

FITMENT CENTRE VETTING FORM (All information is treated as private and confidential and will only be used for internal vetting)							APPLICATION PROCESS
Company / Legal Entity Name			Trading as (If applicable)		Company registration number		<p><b>Step 1</b> Complete the vetting form</p> <p><b>Step 2</b> Submit the vetting form for consideration</p> <p><b>Step 3</b> You will be notified if your application was successful or not</p> <p><b>Step 4</b> On successful application Recoveri will supply you with a proposal</p> <p><b>Step 5</b> On acceptance of the proposal a credit application will be forwarded to you for completion</p> <p><b>Step 6</b> On acceptance of the credit application (COD Only), a contract will be drawn up and signed by both parties</p>
Telephone number			Email address				
Work		Mobile					
Contact Person			Position		Title		
Physical address			Postal address		Registered Address		
State / Province		State / Province		State / Province			
Postal / ZIP code		Postal / ZIP code		Postal / ZIP Code			
DETAILS OF DIRECTORS / INVOLVED INDIVIDUALS							
#	Name	Surname	Position	Id Number / Passport Number	Yrs Serv		
1							
2							
3							
TERRITORY							
#	Continent	Country	City where you will operate from				
1							
BACKGROUND INFORMATION							
What Industry are you currently engaged in?							
Are you a Connected Individual (CI)? Someone who has immediate family working for government Institutions within the territory applied for?							
YES			NO				
If YES please state the Person's Name and Government Institution worked for in the space below:							
Name			Institution				

## INFORMATION ABOUT POTENTIAL MARKETS

What markets do you intend approaching, with the Recoveri Product range (within the territory)?

What COI's (Centers of Influence) do you currently have within the territory?

## CRIMINAL RECORDS

Have you ever been convicted of a criminal offence?

YES

NO

If Yes, please specify details of conviction and date of conviction

## TRADE REFERENCES

Please Supply trade references

#	Name	Contact Number	Company	Relationship	Number of Years
1					
2					
3					

I declare that, by my signature below, the information supplied on this application form is true and correct and that failure to disclose any information could result in my application being negatively viewed.

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APPLICANT SIGNATURE

RECOVERI SIGNATURE

DATE

## FITMENT CENTRE CHECKLIST

(In terms of the Recoveri International Standard and the South African National Standard SANS 534-1)

1.1	<b>Fixed Premises</b> Do you conduct your business at a fixed permanent address located in an area zoned as a business area by the relevant local Authority?	YES	NO
1.2	<b>Fixed Premises</b> Do you have a public waiting area?	YES	NO
1.3	<b>Fixed Premises</b> Do you have a fitment area that can be dedicated to microdot fitments when required?	YES	NO
2.0	<b>Administration system</b> Do you have an administration system? Please comment below:  <hr/> <hr/> <hr/>	YES	NO
3.1	<b>Corporate Identity</b> Are there any restrictions on displaying <i>Recoveri Tag What's Yours</i> signage in line with their Corporate Identity?	YES	NO

4.1	<b>Information Technology</b> Do you have a PC / Laptop and printer which is connected to the Internet at all times?	YES	NO
4.2	<b>Plant &amp; Equipment</b> Does the Centre have lifting equipment, pits, ramps or creeper trolleys?	YES	NO
5.1	<b>Quality Management System</b> A successful application would further require that a Fitment Centre implement and maintain a quality management system for the microdot system that should include: a) document control; b) record control; c) internal audit; d) corrective action; e) preventive action; and f) control of non-conforming product. <b>This will be supplied by Recoveri</b>	YES	NO
5.2	<b>Annual Certification Audit</b> An annual audit by the Recoveri will be completed. Do you have any objection to this?	YES	NO