311 Musgrave Road DURBAN 4001



002-181 NPO VAT No : 447 010 4672

031 201 5121

www.durbanchristianresidence.com

(Applicant)

info@durbanchristianresidence.com

APPLICATION FOR RESIDENCE

PERSONAL PARTI	CULARS OF AP	PLICANT					
SA Identity Number	er/Passport Num	ber					
Title							
Surname							
First Names							
Date of Birth			Gender	Male	Fe	male	
Population Group (compulsory) Indicate with a tick V (according to legal requirements and government reporting purposes this section must be completed)			African	Coloured	Indian	White	
Mobile Number			Home Number				
Email		1	-1				
Christian Yes No			Denomination				
PERSONAL PARTI			PARENT/GUA	RDIAN/SPO	NSOR (IF AP	PLICABLE)	
Title							
Surname							
First Names							
Mobile Number			Home Num	Home Number			
Email		L					
Postal Address							
TYPES OF ACCOMM	ODATION AND of Accommodat		Data P	Required	Deposit		
Туре	of Accommodal	.1011	From	Until	Admin fee	R1	
					Monthly F	ee	
Annual Admin Fee	-		Pro Rata				
(Residence Fees ar agreement)	ejer to your iet	use	Parking Fridge				
agreement					Total		
Banking Details:	Details: First National Bank (FNB)						
Account Name:							
Branch:							
Account Number:	54 99 00 4	7 937					
Signature			Signature				

(Parent / Guardian)

I hereby consent to a credit check on both Applicant and Account Payer

UNIVERSITY/COLLEGE PARTICULARS

University/College				
Course enrolled				
Faculty				
Student Number				
COMPANY PARTICULARS				
Company Name				
Department				
Company Employee Number				
Company Telephone Number				
CHARACTER REFERENCES				
Name	Contact Number			
Name	Contact Number			
Name	Contact Number			
Dated and signed atthis	day of202			
Signature(Applicant)	Signature(Parent / Guardian)			