

QUESTION 1

Have you resided outside South Africa for an uninterrupted period of at least 1 year during the 10 year period immediately preceding this application?

Yes No

COUNTRY	PERIOD OF RESIDENCE FROM	TO

If "yes", give particulars of the countries and places where you have resided and indicate the period of residence.

QUESTION 2

Are you presently or have you ever been employed as a member of any official military, security, police, intelligence force or service in South Africa or elsewhere?

Yes No

NAME OF FORCE/SERVICE AND FORCE NUMBER	PERIOD OF SERVICE FROM	TO

If "yes", give particulars of every such force or service, with the dates of your service.

QUESTION 3

Is there currently a criminal investigation by the State into an alleged offence by you or are there criminal proceedings in a court pending against you?

Yes No

ALLEGED CRIMINAL OFFENCE	POLICE STATION/ COURT	REFERENCE NO.

If "yes", furnish particulars.

QUESTION 4

Please furnish the full first names, surnames and contact numbers of 3 persons who can be described as your next of kin (your closest living relatives)

Declaration by applicant:

I, the undersigned, hereby declare that:

1. I have complied with the relevant training requirements prescribed for registration as a security service provider.
2. I am not in the permanent employ of the South African Police Service, the Directorate of Special Operations, the National Intelligence Agency, the South African Secret Service, the South African Defense Force or the Department of Correctional Services.
3. I am not currently employed in the Public Service in circumstances where my registration as a security service provider may conflict with a legislative provision applicable to me.
4. The information furnished in this application as well as the content of any document submitted with this application is, to the best of my knowledge, true and correct.

FULL NAME: _____

SIGNATURE: _____

DATE OF APPLICATION: _____

Application fee

TOTAL R200 (VAT Inclusive – (Non Refundable))

BANKING DETAILS

Private Security Industry Regulatory Authority

Bank: Nedbank, Arcadia

Account Number: **1633366200**

Branch Code: **163345**

Ref no: **your ID number**

Security Industry Regulatory Authority
Application Checklist – Individual (RSA CITIZENS)

Name _____

Date _____

<u>NO.</u>	<u>REQUIREMENT</u>	<u>REGULATION</u>
<input type="checkbox"/>	1. Duly completed application form (PSIRA 1)	2(1)
<input type="checkbox"/>	2. Payment of prescribed amounts of R 200 (attach proof)	2(2)(a)
<input type="checkbox"/>	3. Authenticated copy of first page of ID document	2(2)(b)
<input type="checkbox"/>	4. Proof of residence	
<input type="checkbox"/>	5. Authenticated recent clear passport size photo of applicant	2(2)(d)
<input type="checkbox"/>	6. Authenticated clear and complete set of applicant's fingerprints	2(2)(e)
<input type="checkbox"/>	7. Clearance certificate on criminal record status of applicant if answer to question 2 on the application form is "yes"	2(2)(g)
<input type="checkbox"/>	8. Authenticated proof of accredited training (At least grade E must have been captured on PSIRA system)	2(2)(i)
	- Grade E for individual applications (Other grade required in terms of nature of security service to be performed)	3(2)
<input type="checkbox"/>	9. Force clearance certificate in respect of ex-members of any official, military, security, police or intelligence force or service (if the answer to question 3 on the application form is "yes")	2(2)(h)
<input type="checkbox"/>	10. Completed exemption form in terms of Section 23(6) – merit form	

SOUTH AFRICAN POLICE SERVICE ENQUIRY



SUID-AFRIKAANSE POLISIE DIENS NAVRAAG

TO BE COMPLETED IN BLOCK LETTERS

Surname:
 Van:
 Name:
 Naam:
 ID Number:
 ID Nommer:

Sex:
 Geslag:

M	F
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Date of birth:
 Geboortedatum:

SA Citizen:
 SA Burger:
 If not, please state citizenship:
 Indien nie, vermeld burgerskap:

MOET IN BLOKLETTERS VOLTOOI WORD

Address:
 Adres:
 VA-number:
 FA-nommer:
 CR number:
 KR nommer:
 SAP CRC ref. no.
 SAP KRS verw. Nr.

FP class – VA-klas

	Thumb 1	Duum	Forefinger 2	Wysvinger	Middle finger 3	Middelvinger	Ring finger 4	Ringvinger	Little finger 5	Pinkie
RIGHT HAND	vou									
LEFT HAND	vou									
	LEFT HAND LINKER HAND					RIGHT HAND REGTERHAND				
	Plain impression of the four fingers taken simultaneously					Vlakafdrukke van die vier vingers tegelyk geneem				

LEFT THUMB
LINKERDUIM

Reason for enquiry
Aard van navraag

Private Security Industry Regulatory Authority

RIGHT THUMB
REGTERDUIM

Application for registration as a Security Service Provider
Aansoek om registrasie as Sekuriteitsverskaffer

