

Client Ref: (customer code)

R50

REPUBLIC OF SOUTH AFRICA
CO-OPERATIVES ACT, 2005

**APPLICATION FOR RESERVATION OF NAME
OR TRANSLATED FORM OR SHORTENED FORM OF NAME**
(Regulation 11)

A. Proposed Name or Translated Form or Shortened Form

(Indicate with a cross)

In order of preference	For office use
1.	approved/not approved
2.	approved/not approved
3.	approved/not approved
4.	approved/not approved
5.	approved/not approved
6.	approved/not approved
Reservation is valid for six months	

B. Is the proposed name associated with a person, co-operative or a company? If so, what is the name and number (if a co-operative or company) and the nature of the association (e.g. member, director etc)?

C. Main object/business of the co-operative/proposed co-operative:

Name of applicant (print): _____

Address to which form must be returned (if not lodged electronically): _____

Signature of applicant: _____

Date: _____