

Company name ..... Company reg no .....

Profile number ..... Email address .....  
(if applicable)

**Signing arrangements:** please mark(X) as required     Jointly (2)     Severally

**These specimen signatures will be scanned into our system and any interference may cause unnecessary delays in the updating process. It is therefore important to ensure that the signatures are in black ink and within the space provided, without touching any lines. All unused/blank signature specimen blocks must be cancelled by drawing a line through them.**

Specimen signatures

Signatory name ..... ID/Passport number ..... <input type="checkbox"/> Designated person <input type="checkbox"/> Administrator	<div style="border: 2px solid black; padding: 5px;"> <div style="border: 1px solid black; width: 60px; height: 20px; margin-bottom: 5px;">↑↑↑</div> <div style="border: 1px solid black; width: 100%; height: 60px;"></div> </div>
Signatory name ..... ID/Passport number ..... <input type="checkbox"/> Designated person <input type="checkbox"/> Administrator	<div style="border: 2px solid black; padding: 5px;"> <div style="border: 1px solid black; width: 60px; height: 20px; margin-bottom: 5px;">↑↑↑</div> <div style="border: 1px solid black; width: 100%; height: 60px;"></div> </div>
Signatory name ..... ID/Passport number ..... <input type="checkbox"/> Designated person <input type="checkbox"/> Administrator	<div style="border: 2px solid black; padding: 5px;"> <div style="border: 1px solid black; width: 60px; height: 20px; margin-bottom: 5px;">↑↑↑</div> <div style="border: 1px solid black; width: 100%; height: 60px;"></div> </div>
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