Opening of an Additional Account

UNRESTRICTED

Date 0 3 0 8 2 0 1 2

Dear

Opening of additional account(s) with Absa Bank Limited (Reg no 1986/004794/06) and VAT registration number 490112230, a public company duly registered as a bank under the laws of the Republic of South Africa with its registered address at 7th Floor, Absa Towers West, 15 Troye Street, Johannesburg, 2001, and conducting business from

("Absa")

Registration no N/A

We kindly request you to open additional account(s) for Nelson Mandela Bay Metropolitan Municipality

(name of the client should be the same as the name of the client appearing on the letterhead)

Date of signing product terms and conditions 0 1 0 8 2 0 1 2

Account name 1 Debit Order Account	Block debit orders Account name 1		✓
Account name 2	Block debit orders Account name 2		
Account name 3	Block debit orders Account name 3		

OPTION 1

We authorise the following mandated official(s) to act for/and on our behalf on the additional account:

1	2	3
(Capacity, eg CFO/CEO)	(Capacity, eg CFO/CEO)	(Capacity, eg CFO/CEO)

Please find attached a resolution, a power of attorney or a delegation of powers in terms of which the above mandated official(s) have been authorised to act for and on our behalf.

OPTION 2

(Note: If the client wants mandated officials to act)

We authorise the mandated officials as per the resolution dated _____ and whose details you have, to also act on the requested additional account.

According to our records the name(s) of the mandated official(s) is/are _____ and/or

_____ and/or

_____

(Capacity, eg CFO/CEO)

We confirm that we:

- have completed and signed Absa's standard terms and conditions as amended applicable to accounts;
- acknowledge that we are bound to the said terms and conditions, and agree that, by signing this document we agree to the opening of an additional account as contemplated in this document, on the said terms and conditions;
- will advise Absa if and when any of our circumstances, contact details, or authorised representatives change; and
- will advise Absa of any change in respect of the information provided to Absa which enabled Absa to open previous account(s) including but not limited to our name, physical address, postal address, contact details, personal details of authorised representatives, address of authorised representatives or contact details of authorised representatives.

The above wording in bold constitutes an acknowlegment of fact by the client. The client must read the above carefully and ensure that each statement is true and correct as this will limit the rights of the client to claim that this statement is not true and correct. The bank may also have claims and other rights against the client if this statement is not true and correct.

We look forward to receiving the details of the additional account.

Yours Sincerely

_____

*(signed by authorised representatives)

*Insert capacity DIRECTOR : OFFICE OF THE TREASURY

*(director/member/trustee/chairman/company secretary)

_____

*(signed by authorised representatives)

*Insert capacity _____

*(director/member/trustee/chairman/company secretary)

Opening of an Additional Account

UNRESTRICTED

Date 0 3 0 8 2 0 1 2

Dear

Opening of additional account(s) with Absa Bank Limited (Reg no 1986/004794/06) and VAT registration number 490112230, a public company duly registered as a bank under the laws of the Republic of South Africa with its registered address at 7th Floor, Absa Towers West, 15 Troye Street, Johannesburg, 2001, and conducting business from

("Absa")

Registration no N/A

We kindly request you to open additional account(s) for Nelson Mandela Bay Metropolitan Municipality

(name of the client should be the same as the name of the client appearing on the letterhead).

Date of signing product terms and conditions 0 1 0 8 2 0 1 2

Account name 1 No. 3 Account (Creditor Payments)	Block debit orders Account name 1		✓
Account name 2	Block debit orders Account name 2		
Account name 3	Block debit orders Account name 3		

OPTION 1

We authorise the following mandated official(s) to act for/and on our behalf on the additional account.

1	2	3
(Capacity, eg CFO/CEO)	(Capacity, eg CFO/CEO)	(Capacity, eg CFO/CEO)

Please find attached a resolution, a power of attorney or a delegation of powers in terms of which the above mandated official(s) have been authorised to act for and on our behalf.

OPTION 2

(Note: If the client wants mandated officials to act)

We authorise the mandated officials as per the resolution dated _____ and whose details you have, to also act on the requested additional account.

According to our records the name(s) of the mandated official(s) is/are and/or

and/or

(Capacity, eg CFO/CEO)

We confirm that we:

as amended

- have completed and signed Absa's standard terms and conditions applicable to accounts;
- acknowledge that we are bound to the said terms and conditions, and agree that, by signing this document we agree to the opening of an additional account as contemplated in this document, on the said terms and conditions;
- will advise Absa if and when any of our circumstances, contact details, or authorised representatives change; and
- will advise Absa of any change in respect of the information provided to Absa which enabled Absa to open previous account(s) including but not limited to our name, physical address, postal address, contact details, personal details of authorised representatives, address of authorised representatives or contact details of authorised representatives.

