



Bylsbridge Office Park
Building 14| Block D | 11 Bylsbridge Boulevard
Cnr Jean Ave and Olievenhoutbosch Road |
Centurion | 0157
PO Box 11011 | Zwartkop | 0051

T +27 12 748 9600
F +27 12 748 9791
E helpline@sedfa.org.za
www.sedfa.org.za

CONSENT FORM

I/We, the undersigned _____ (Full names and surname) with Identity Number _____ hereby certify that I/we are the shareholders/official representatives of _____ (Company name) with company Registration Number _____ hereby declare, agree and undertake the following towards SEDFA (Hereinafter):

1. I/We hereby give consent to SEDFA or such other person or entity that SEDFA may designate, the absolute right and permission to conduct checks, assessments and to verify my information in order to evaluate, adjudicate and reporting to authorities as per the National Treasury's requirements.
2. I/We acknowledge that SEDFA is committed to protecting and promoting the privacy of my/our Personal Information including that of entity or any other individuals or organisation and to give effect to the constitutional right to privacy and to fulfil its obligations under the Protection of Personal Information Act No 4 of 2013 (Hereinafter 'POPI').
3. I/We hereby give consent to SEDFA to process my/our Personal Information where the processing is necessary and only for purposes verifications in the evaluation of submitted proposals for RFQs, bids, payments and reports.
4. SEDFA acknowledges and agrees that the Personal Information will not, under any circumstances, be processed for purposes prohibited by POPI and/or the principles contained in POPI and that the processing of Personal Information will be done fairly and in accordance with legal provisions, given that the purpose for which processing of the Personal Information is adequate, relevant and not excessive.
5. SEDFA herewith defend, indemnify and hold you harmless from any action or claim of any nature whatsoever that might be brought by any person whatsoever against you as a result of any personal loss, injury or damage arising directly or indirectly from any act or omission on SEDFA's part relating to or incidental to the failure from SEDFA's part to honour the above provisions, or otherwise, as the case may be.
6. I/We acknowledge and agree that I/We have read this consent form in its entirety and that I/We fully understand the nature, content and implications hereof and agree hereto, and that I/We shall be fully bound hereto from date of signature hereof.

Signed at _____ on this _____ day of _____ 20____

Print Name and Surname: _____ (Company Representative's Signature)