



BPVA

BLACK PROFESSIONAL VALUERS ASSOCIATION

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APPLICATION AND MEMBER REGISTRATION

BANKING DETAIL Account holder: Black Professional Valuers Association Bank: First National Bank, Johannesburg Account Number: 62658240628 Reference: <i>(Please provide your Name and Surname)</i>	INSTRUCTIONS <ul style="list-style-type: none"> Application form to be completed in BLOCK Letters and, where applicable, selections indicated with a cross (x) in the appropriate block Submit completed Application together with: <ul style="list-style-type: none"> a. Registration Fee (Non-refundable) b. Proof of registration with the council (SACPVP) c. ID / Passport (Certified Copy)
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Membership Type	Student	Candidate Valuers	Professional Associate Valuers	Professional Valuers
Preferred language of correspondence:	<input checked="" type="checkbox"/> Afrikaans	<input checked="" type="checkbox"/> English		
First Name				
Surname				
ID Number			Date of Birth	YYYY/MM/DD
Place of Birth				
Nationality	Race:		e.g. African/Indian/Caucasian	
Are you ordinarily resident in the Republic of South Africa	<input checked="" type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
If no, please indicate where you are ordinarily resident				
Residential Address:				Postal Code
Postal Address:				Postal Code
Full Business Address <i>(Not postal)</i>				
Tel No:	Fax No	Cell		
Email				

SECTION 2 - EXPERIENCE IN THE VALUATION OF IMMOVABLE PROPERTY:

Name and address of present employer				Postal Code		
Your designation/position			Position held since	YYYY/MM/DD		
Engagement in property valuation	<input checked="" type="checkbox"/> Part Time	<input checked="" type="checkbox"/> Full Time				
If part time, what is your main occupation						
Specialised field of valuation	<input checked="" type="checkbox"/> Residential	<input checked="" type="checkbox"/> Agricultural	<input checked="" type="checkbox"/> Commercial	<input checked="" type="checkbox"/> Industrial	<input checked="" type="checkbox"/> Retail	<input checked="" type="checkbox"/> Other
If other please specify						

SECTION 3 – CONDUCT

Have you at any time by reason of improper conduct been dismissed from a position of trust	<input checked="" type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Have you ever been convicted of any offence involving an element of dishonesty:	<input checked="" type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
If Yes, please provide details		

SECTION 4 – DECLARATION

I, _____ solemnly declare that the above particulars are true and correct

SIGNATURE: _____ SIGNED AT: _____ DATE: _____ 20__