The above wording in bold constitutes an acknowlegment of fact by the client. The client must read the above carefully and ensure that each statement is true and correct as this will limit the rights of the client to claim that this statement is not true and correct. The bank may also have claims and other rights against the client if this statement is not true and correct.

We look forward to receiving the details of the additional account.

Yours Sincerely

*(signed by authorised representatives)

*Insert capacity DIRECTOR: OFFICE OF THE TREASURY

*(director/member/trustee/chairman/company secretary)

*(signed by authorised representatives)

*Insert capacity

*(director/member/trustee/chairman/company secretary)

Opening of an Additional Account

UNRESTRICTED

0 3 0 8 2 0 1 2

Dear

Opening of additional account(s) with Absa Bank Limited (Reg no 1986/004794/06) and VAT registration number 4901122230, a public company duly registered as a bank under the laws of the Republic of South Africa with its registered address at 7th Floor, Absa Towers West, 15 Troye Street, Johannesburg, 2001, and conducting business from

("Absa")

Registration no N/A

We kindly request you to open additional account(s) for Nelson Mandela Bay Metropolitan Municipality

(name of the client should be the same as the name of the client appearing on the letterhead).

Date of signing product terms and conditions 01 08 2012

Account name 1 Metered Services Account	Block debit orders Account name 1		✓
Account name 2	Block debit orders Account name 2		
Account name 3	Block debit orders Account name 3		

OPTION 1

We authorise the following mandated official(s) to act for/and on our behalf on the additional account:

1	2	3
(Capacity, eg CFO/CEO)	(Capacity, eg CFO/CEO)	(Capacity, eg CFO/CEO)

Please find attached a resolution, a power of attorney or a delegation of powers in terms of which the above mandated official(s) have been authorised to act for and on our behalf.

OPTION 2

(Note: If the client wants mandated officials to act)

We authorise the mandated officials as per the resolution dated _____ and whose details you have, to also act on the requested additional account.

According to our records the name(s) of the mandated official(s) is/are and/or

and/or

(Capacity, eg CFO/CEO)

We confirm that we:

- have completed and signed Absa's standard terms and conditions as amended applicable to accounts;
- acknowledge that we are bound to the said terms and conditions, and agree that, by signing this document we agree to the opening of an additional account as contemplated in this document, on the said terms and conditions;
- will advise Absa if and when any of our circumstances, contact details, or authorised representatives change; and
- will advise Absa of any change in respect of the information provided to Absa which enabled Absa to open previous account(s) including but not limited to our name, physical address, postal address, contact details, personal details of authorised representatives, address of authorised representatives or contact details of authorised representatives.

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We look forward to receiving the details of the additional account.

Yours Sincerely

*(signed by authorised representative)

*Insert capacity Director : Office of the Treasury

*(director/member/trustee/chairman/company secretary)

*(signed by authorised representative)

*Insert capacity

*(director/member/trustee/chairman/company secretary)

Opening of an Additional Account

UNRESTRICTED

Date 0 3 0 8 2 0 1 2

Dear

Opening of additional account(s) with Absa Bank Limited (Reg no 1986/004794/06) and VAT registration number 4901112230, a public company duly registered as a bank under the laws of the Republic of South Africa with its registered address at 7th Floor, Absa Towers West, 15 Troye Street, Johannesburg, 2001, and conducting business from

("Absa")

Registration no

We kindly request you to open additional account(s) for Nelson Mandela Bay Metropolitan Municipality

(name of the client should be the same as the name of the client appearing on the letterhead)

Date of signing product terms and conditions 0 1 0 8 2 0 1 2

Account name 1 Post Office Account	Block debit orders Account name 1		✓
Account name 2	Block debit orders Account name 2		
Account name 3	Block debit orders Account name 3		

OPTION 1

We authorise the following mandated official(s) to act for/and on our behalf on the additional account:

1	2	3
(Capacity, eg CFO/CEO)	(Capacity, eg CFO/CEO)	(Capacity, eg CFO/CEO)

Please find attached a resolution, a power of attorney or a delegation of powers in terms of which the above mandated official(s) have been authorised to act for and on our behalf.

