



Buying Group Application Form

2U Foods Head Office
Rowles Road, Mostyn Park
Kya Sands, Johannesburg
Tel: 012 753 9350

Web: www.2ufoods.co.za

Email: sales@2ufoods.co.za



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BUYING GROUP APPLICATION FORM

Company Name /Full Names:	
Registration Number/ Identity Number:	
Address:	
Tel No:	Cell:
Date:	Email
How did you hear about the 2UFoods Buying Group Opportunity?	
Proof of application fee attached? Yes/No	

INTRUCTIONS

1. Reflect and take some time to complete this application form
2. Make sure that each question is read and answered carefully
3. Please write neatly and clearly
4. All the information provided should be up-to-date and accurate
5. Any question that might appear unclear and needs clarity should be immediately forwarded to the Head Office
6. The below information should all be forwarded to sales@2ufoods.co.za
 - Signed and completed application form
 - Company Registration Certificates
 - Copies of CVs/ all Directors of the Company
 - Clear copies of Identity Documents / all Company Directors
 - Proof of Residence/ all Company Directors
 - Proof of application fee payment
 - Bank confirmation letter of Business Account; ie Proof of Business Account
 - Proof of Buying Group purchase funds/ or Commitment from the Funder/ or a
 - Proof of Buying deposit in the registered company name or personal name or bank statement clearly indicating the status of the account.

Please also attach any necessary document that you might feel will be of important to cement the evaluation process and to be kept in our files. A non-refundable fee of **R 600 (six hundred rands)** must accompany this application form to cover for the admin and processing cost.

BANKING DETAILS FOR THE APPLICATION FEE PAYMENT

FNB

Account Name: **2UFoods (Pty) Ltd**
Account Number: **62725046842**
Branch Code: **250655**
Reference: **Your Name & Surname or Company Name**

RETAIL STORE LOGO



IKHAPELA LOGO



PRELIMINARY DETAILS OF PROSPECTIVE MEMBER:

A. Nature of intended business ownership (mark with an x)

Sole Proprietorship		Closed Corporation		Private Company		Partnership	
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Company Registration Number:	Tax Number:
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Business Account Number:	Bank Name:	Branch Name:
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If Sole Proprietor

Full Names:		
Surname:		Identity Number:

B. If other than a Sole Proprietor, details of all Directors/ Members/ Partners/ Shareholders should be provided.

NB: Please submit an individual copy of the below if other than a Sole Proprietor, i.e, a copy for each individual partner, Director, Member or Shareholder.

Full Names:	Equity (%)
Surname:	Identity Number:
Address:	
Tel no:	Email:
	Cell:

Full Names:	Equity (%)
Surname:	Identity Number:
Address:	
Tel no:	Email:
	Cell:

Full Names:	Equity (%)
Surname:	Identity Number:
Address:	
Tel no:	Email:
	Cell:

C. In a manner of the priority areas of operation, please provide the possible areas that you would like to have a 2UFoods Retail Store

	Province	Township	Rural Area
I			
II			
III			

Is potential site or location already identified? If yes, please provide where?	
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D. Details about the Unencumbered Funds for the initial Deposit or Capital Investment.

Please take note that a minimum amount of R 127 500 (excl Vat) in available funds, unsecured by any creditor must be in the possession of the applicant, to be made available for immediate investment in to the business.

Total Available Funds:	
Balance details of Funds, a brief description of status of these funds and proof.	

E. Further details of the expected Finance available to close off the balance of the required Capital Investment.

Financial Institution		
Type of loan facility		
Available Security		
Has the loan been Pre-Approved?	Yes/No	
Loan Application Assistance required?	Yes/No	

F. Operational Plans on Management of the Retail Store

Will the Member manage the store or someone else? Yes/No



I. Current Personal Banking

Bank	Branch Name	Cheque/Savings	Account Number

J. Declaration

I/We (Name of Member/Business/Partners/Director) hereby declare that all the above information is the truth and correct to the best of my knowledge and that I shall make all other necessary financial information available if requested. I'm also aware that submission of the attached documents does not equals an automatic success of the application. I hereby authorise **2UFoods (Pty) Ltd** Head Office to make any relevant enquiries about our/my credit history, ability to pay, character and to contact anyone that might provide the details, whether listed on the original application, to establish and obtain the personal financial information about me/us. I/We release all such person from any liability or damages that may be incurred because of such inquiry or of the information furnishing of such information. All personal details and disclosures shall be kept confidential.

I grant the 2U Foods (Pty) Ltd in addition and agreeing that they should perform a credit search on the Applicant's record with a registered credit bureau when assessing the Applicant's application forms.

Signed aton this.....day of.....20.....

.....
Applicant's Signature(s)

.....
Witness Signature
Name :.....
Surname :.....
I.D No:

.....
Witness Signature

Name :.....
Surname :.....
I.D No:

FOR OFFICE USE ONLY	
SITE DETAILS	DOCUMENT CHECKLIST
SITE NO.: _____ PROVINCE: _____ MUNICIPALITY: _____	<input type="checkbox"/> Company Registration Documents (if Applicable). <input type="checkbox"/> Copies of CV's/All Director's of the Company <input type="checkbox"/> Clear copies of Identity Documents/All Directors of Company <input type="checkbox"/> Proof of Residence/All Company Directors <input type="checkbox"/> Proof Payment for the Application Fee <input type="checkbox"/> Bank Confirmation Letter of Business Account; i.e. Proof of Account <input type="checkbox"/> Proof of Buying Group purchase funds/or Commitment from the Funder, or <input type="checkbox"/> Proof of Buying deposit in the Registered Company Name or Personal name or or bank statement clearly
ISSUED DOCUMENTS TO CLIENT Please note that the below-listed documents will be released to the Client only upon receipt of the following funds: *R600 Administration Fee(deposited) *The Client's own "equity contribution/his own money" of R30 000 OR a "Deposit Payment" of more than R127 000 towards the required R299 000 for the Movable panel Store	
<input type="checkbox"/> Funds receipt Acknowledgement Letter <input type="checkbox"/> Business Plan for the Movable Panel Store <input type="checkbox"/> Lease of Panel Store Agreement Kindly note that upon receipt of the full Panel Store Purchase Price of R299 000, the following documents will then be sent to the Client.	
<input type="checkbox"/> Welcome Letter <input type="checkbox"/> Buying Group Agreement (Contract between 2UFoods and Member) <input type="checkbox"/> Lease of Panel Store Agreement <input type="checkbox"/> Lease of Land Agreement	

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Next Steps:

Please deposit your contribution to the Trust Account administered by M. R. Phala Attorneys. Contact Person: Mr. Bophelo Malapela, to secure your movable panel store pending signature of all agreements and meeting of all terms and conditions for operation. This will ensure that your panel store is guaranteed and secured. The monies will only be released by the Attorney's to 2UFoods upon confirmation of delivery of your panel store by 2UFoods and the Items Covered By Your Contribution.

Due to the high interest and demand, those who have not secured Panel Stores with the total initial cost of R299 000-00 will be waitlisted as we will only launch one thousand stores in Phase 1.

Phase 2 will follow after Easter 2021 and we will advise you and see if you are interested in waiting and either refund you or move you to the top of the list depending on your choice.

Please capture your payment reference as follow: Name, Surname, Area and 2UFOODS

Thank U
U Foun Wi Diliva

Trust Account: Mr Phala Attorneys
Bank Name: Standard Bank
Acc No.: 021 034 192
Branch Name: 01192
Account Type: Trust Cheque Acc