

**APPLICATION FOR REGISTRATION OF AN ELCONOP 1**

**APPLICATION IN TERMS OF CLAUSE 34 OF THE MAIN AGREEMENT**

To be completed by employer

REG. NO. \_\_\_\_\_

Name of employer \_\_\_\_\_

Postal address \_\_\_\_\_

Postal code \_\_\_\_\_ Tel. no. \_\_\_\_\_

NAME	SURNAME	ID NUMBER

Two passport size photographs attached in respect of each of the above employees. (NOTE: One photograph to be certified on the back by a Commissioner of Oaths for the applicant named)

NB: ENCLOSE A REGISTRATION FEE OF R20 PER EMPLOYEE.

\_\_\_\_\_  
SIGNATURE OF EMPLOYER

Please enclose certified copy of the employee's ID Document