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The Executive Officer
Social Security Commission
Private Bag 13223
Windhoek

Tel: 061-2807224
Fax: 061-280140/121

REQUEST FOR GOOD STANDING CERTIFICATE

Trade Name : _____

Postal Address: _____

Social Security Number: _____

Employees' Compensation Number: _____

Nature of business: _____

No. of registered employees: _____

Name of contact person: _____ Tel: _____

Contact Telephone Number: _____

Email address: _____

TENDER NUMBER/S	CLOSING DATE

Employer Signature

Date

NB: PLEASE SUBMIT YOUR REQUEST TWO DAYS BEFORE THE CERTIFICATE IS REQUIRED.

FOR OFFICIAL USE		
Received by: _____	Date: _____	Time _____
Issued by: _____	Date: _____	
Remarks: _____		