OPTION 2

(Note: If the client wants mandated officials to act)

We authorise the mandated officials as per the resolution dated _____ and whose details you have, to also act on the requested additional account.

According to our records the name(s) of the mandated official(s) is/are and/or

and/or

(Capacity, eg CFO/CEO)

We confirm that we: as amended

- have completed and signed Absa's standard terms and conditions applicable to accounts;
- acknowledge that we are bound to the said terms and conditions, and agree that, by signing this document we agree to the opening of an additional account as contemplated in this document, on the said terms and conditions;
- will advise Absa if and when any of our circumstances, contact details, or authorised representatives change; and
- will advise Absa of any change in respect of the information provided to Absa which enabled Absa to open previous account(s) including but not limited to our name, physical address, postal address, contact details, personal details of authorised representatives, address of authorised representatives or contact details of authorised representatives.

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We look forward to receiving the details of the additional account.

Yours Sincerely

*(signed by authorised representatives)

*Insert capacity Director : Office of the Treasury

*(director/member/trustee/chairman/company secretary)

*(signed by authorised representatives)

*Insert capacity

*(director/member/trustee/chairman/company secretary)

Opening of an Additional Account

UNRESTRICTED

Date 0 3 0 8 2 0 1 2

Dear

Opening of additional account(s) with Absa Bank Limited (Reg no 1986/004794/06) and VAT registration number 4901122310, a public company duly registered as a bank under the laws of the Republic of South Africa with its registered address at 7th Floor, Absa Towers West, 15 Troye Street, Johannesburg, 2001, and conducting business from

("Absa")

Registration no N/A

We kindly request you to open additional account(s) for Nelson Mandela Bay Metropolitan Municipality

(name of the client should be the same as the name of the client appearing on the letterhead).

Date of signing product terms and conditions 0 1 0 8 2 0 1 2

Account name 1 Cash Centre Deposit Account	Block debit orders Account name 1		✓
Account name 2	Block debit orders Account name 2		
Account name 3	Block debit orders Account name 3		

OPTION 1

We authorise the following mandated official(s) to act for/and on our behalf on the additional account:

1	2	3
(Capacity, eg CFO/CEO)	(Capacity, eg CFO/CEO)	(Capacity, eg CFO/CEO)

Please find attached a resolution, a power of attorney or a delegation of powers in terms of which the above mandated official(s) have been authorised to act for and on our behalf.

OPTION 2

(Note: If the client wants mandated officials to act)

We authorise the mandated officials as per the resolution dated _____ and whose details you have, to also act on the requested additional account.

According to our records the name(s) of the mandated official(s) is/are and/or

and/or

(Capacity, eg CFO/CEO)

We confirm that we:

- have completed and signed Absa's standard terms and conditions as amended applicable to accounts;
- acknowledge that we are bound to the said terms and conditions, and agree that, by signing this document we agree to the opening of an additional account as contemplated in this document, on the said terms and conditions;
- will advise Absa if and when any of our circumstances, contact details, or authorised representatives change; and
- will advise Absa of any change in respect of the information provided to Absa which enabled Absa to open previous account(s) including but not limited to our name, physical address, postal address, contact details, personal details of authorised representatives, address of authorised representatives or contact details of authorised representatives.

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We look forward to receiving the details of the additional account.

Yours Sincerely

*(signed by authorised representatives)

*Insert capacity Director: Office of the Treasury

*(director/member/trustee/chairman/company secretary)

*(signed by authorised representatives)

*Insert capacity

*(director/member/trustee/chairman/company secretary)

Opening of an Additional Account

UNRESTRICTED

0 3 0 8 2 0 1 2

Dear

Opening of additional account(s) with Absa Bank Limited (Reg no 1986/004794/06) and VAT registration number 490112230, a public company duly registered as a bank under the laws of the Republic of South Africa with its registered address at 7th Floor, Absa Towers West, 15 Troye Street, Johannesburg, 2001, and conducting business from

("Absa")

Registration no N/A

We kindly request you to open additional account(s) for Nelson Mandela Bay Metropolitan Municipality

(name of the client should be the same as the name of the client appearing on the letterhead).

Date of signing product terms and conditions 01 08 2012

Account name 1 IVR Pay By Phone	Block debit orders Account name 1
Account name 2	Block debit orders Account name 2
Account name 3	Block debit orders Account name 3

OPTION 1

We authorise the following mandated official(s) to act for/and on our behalf on the additional account:

1	2	3
(Capacity, eg CFO/CEO)	(Capacity, eg CFO/CEO)	(Capacity, eg CFO/CEO)

Please find attached a resolution, a power of attorney or a delegation of powers in terms of which the above mandated official(s) have been authorised to act for and on our behalf.

