

**UNEMPLOYMENT INSURANCE ACT, 1966
NOTIFICATION BY EMPLOYER IN TERMS OF SECTION 28(1)**

REFERENCE NUMBER

To the Unemployment Insurance Fund, PRETORIA, 0052, 94 Church Street

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Year Month Day

1. Date on which first contributor was employed:

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 2. Language preference: Afrikaans English

3. Name under which business is carried on: _____

4. Address to which correspondence is to be sent: _____

Postcode:

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5. Telephone number:

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 (Code)

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 (Number)

Fax number:

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6. (a) Nature of business: _____

(b) Industrial Classification Code:

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 (Consult Annexure)

7. Ownership: Sole Owner Partnership Company Close Corporation Other

8. (a) Address where business premises is situated: _____

Postcode:

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(b) Magisterial district in which business premises is situated: _____

9. (a) Full Christian name(s), surname, residential address(es) (not a P O Box) and identity number(s) of owner or partners:

Name and Surname: _____

Address: _____ ID no:

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Address: _____

Postcode:

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Name and Surname: _____

Address: _____ ID no:

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Address: _____

Postcode:

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Name and Surname: _____

Address: _____ ID no:

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Address: _____

Postcode:

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(b) In the case of a company or a close corporation, indicate the registered name and number: _____

Number:

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10. Number of contributors employed:

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11. If this return is in respect of the head office of a business, state --

(a) names and addresses of branches: _____

(b) whether or not branches will be directly responsible for submission of returns and contributions: Yes No

12. If this return is in respect of a branch of a business, state -

(a) the name and address of head office (in the Republic) _____

(b) how returns and contributions will be submitted: Direct Head Office

The above-mentioned particulars are furnished in terms of section 28(1) of the Unemployment Insurance Act, 1966 and are certified to be correct

Date _____

Signature of employer or duly authorised agent _____

N.B. A separate return should be rendered in respect of each individual business unless permission is obtained to submit a consolidated return.