To: The Master of the High Court

REOUISITION

("The Debtor")

REG/ID NUMBER:

SUPPORT:

- 1 I understand that application has/is to be made to the High Court/Magistrate Court for an order for the voluntary surrender/ sequestration / voluntary liquidation / liquidation of the estate of the Debtor and for the placing of the Debtor in provisional sequestration/ sequestration/ provisional liquidation/ liquidation.
- 2 I declare that ____

is a creditor of Debtor.

- 3 In my opinion it is in the interest of the creditors of the Debtor that a provisional trustee/ trustee/ provisional liquidator/ liquidator be appointed in the estate of the Debtor for the reasons set out hereunder:
 * To take control over the entire estate, realize assets and distribute proceeds to creditors
- 4 I hereby nominate LARISA MYBURGH from St. Adens International, PO Box 1314 Groenkloof 0027, Tel Nr. 012 344-4315, Fax 086 212-9195 or 012 344-4318, email address stadens@stadens.co.za and milani@stadens.co.za for appointment as provisional trustee/ trustee/ provisional liquidator/ liquidator and request you to make the necessary appointment. The Creditor intends proving a claim and voting for the final appointment of the aforementioned person at the first meeting of creditors in this estate. As far as I am aware the nominated person is not disqualified from the aforesaid appointment by virtue of the provisions of Section 55 of the Insolvency Act or Section 372 of the Companies Act.
- 5 I declare that the Creditor is not a person disqualified, in terms of the provisions of Sections 52 and 53 of the Insolvency Act 382(2)(a) of the Companies Act, from voting for the appointment of the aforesaid person as provisional trustee/ trustee/ provisional liquidator/ liquidator.
- 6 I further declare that I have satisfied myself that the amount reflected herein as owing by the Debtor to the Creditor is, to the best of my knowledge and belief, true and correct.

6.1 Name of Creditor:

6.2 Physical Address of Creditor:

6.3 Postal Address of Creditor:

- 6.4 Telephone number of Creditor: ______ 6.5 Email Address of Creditor: _____
- 7 Amount of Claim: R____

(Also in words)

8 Cause of Action: The amount owing by the Debtor to the Creditor is owing in respect of:

1.GOODS SOLD/DELIVERED/PURCHASED	2.MONIES LENT AND ADVANCED	3.SERVICES RENDERED
4.OUTSTANDING SALARIES / LEAVE PAY	5.MONIES LENT AND DISBURSED	6.MORTGAGE LOAN
7.INSTALMENT SALE / LEASE AGREEMENT	8.OTHER:	

9 Your Customer Account / Invoice / Reference Number of the Debtor :

SIGNATURE		COMP									
PRINTED NAME	_					DATE					
CAPACITY: DIRECTOR		MANAGER	PERSONAL	OTHER 🗖 : _							
(PLEASE SEE THE NOTES FOR GUIDELINES)											

1 In case of a <u>Company</u> [(Pty) Ltd] this form is to be signed by a director or otherwise by any other person duly authorised thereto in terms of a resolution, a copy of which must be attached.

2 In case of a partnership, a partner must sign.

- 3 In case of a <u>Financial Institution / Close Corporation</u> (CC) this forms must be signed by the Manager / Director / Member or otherwise by any other person authorised thereto in terms of a resolution, a copy of which must be attached.
- 4 If signed under power of attorney, the original or a copy thereof must be attached.
- 5 Kindly note that the requisition is not a claim form and that a claim must be submitted on the correct forms at a meeting of creditors.