



**WALCO**  
POWER SOLUTIONS

**PERSONAL DETAILS**

**AGENCY APPLICATION FORM**

|           |                      |                 |  |
|-----------|----------------------|-----------------|--|
| Name      | <input type="text"/> | Street Address  | <input type="text"/>                                     |
| Surname   | <input type="text"/> |                 | <input type="text"/>                                     |
| ID No.    | <input type="text"/> |                 | <input type="text"/> Code <input type="text"/>           |
| Tel Home  | <input type="text"/> |                 | <input type="text"/>                                     |
| Tel Work  | <input type="text"/> | Postal Address  | <input type="text"/>                                     |
| Cellphone | <input type="text"/> |                 | <input type="text"/>                                     |
| Fax       | <input type="text"/> |                 | <input type="text"/> Code <input type="text"/>           |
| E-mail    | <input type="text"/> | Internet access | Yes <input type="checkbox"/> No <input type="checkbox"/> |

**COMPANY / WORK / INDUSTRY - BACKGROUND**

|          |                      |              |                      |
|----------|----------------------|--------------|----------------------|
| Company  | <input type="text"/> | Years/Months | <input type="text"/> |
| Employer | <input type="text"/> | Years/Months | <input type="text"/> |
| Industry | <input type="text"/> | Years/Months | <input type="text"/> |

Do you have any Business experience? Yes  No  Ever been self employed? Yes  No

Short description of back ground \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List certificates/diplomas/degrees obtained to date: \_\_\_\_\_  
\_\_\_\_\_

Registered with any organization? Yes  No  \_\_\_\_\_

**AREA OF CHOICE**

|           |                      |          |                      |
|-----------|----------------------|----------|----------------------|
| City/Town | <input type="text"/> | District | <input type="text"/> |
|           |                      | Area 1   | <input type="text"/> |
|           |                      | Area 2   | <input type="text"/> |
|           |                      | Area 3   | <input type="text"/> |
| Country   | <input type="text"/> | Area 4   | <input type="text"/> |

Initial

**AGENCY SELECTION**

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Agency  R 15 000.00 excl VAT (R 17 100.00 Vat Included)

Area License  R 350 000.00 excl VAT (R 399 000.00 Vat included)

*(Prices quoted exclude VAT)*

**FINANCIAL INFORMATION**

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Cash Available R  -  Bond Facility R  -

Surety R  -  Other Assets R  -

Finance Needed R  -  Finance able Assets R

*(Finance can be arranged – terms and conditions will apply)*

Please list any extra Security to offer should you require any finance:

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**MANAGEMENT MOTIVATION**

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How would you describe your management style?

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**DECLARATION OF INFORMATION**

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Date  I,  hereby declare that this information is true & correct

SIGNATURE

Please attach copy of ID and proof of residence and fax form to 086 682 3314.



**MARKETING OFFICE - CONTACT DETAILS**

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Tel: 012 365 2955

Fax: 086 682 3314

E-mail: [info@walcopower.co.za](mailto:info@walcopower.co.za)

Web: [www.walcopower.co.za](http://www.walcopower.co.za)