OPTION 2

(Note: If the client wants mandated officials to act)

We authorise the mandated officials as per the resolution dated _____ and whose details you have, to also act on the requested additional account.

According to our records the name(s) of the mandated official(s) is/are _____ and/or

_____ and/or

_____

(Capacity, eg CFO/CEO)

We confirm that we:

- have completed and signed Absa's standard terms and conditions applicable to accounts; as amended
- acknowledge that we are bound to the said terms and conditions, and agree that, by signing this document we agree to the opening of an additional account as contemplated in this document, on the said terms and conditions;
- will advise Absa if and when any of our circumstances, contact details, or authorised representatives change; and
- will advise Absa of any change in respect of the information provided to Absa which enabled Absa to open previous account(s) including but not limited to our name, physical address, postal address, contact details, personal details of authorised representatives, address of authorised representatives or contact details of authorised representatives.

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We look forward to receiving the details of the additional account.

Yours Sincerely

*(signed by authorised representatives)

*Insert capacity Director: Office of the Treasury
*(director/member/trustee/chairman/company secretary)

*(signed by authorised representatives)

*Insert capacity
*(director/member/trustee/chairman/company secretary)

Opening of an Additional Account

UNRESTRICTED

Date 0 3 0 8 2 0 1 2

Dear

Opening of additional account(s) with Absa Bank Limited (Reg no 1986/004794/06) and VAT registration number 4901122301, a public company duly registered as a bank under the laws of the Republic of South Africa with its registered address at 7th Floor, Absa Towers West, 15 Troye Street, Johannesburg, 2001, and conducting business from

("Absa")

Registration no MA

We kindly request you to open additional account(s) for Nelson Mandela Bay Metropolitan Municipality

(name of the client should be the same as the name of the client appearing on the letterhead)

Date of signing product terms and conditions 0 1 0 8 2 0 1 2

Account name 1 Electronic Payments Settlement Account	Block debit orders Account name 1	✓
Account name 2	Block debit orders Account name 2	
Account name 3	Block debit orders Account name 3	

OPTION 1

We authorise the following mandated official(s) to act for/and on our behalf on the additional account:

1 (Capacity, eg CFO/CEO)

2 (Capacity, eg CFO/CEO)

3 (Capacity, eg CFO/CEO)

Please find attached a resolution, a power of attorney or a delegation of powers in terms of which the above mandated official(s) have been authorised to act for and on our behalf

OPTION 2

(Note: If the client wants mandated officials to act)

We authorise the mandated officials as per the resolution dated and whose details you have, to also act on the requested additional account.

According to our records the name(s) of the mandated official(s) is/are and/or

and/or

(Capacity, eg CFO/CEO)

We confirm that we:

- have completed and signed Absa's standard terms and conditions as amended applicable to accounts;
- acknowledge that we are bound to the said terms and conditions, and agree that, by signing this document we agree to the opening of an additional account as contemplated in this document, on the said terms and conditions;
- will advise Absa if and when any of our circumstances, contact details, or authorised representatives change; and
- will advise Absa of any change in respect of the information provided to Absa which enabled Absa to open previous account(s) including but not limited to our name, physical address, postal address, contact details, personal details of authorised representatives, address of authorised representatives or contact details of authorised representatives.

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We look forward to receiving the details of the additional account.

Yours Sincerely

*(signed by authorised representatives)

*Insert capacity Director : Office of the Treasury

*(director/member/trustee/chairman/company secretary)

*(signed by authorised representatives)

*Insert capacity

*(director/member/trustee/chairman/company secretary)

Opening of an Additional Account

UNRESTRICTED

Date | 0 | 3 | 0 | 8 | 2 | 0 | 1 | 2 |

Dear

Opening of additional account(s) with Absa Bank Limited (Reg no 1986/004794/06) and VAT registration number 490112230, a public company duly registered as a bank under the laws of the Republic of South Africa with its registered address at 7th Floor, Absa Towers West, 15 Troye Street, Johannesburg, 2001, and conducting business from

("Absa")

Registration no N/A

We kindly request you to open additional account(s) for Nelson Mandela Bay Metropolitan Municipality

(name of the client should be the same as the name of the client appearing on the letterhead).

