



Subcontractor Database Registration Form

1. Company Information

• Company Name:

• Trading Name:

• Company Registration Number:

• VAT Registration Number:

• Physical Address:

• Postal Address:

• Email Address:

• Website (if applicable):

• Contact Person:

○ Name:

○ Designation:

○ Contact Number:

2. Business Profile

- Type of Business:
 - Sole Proprietor / Partnership / Close Corporation / Private Company (Pty) Ltd / Other (Specify)

- Core Services/Trade: (e.g., Electrical, Plumbing, Carpentry, etc.)

- CIDB Grading (if applicable):

- Years in Operation:

3. Financial Information

- Banking Details:
 - Bank Name: _____
 - Account Holder: _____
 - Account Type: _____
 - Account Number: _____
 - Branch Code: _____
- Tax Compliance Status: Attach a valid Tax Clearance Certificate.

4. Legal and Compliance Documents

(Attach copies of the following documents)

- Company Registration Certificate (CIPC – showing all active members, and shareholding).
- Valid Tax Clearance Certificate.
- B-BBEE Certificate or Sworn Affidavit.
- Proof of CIDB Registration (if applicable – all gradings are welcome)
- Workmen’s Compensation Certificate (COID).
- Public Liability Insurance Certificate.
- Certified copies of Identification Documents of all active members.
- Company banking details signed and stamped by the bank.
- Letter of authorization for the person authorized to sign documents on behalf of the company.
- Physical address and contact details of the company
- Signed acceptance of this appointment.
- COIDA
- Reference letters

5. **Health and Safety Information**

- Does your company have a Health and Safety Policy?
Yes / No
 - Attach proof of any health and safety accreditations or compliance certificates.
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6. **Previous Work Experience**

- List at least three recent projects completed:

1. Project Name:

▪ Client Name:

▪ Project Value:

▪ Scope of Work:

2. Project Name:

▪ Client Name:

▪ Project Value:

▪ Scope of Work:

3. Project Name:



- Client Name:

- Project Value:

- Scope of Work:

7. References

- Provide contact details of two professional references:

1. Name:

- Company:

- Contact Number:

2. Name:

- Company:

- Contact Number:

8. Declaration

I, _____ the undersigned, certify that the information provided above is true and correct. I understand that submission of this form does not guarantee acceptance into the subcontractor database and that the company reserves the right to verify all information.

• Name: _____

• Designation: _____

• Signature: _____

• Date: _____

For Official Use Only

• Application Received By: _____

• Date Received: _____

• Application Status: Approved / Declined

• Comments:



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