PHYSICAL ADDRESS 27 Leeuwkop Road Sunninghill, Johannesburg, 2191 POSTAL ADDRESS P. O. Box 461 Randburg, 2125



ASSURING QUALITY HOMES

THE RE-ORDER FORM.

BAR CODE RE-ORDER FORM BC001 (V6)

NOTE: Please observe the following basic principles. Print one letter per box. Write Clearly.

If you are not able to collect the car codes yourself, ensure that the AFC001 form is completed and signed by you so that the bar code labels can be handed over to a third party. Your Bar Code Number Date Name Surname **ID Number** Note: If passport being used, copy of work permit is required. **Passport Number** Company Name **Trading Name** Postal Address Physical Address Postal Code Town 0 0 0 0 0 0 0 0 0 Eastern Cape Free State Gauteng KZN Limpopo Mpumalanga Northern Cape North West Western Cape Telephone Number Fax Number Mobile Number **Email Address** How do you want to get your labels? Registered post Collect from Regional Office Collect from Head Office in Sunninghill (Johannesburg) If collecting from a NHBRC Office, please mark which office you would like to collect from. **EASTERN CAPE FREE STATE GAUTENG KWA ZULU NATAL** East London (Gqeberha) Bethlehem HO Sunninghill Durban Richards Bay Port Elizabeth Bloemfontein Pretoria (Tshwane) Newcastle **NORTHWEST LIMPOPO MPUMALANGA WESTERN CAPE** Polokwane Nelspruit Rustenburg Cape Town Modimole (Bela Bela) Witbank Klerksdorp George Tzaneen Mahikeng What is the last number on the latest batch of labels you received? TO ORDER **EMAIL** competentperson@nhbrc.org.za Signature Please attach the following documents PLEASE NOTE ONLY THE REGISTERED **COMPETENT PERSON IS ALLOWED TO SIGN OFF**

Clear copy of ID Book

Copy of updated PI



Tel: +27 11 317 0000

Toll Free No: 0800 200 824
Fraud Hotline: 0800 203 698

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AUTHORIZATION LETTER FOR 3RD PARTY TO COLLECT NHBRC BAR CODE LABELS

I,	
with ID number	or
Passport Number	Passport only to be used if not SA citizen.
the approved competent person by the NHBRC, am not able to col permission for	lect the ordered bar code labels and hereby give
with ID number	to collect the said bar code labels.
Telephone Number	Mobile Number
	Please attach the following documents Clear copy of ID Book of person collecting bar code labels on your behalf.
Signature D D M M Y Y Y Y	