



# Buying Group Application Form

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

**Web:** [www.2ufoods.co.za](http://www.2ufoods.co.za)

**Email:** [sales@2ufoods.co.za](mailto: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? <b>Yes/No</b>	

### 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



**D. Details about the Unencumbered Funds for the initial Deposit or Capital Investment.**

Please take note that a minimum amount of R50 000 (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





## 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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  - 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. *An amount of R6 800; which is for the panel store foundation, must be paid to the 2UFoods account below:*

## 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**

### 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