



**AANSOEK OM LIDMAATSKAP  
WYNDRIIFPRODUSENT**

**APPLICATION FOR MEMBERSHIP  
WINE GRAPE PRODUCER**

**VEREISTE VIR LIDMAATSKAP:**  
*Produseer minstens 5 (vyf) ton wyndruiwe in 'n SADC-land en lewer dit aan 'n kelder vir die maak van wyn, spiritueelieë of sap, as 'n geregistreerde SAWIS-lid.*

**FOOIE:**  
 Aansoekfooi: R500 (BTW ing).  
 Jaarlikse fooi: Onder oorweging vanaf Julie 2018.

**NEEM KENNIS:**  
 Vinpro-lidmaatskap is nie aan 'n drankkwota gekoppel nie.

**AANSOEKE & NAVRAE:**  
 Tel: 021 276 0458, E-pos: member@vinpro.co.za

**MEMBERSHIP REQUIREMENT:**  
*Produce at least 5 (five) tons of wine grapes in a SADC country to a cellar for the production of wine, spirits or juice, as a registered SAWIS member.*

**FEES:**  
 Application fee: R500 (VAT incl).  
 Annual fee: Under consideration from July 2018.

**PLEASE NOTE:**  
 Vinpro membership is not linked to a liquor quota of any kind.

**APPLICATIONS & ENQUIRIES:**  
 Tel: 021 276 0458, E-mail: member@vinpro.co.za

**BESONDERHEDE / DETAILS**

**NAAM VAN LID:  
NAME OF MEMBER:**

**KONTAKPERSOON NAAM & VAN:  
CONTACT PERSON NAME & SURNAME:**

**POSADRES:  
POSTAL ADDRESS:**

**FISIESE ADRES:  
PHYSICAL ADDRESS:**

**TEL NO:**

**FAKS/FAX NO:**

**SEL/CELL NO:**

**E-POS/E-MAIL:**

**MERK WAAR VAN TOEPASSING / MARK WHERE APPLICABLE:**

<b>MPY/CO</b>	<b>BK/CC</b>	<b>TRUST</b>	<b>VENNOOTSKAP/PARTNERSHIP</b>	<b>INDIVIDU/INDIVIDUAL</b>
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**BESONDERHEDE VAN REGSENTITEIT VERTEENWOORDIGER (INDIEN ENTITEIT):  
DETAILS OF LEGAL ENTITY REPRESENTATIVE (IF ENTITY):**

**VOLLE NAME/FULL NAMES**

**ID NO**

**HANDTEKENING/SIGNATURE\***

**HEG AFSCRIFTE VAN DIE VOLGENDE DOKUMENTE AAN, WAAR VAN TOEPASSING:  
ATTACH COPIES OF THE FOLLOWING DOCUMENTS, WHERE APPLICABLE:**

<b>REGSENTITEIT: LEGAL ENTITY:</b>	<b>ALLE/ALL</b>	<b>MPY/ CO</b>	<b>BK/CC</b>	<b>TRUST</b>	<b>VENNOOTSKAP PARTNERSHIP</b>	<b>INDIVIDU INDIVIDUAL</b>	<b>ID Document</b>
	Getekende resolu- sion re ver- teenwoordiger (aangeheg) Signed resolu- tion re represen- tative (attached)	Sertifikaat van inlywing Certificate of incorporation	Stigtings- verklaring Founding statement	Trustakte Deed of Trust	Vennootskaps- ooreenkoms Partnership agreement		

\* Teken of vul voorletter en van in / Sign or enter initial and surname.

**SAWIS  
INLIGTING / INFORMATION**

**SAWIS NOMMER:  
SAWIS NUMBER:**

Plaasnaam/Farm name:

Plaasnommer Farm number	District Distrik	Verbou as Cultivated as	Ha onder wingerd Ha under vines	Tonne geproduseer Tonnes produced
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Plaasnaam/Farm name:

Plaasnommer Farm number	District Distrik	Verbou as Cultivated as	Ha onder wingerd Ha under vines	Tonne geproduseer Tonnes produced
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Plaasnaam/Farm name:

Plaasnommer Farm number	District Distrik	Verbou as Cultivated as	Ha onder wingerd Ha under vines	Tonne geproduseer Tonnes produced
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**SAWIS NOTAS / NOTES**

**DISTRIK / DISTRICT:**

Oranjerivier / Orange River	Robertson
Olifantsrivier / Olifants River	Stellenbosch
Swartland	Worcester
Klein Karoo	Breedekloof
Paarl	

**VERBOU AS / CULTIVATED AS:**

Eienaar / Owner
Huurder / Lessee
Deelboer / Sharecropper
Vruggebruiker / Usufructuary

**KELDERINLIGTING / CELLAR INFORMATION**

**NAAM VAN KELDER(S) WAAR U WYNDRUIWE LEWER:  
NAME OF CELLAR(S) WHERE YOU DELIVER WINE GRAPES:**


**AANSOEKER OF GEMAGTIGDE VERTEENWOORDIGER / APPLICANT / AUTHORISED REPRESENTATIVE**

*Ek verklaar dat die inligting verstrek, waar en juis is. Indien die aansoek deur die direksie goedgekeur word, onderneem ek in my persoonlike hoedanigheid, of as verteenwoordiger van 'n regsentiteit, om my/ons te onderwerp aan die bepalings van die Akte van Vinpro, ingesluit die organisasie se waardes en om alle reëls/verpligtinge na te kom. Verder, gee ek/ons toestemming dat inligting wat betrekking het op hierdie aansoek of my/ons toekomstige lidmaatskap status, by SAWIS aangevra mag word.*

*I hereby declare that the information herein is true and correct. If my/our application is approved by the board I, in my personal capacity, or as representative of the legal entity, undertake to subject myself/ourselves to the provisions of the MOI of Vinpro, including the organisation's values and to adhere to all the rules/obligations thereunder. Furthermore, I/we give permission that information concerning this application or my/our future membership status, may be requested from SAWIS.*

**NAAM/NAME:**

**HANDTEKENING/SIGNATURE\*:**

**DATUM/DATE:**

\* Teken of vul voorletter en van in / Sign or enter initial and surname.