Have you ever been convicted of any offence? If so, state place, date and sentence. Is u ooit weens 'n oortreding skuldig bevind? Indien so, vermeld plek, datum en vonnis. <i>Applicant's signature</i> Handtekening van applicant
Fingerprints taken by: Vingerafdrukke geneem deur:	SAP station: SAP-stasie:
Checked: Nagesien:	Date: Datum: (Station Commander/Stasiebevelvoerder)

THE DIRECTOR
PRIVATE SECURITY INDUSTRY
REGULATORY AUTHORITY
PRIVATE BAG X817
PRETORIA
0001



Private Security Industry
Regulatory Authority (SIRA)

CONTACT NO: (012) 003 0500 / 1
086 133 3850

ANNEXURE TO APPLICATION BY AN
INDIVIDUAL (NATURAL PERSON) –
EXEMPTION FORM i.t.o SECTION 23(6)
(MERIT FORM)

PSiRA
Private Security Industry Regulatory Authority

Application for registration as a security service provider in terms of the Private Security Industry Regulation Act 56 of 2001 ("the Act")

Important note:

In terms of section 23(6) of the Private Security Industry Regulation Act 56 of 2001, despite the provisions of section 23 (1) and (2), the Authority may on good cause shown and on grounds which are not in conflict with the purpose of this Act and the objects of the Authority, register any applicant as a security service provider

1.1 Full name, Surname and ID number of the applicant: _____

1.2 In the event of a criminal record in terms of Section 23(1)(d), pending criminal prosecution(s) or investigations provide a detailed motivation, which must include the nature and facts of the offence, the place, date, and sentence and/or any other information you might think relevant for an EXEMPTION in terms of section 23 (6). Attach a detailed motivation and any other documents or representations you would like to make, so that an informed decision can be taken when considering your exemption in terms of section 23(6).

Tell us what happened. E.g. If it was theft - I stole the.....

Type of offence

Date committed

Conviction

Signature: _____

Date: _____

LIST OF PSIRA BRANCHES AND CONTACT DETAILS

HEAD OFFICE – CENTURION (GAUTENG)		
Physical Address 420 Eco Glades 2 Office Park Highveld Ext 70 Centurion South Africa	Postal Address Private Bag X817 Pretoria 0001	Contact Numbers Telephone Number (012) 003 0503/ 4/ 5/ 6 Or 086 133 3850 Fax Number 086 242 7180 or 086 246 7750
BRANCH – PRETORIA (GAUTENG)		
Physical Address 481 Belvedere Street Arcadia Pretoria 0002	Postal Address Private Bag X817 Pretoria 0001	Contact Numbers Telephone Number (012) 337-5600 Fax Number 086 242 7180 or 086 246 7750
BRANCH – JOHANNESBURG (GAUTENG)		
Physical Address Ground Floor, Intec House 130 Cnr. Marshall & Eloff Street Johannesburg 2001	Postal Address Ground Floor, Intec House 130 Cnr. Marshall & Eloff Street Johannesburg 2001	Contact Numbers Telephone Number (011) 331-0300 Fax Number (011) 331-0302
BRANCH - LIMPOPO		
Physical Address Room 204, 2 nd floor, Parklane Building 76 Hans Van Rensburg Street Polokwane 7001	Postal Address P O Box 11696 Bendor Park 7000	Contact Numbers Telephone Number (015) 297-0209 Fax Number (015) 297-0260
BRANCH - MPUMULANGA		
Physical Address 21 Brander Street Nelspruit 1200	Postal Address P O Box 3413 Nelspruit 1200	Contact Numbers Telephone Number (013) 752-4059 Fax Number (013) 752-4064
BRANCH – KWAZULU-NATAL		
Physical Address 26 Mathews Meyiwa Road Greyville Durban	Postal Address P O Box 47234 Greyville 4031	Contact Numbers Telephone Number (031) 003 0560 Fax Numbers (031) 309 8793
BRANCH – (PE) -EASTERN CAPE		
Physical Address Shop 211-D, 2nd Floor, Pier 14 Center 444 Govan Mbeki Street, North End Port Elizabeth 6000	Postal Address P O Box 416 Port Elizabeth 6000	Contact Numbers Telephone Numbers (041) 001 0011/ 585 1848 Fax Number (041) 585-1878
BRANCH – WESTERN CAPE		
Physical Address 2 nd Floor, Thibault House Thibault Square, Hans Strydom Ave Cape Town 7500	Postal Address P O Box 7442 Roggebaai 8012	Contact Numbers Telephone Numbers (021) 425-2370/1/2/3 Fax Number (021) 425-2377
BRANCH – (UMTATA) – EASTERN CAPE		
Physical Address 13 Cumberland Street, Mthatha 5099	Postal Address Suite 357 Private Bag X5109 Umtata 5099	Contact Numbers Telephone Number 047 495 0260 Fax Number 047 531 0634