS (	DNLY	00	)
5.1	<b>1.2</b> 2	Average Estimate person per 5.2.1 5.2.2 5.2.3 5.2.4	number of em d earnings exp er annum for the Total estima Total estimated ca Estimated ca	ployees expe pected to be the period (0 ted earnings ted cash value ash value of c arnings of wo 5.2 i.r.o. max	cted to be employed to employees e of food and other in-kind borking directorismum earning	nployed by yees up 3 to 28 lodging enefits ors of a gs	during the a to a maxir February 2  provided fr	above-me num of R 2019): ee by emp	430 9	ed pe	riod er		[ [	RAI	NDS C	DNLY	00	)
<b>5.</b> 4	<b>1.2</b> 2	Average Estimate person	number of em d earnings exp er annum for the Total estimate Total estimated ca Estimated ca Refer to item	poloyees expe pected to be the period (0 ted earnings ted cash value ash value of carnings of wo 5.2 i.r.o. max ted earning	cted to be employed to employees of food and other in-kind borking direct cimum earning s of items	lodging enefits ors of a gs 5.2.1	during the a to a maxir February 2  provided fr	ee by emp	entione 430 9	ed pe 44 p	riod er CC	ler 5.3	[ [	RAI	NNDS (	DNLY	00	)
5.4 5.2 3.3 Tot	1.2 2	Average Estimate person	number of emiliary dearnings exper annum for the Total estimate Total estimate Estimated or Refer to item at the estimate the estimate.	poloyees experiment period (0 ted earnings and wallue of committed earnings of words, 2 i.r.o. may ted earnings.	cted to be employed to employees e of food and other in-kind bearing direct cimum earning gs of items	lodging enefits ors of a gs is 5.2.1	to a maxing February 2 provided from to 5.2.4 ato:	ee by emp	430 9	ed pe	er CC	ler 5.3	[ [ ] 3: [		NDS C	DNLY	00	)
5.3 Tot ART 6	tal esti	Average Estimate person	number of emind earnings eximated care Refer to item external earnings from the external earnings exte	ployees experience bected to be period (0 ted earnings ted cash value of carnings of wo 5.2 i.r.o. maximal maximal carning om:	cted to be employed to employees e of food and other in-kind booking direct cimum earnings of items	lodging enefits ors of a gs is 5.2.1	during the a to a maxing February 2 provided from to 5.2.4 a to:	ee by emp	antion 430 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9	ed pe 44 p	riod er CC l und	der 5.2	[ [ [ [ [ [ [ [	<b>ES</b> gistration	ı numb	per alloc	000	)
.3 Tot  ART 6  1 Fu the 2 Kin	tal esti	Average Estimate person	number of emind dearnings eximal estimated care rotatement estimated earnings from the extension of the estimated earnings from the est	ployees experience ted earnings and value of completing and address of d (UIF) and/or by completing Direct deports of the period (UIF) and/or by completing Direct deports of the period	cted to be employed to employees of food and other in-kind booking direct cimum earning of items  N RESPECT the Head Offithe Compensing the sections in the section of the	lodging enefits ors of a gs s 5.2.1	provided from to 5.2.4 a to:  EAD OFFI or affiliates und (CF).	ee by emp and give	430 9  boloyer  the  the  s and i	ed pe 444 p	cc LIATE	der 5.2	[ [ [ [ [ [ [ [	<b>ES</b> gistration	ı numb	oper allocation	00   00   00   00	) ) ) y
.3 Tot ART 6 1 Fu the 2 Kin yo Ba	tal esti	Average Estimate person	number of emiliary and a carnings from the estimated extended extended extended extended from the extended exte	poloyees experience bected to be in the period (0 ted earnings of wo 5.2 i.r.o. may ted earning om:  RMATION I all address of d (UIF) and/or by completing by completing the period of t	cted to be employees of employees e of food and other in-kind b orking direct cimum earning gs of items  N RESPECT the Head Offi the Compens ong the section osits prevent Branch I	lodging enefits ors of a gs is 5.2.1  TOF HI ce and/csation Fine postal Name:	to 5.2.4 at to:  EAD OFFI or affiliates and (CF).  v. This infeddelays and	ee by emp  king mem  and give	430 9  Abers of the list required is required.	ed pe 444 p	cc LIATE	der 5.2	[  RANCH  d, the re	<b>ES</b> gistration	ı numb	oper allocation	00   00   00   00	) ) ) )
