

ESTATE LATE

PLEASE COMPLETE THIS FORM IN THE NAME OF THE ENTITY TO WHICH THE INVOICE IS TO BE ADDRESSED I.E. THE EXECUTOR AND ATTACH COPIES OF THE SUPPORTING DOCUMENTS:

Copy of Identity Book of the Deceased (preferably colour copy)

Copy of Death Certificate

Letters of Executorship appointing the Executors (to be provided once received from the Master's Office)

Certified copy of Identity Document (colour copy) for each Executor together with a document confirming proof of residence of the Executor

ESTATE LATE	
	South African CitizenX Non South African Citizen
Surname of the Deceased	
First names of the Deceased	
Identity Number of Deceased:	
Estate Number & income tax number (if applicable)

DETAILS OF EXECUTOR			
		South African CitizenX Non South African Citizen	
	Surname		
	First Name		
	Identity/Passport Number		
	Income Tax Number:		
	Residential Address	Number	
		Building name	
		Street name	
		Suburb	
		City	
	Postal Address		
	Email Address		
	Home Telephone Number		
	Business Telephone Number		
	Cell Phone Number	-	
	Business Telefax Number	-	

<p><u>Source of funds for payment</u> for services e.g. Name of bank account and confirm whether Cheque account / credit account/ other. If other please specify.</p>	
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Contents confirmed by _____ Date _____