Date of signing product terms and conditions 0 1 0 8 2 0 1 2

Account name 1 No. 2 Account (Investments)	Block debit orders Account name 1		✓
Account name 2	Block debit orders Account name 2		
Account name 3	Block debit orders Account name 3		

OPTION 1

We authorise the following mandated official(s) to act for/and on our behalf on the additional account:

1 (Capacity, eg CFO/CEO) 2 (Capacity, eg CFO/CEO) 3 (Capacity, eg CFO/CEO)

Please find attached a resolution, a power of attorney or a delegation of powers in terms of which the above mandated official(s) have been authorised to act for and on our behalf.

OPTION 2

(Note: If the client wants mandated officials to act)

We authorise the mandated officials as per the resolution dated and whose details you have, to also act on the requested additional account.

According to our records the name(s) of the mandated official(s) is/are and/or

and/or

(Capacity, eg CFO/CEO)

We confirm that we:

- have completed and signed Absa's standard terms and conditions as amended applicable to accounts;
- acknowledge that we are bound to the said terms and conditions, and agree that, by signing this document we agree to the opening of an additional account as contemplated in this document, on the said terms and conditions;
- will advise Absa if and when any of our circumstances, contact details, or authorised representatives change; and
- will advise Absa of any change in respect of the information provided to Absa which enabled Absa to open previous account(s) including but not limited to our name, physical address, postal address, contact details, personal details of authorised representatives, address of authorised representatives or contact details of authorised representatives.

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We look forward to receiving the details of the additional account.

Yours Sincerely

*(signed by authorised representatives)

*Insert capacity Director: Office of the Treasury

*(director/member/trustee/chairman/company secretary)

*(signed by authorised representatives)

*Insert capacity

*(director/member/trustee/chairman/company secretary)

Opening of an Additional Account

UNRESTRICTED

0 3 0 8 2 0 1 2

Dear

Opening of additional account(s) with Absa Bank Limited (Reg no 1986/004794/06) and VAT registration number 490112230, a public company duly registered as a bank under the laws of the Republic of South Africa with its registered address at 7th Floor, Absa Towers West, 15 Troye Street, Johannesburg, 2001, and conducting business from

("Absa")

Registration no MA

We kindly request you to open additional account(s) for Nelson Mandela Bay Metropolitan Municipality

(name of the client should be the same as the name of the client appearing on the letterhead)

Date of signing product terms and conditions 01 08 2012

Account name 1 Bank Charges Account	Block debit orders Account name 1		✓
Account name 2	Block debit orders Account name 2		
Account name 3	Block debit orders Account name 3		

OPTION 1

We authorise the following mandated official(s) to act for/and on our behalf on the additional account:

1	2	3
(Capacity, eg CFO/CEO)	(Capacity, eg CFO/CEO)	(Capacity, eg CFO/CFO)

Please find attached a resolution, a power of attorney or a delegation of powers in terms of which the above mandated official(s) have been authorised to act for and on our behalf.

OPTION 2

(Note: If the client wants mandated officials to act)

We authorise the mandated officials as per the resolution dated _____ and whose details you have, to also act on the requested additional account.

According to our records the name(s) of the mandated official(s) is/are _____ and/or

_____ and/or

_____

(Capacity, eg CFO/CEO)

We confirm that we:

- have completed and signed Absa's standard terms and conditions as amended applicable to accounts;
- acknowledge that we are bound to the said terms and conditions, and agree that, by signing this document we agree to the opening of an additional account as contemplated in this document, on the said terms and conditions;
- will advise Absa if and when any of our circumstances, contact details, or authorised representatives change; and
- will advise Absa of any change in respect of the information provided to Absa which enabled Absa to open previous account(s) including but not limited to our name, physical address, postal address, contact details, personal details of authorised representatives, address of authorised representatives or contact details of authorised representatives.

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We look forward to receiving the details of the additional account.

