

PRIVATE SECURITY INDUSTRY
REGULATORY AUTHORITY
PRIVATE BAG X817
PRETORIA
0001



**Private Security Industry
Regulatory Authority (PSIRA)**

Tel no: (012) 003 0500/1
086 133 3850
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**APPLICATION FOR THE WITHDRAWAL OF REGISTRATION I.R.O. A REGISTERED SECURITY SERVICE
PROVIDER (BUSINESS) IN TERMS OF REGULATION 11 MADE UNDER THE PRIVATE SECURITY
REGULATION ACT NO 56 OF 2001
[PSIRA-29]**

**Name of security service provider
(business)**

PSIRA Registration Number

Application for (tick as appropriate)

Withdrawal of registration

I, the undersigned, duly authorized by the abovementioned security business, hereby make application for suspension of registration/upliftment of suspension/withdrawal of registration (delete as appropriate) of the abovementioned security service provider.

Reason for application:

Date:

**Signature of
owner/director/
member/partner
/ trustee**

**name of owner/
director/member
/ partner/trustee
duly authorized**

NOTES:

This application must be accompanied by:

- Payment of the prescribed fee of R450.00
- A resolution in such format as may be prescribed by the Authority passed at a duly constituted meeting of the owners/directors/members/trustees/partners of the security business authorizing the owner/director/member/partner/trustee signing this application to do so.
- Original certificate must be returned to our offices when requesting closure of the security service provider.
- Attach a letter stating that all employees must be terminated.

Specimen resolution to be submitted with application for the suspension/upliftment of suspension/withdrawal of registration of a security service provider (security business)

BUSINESS LETTERHEAD

Resolution passed at a duly constituted meeting of the

(owner/directors/members/trustees/partners) of _____

(registered name of

business), _____ (registration number) held at

(place) at _____ (time) on _____ (date).

Resolved:

That _____ (name of natural person) in his/her capacity as

_____ (owner/director/member/trustee/partner) be and is hereby authorized to make

application to

the Private Security Industry Regulatory Authority in terms of Section 21 of the Private Security Industry Regulation Act 56 of

2001 on behalf of _____ (registered name of business) to

withdraw the registration of _____ (registered name of business).

We confirm that we have fully acquainted ourselves with the effect of this resolution.

Specimen signature of duly authorized person

Certified Correct

Name	Capacity	Signature	Date

(all owners/directors/members/trustees/partners to sign)