.3 Tot ART 6 1 Fu the 2 Kin yo Ba Tyl	tal esti	Average Estimate person	number of emiliary and a control of the control of	poloyees experience bected to be in the period (0 ted earnings of wo 5.2 i.r.o. may ted earning om:  RMATION I all address of d (UIF) and/or by completing by completing the period of t	cted to be employees of employees e of food and other in-kind b orking direct cimum earning gs of items  N RESPECT the Head Offi the Compens ong the section osits prevent Branch I	lodging enefits ors of a gs is 5.2.1  TOF HI ce and/csation Fine postal Name:	to 5.2.4 at to:  EAD OFFI or affiliates and (CF).  v. This infeddelays and	ee by emp  king mem  and give	430 9  Abers of the list required is required.	ed pe 444 p	cc LIATE	ler 5.2	[  RANCH  d, the re	<b>ES</b> gistration	ı numb	oper allocation	00   00   00   00	) ) ) )
.3 Tot  ART 6  1 Fu the 2 Kin yo Ba Tyl Na	tal esti	Average Estimate person	number of emiliar annum for the annum for the Total estimated cannum for the Estimated cannum fo	poloyees experience to be period (0 ted earnings and cash value of committed earnings of work to the committed earnings of work to the committed earnings of work to the committed earnings of the committed earnings of the complete the compl	cted to be employed to employees of employees e of food and other in-kind booking direct cimum earning gs of items  N RESPECT the Head Offithe Compensions the Section on the Section of t	lodging enefits ors of a gs is 5.2.1  FOF HI ce and/ceation From below postal Name:	provided from to 5.2.4 ato:  EAD OFFI or affiliates, und (CF).  V. This infedelays and	ee by emp  king mem  and give	430 9  Abers of the list required is required.	ed pe 444 p	cc LIATE	ler 5.2	[  RANCH  d, the re	<b>ES</b> gistration	ı numb	oper allocations	00   00   00   00	) ) ) )
5.7 5.2 4ART 6 1 Fu the	tal esti	Average Estimate person	number of emind dearnings exper annum for the Total estimated cannum for the Estimated cannum fo	ployees experience period (0 ted earnings and value of carnings of wo 5.2 i.r.o. maxided earning and down and ted earning om:  RMATION I all address of d (UIF) and/or by completing. Direct deponders	cted to be employed to employees of employees e of food and other in-kind booking direct cimum earning gs of items  N RESPECT the Head Offithe Compensions the Section on the Section of t	lodging enefits ors of a gs is 5.2.1  FOF HI ce and/ceation From below postal Name:	provided from to 5.2.4 ato:  EAD OFFI or affiliates, und (CF).  V. This infedelays and	ee by emp  king mem  and give	430 9  Abers of the list required is required.	ed pe 444 p	cc LIATE	ler 5.2	[  RANCH  d, the re	<b>ES</b> gistration	ı numb	oper allocations	00   00   00   00	) ) ) )
.3 Tot  ART 6  1 Fu the 2 Kin yo Ba Tyl Na  ART 7 certify t	tal esti	Average Estimate person	number of emiliar annum for the annum for the Total estimated cannum for the Estimated cannum fo	poloyees experiment of the period (0 ted earnings of we seed cash value of committed earnings of we so that the committed earning of (UIF) and/or correct.	cted to be employees of employees e of food and other in-kind b orking director cimum earning gs of items  N RESPECT the Head Offi the Compens  Branch I	lodging enefits ors of a gs is 5.2.1  FOF HI ce and/ceation From below postal Name:	provided from to 5.2.4 a to:  EAD OFFI or affiliates und (CF).  V. This infedelays and	ee by emp  king mem  and give	antioned 430 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9	ed pe 444 p	cc LIATE	ler 5.2	RANCH d, the re cose of a	<b>ES</b> gistration	ı numb	poer alloco	00   00   00   00	) ) ) )