Yours Sincerely

_____

*(signed by authorised representatives)

*Insert capacity Director: Office of the Treasury

*(director/member/trustee/chairman/company secretary)

_____

*(signed by authorised representatives)

*Insert capacity _____

*(director/member/trustee/chairman/company secretary)

Opening of an Additional Account

UNRESTRICTED

0 3 0 8 2 0 1 2

Dear

Opening of additional account(s) with Absa Bank Limited (Reg no 1986/004794/06) and VAT registration number 490112230, a public company duly registered as a bank under the laws of the Republic of South Africa with its registered address at 7th Floor, Absa Towers West, 15 Troye Street, Johannesburg, 2001, and conducting business from

("Absa")

Registration no N/A

We kindly request you to open additional account(s) for Nelson Mandela Bay Metropolitan Municipality

(name of the client should be the same as the name of the client appearing on the letterhead)

Date of signing product terms and conditions 01/08/2012

Account name 1 Deposit Account	Block debit orders Account name 1		✓
Account name 2	Block debit orders Account name 2		
Account name 3	Block debit orders Account name 3		

OPTION 1

We authorise the following mandated official(s) to act for/and on our behalf on the additional account:

1	2	3
(Capacity, eg CFO/CEO)	(Capacity, eg CFO/CEO)	(Capacity, eg CFO/CEO)

Please find attached a resolution, a power of attorney or a delegation of powers in terms of which the above mandated official(s) have been authorised to act for and on our behalf.

OPTION 2

(Note: If the client wants mandated officials to act)

We authorise the mandated officials as per the resolution dated _____ and whose details you have, to also action the requested additional account.

According to our records the name(s) of the mandated official(s) is/are _____ and/or

_____ and/or

_____

(Capacity, eg CFO/CEO)

We confirm that we:

- have completed and signed Absa's standard terms and conditions as amended applicable to accounts;
- acknowledge that we are bound to the said terms and conditions, and agree that, by signing this document we agree to the opening of an additional account as contemplated in this document, on the said terms and conditions;
- will advise Absa if and when any of our circumstances, contact details, or authorised representatives change; and
- will advise Absa of any change in respect of the information provided to Absa which enabled Absa to open previous account(s) including but not limited to our name, physical address, postal address, contact details, personal details of authorised representatives, address of authorised representatives or contact details of authorised representatives.

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We look forward to receiving the details of the additional account.

Yours Sincerely

_____ *Insert capacity Director : Official the Treasury

*(signed by authorised representatives) *(director/member/trustee/chairman/company secretary)

_____ *Insert capacity _____

*(signed by authorised representatives) *(director/member/trustee/chairman/company secretary)

Opening of an Additional Account

UNRESTRICTED

Date 0 3 0 8 2 0 1 2

Dear

Opening of additional account(s) with Absa Bank Limited (Reg no 1986/004794/06) and VAT registration number 4901122230, a public company duly registered as a bank under the laws of the Republic of South Africa with its registered address at 7th Floor, Absa Towers West, 15 Troye Street, Johannesburg, 2001, and conducting business from ("Absa")

Registration no n/a

We kindly request you to open additional account(s) for Nelson Mandela Bay Metropolitan Municipality

(name of the client should be the same as the name of the client appearing on the letterhead).

Date of signing product terms and conditions 0 1 0 8 2 0 1 2

Account name 1 Market Account	Block debit orders Account name 1		✓
Account name 2	Block debit orders Account name 2		
Account name 3	Block debit orders Account name 3		

OPTION 1

We authorise the following mandated official(s) to act for/and on our behalf on the additional account:

1	2	3
(Capacity, eg CFO/CEO)	(Capacity, eg CFO/CEO)	(Capacity, eg CFO/CEO)

Please find attached a resolution, a power of attorney or a delegation of powers in terms of which the above mandated official(s) have been authorised to act for and on our behalf.

OPTION 2

(Note: If the client wants mandated officials to act)

We authorise the mandated officials as per the resolution dated _____ and whose details you have, to also act on the recuested additional account.

According to our records the name(s) of the mandated official(s) is/are and/or

and/or

(Capacity, eg CFO/CEO)

We confirm that we:

- have completed and signed Absa's standard terms and conditions as amended applicable to accounts;
- acknowledge that we are bound to the said terms and conditions, and agree that, by signing this document we agree to the opening of an additional account as contemplated in this document, on the said terms and conditions;
- will advise Absa if and when any of our circumstances, contact details, or authorised representatives change; and
- will advise Absa of any change in respect of the information provided to Absa which enabled Absa to open previous account(s) including but not limited to our name, physical address, postal address, contact details, personal details of authorised representatives, address of authorised representatives or contact details of authorised representatives.

The above wording in bold constitutes an acknowlegment of fact by the client. The client must read the above carefully and ensure that each statement is true and correct as this will limit the rights of the client to claim that this statement is not true and correct. The bank may also have claims and other rights against the client if this statement is not true and correct.

We look forward to receiving the details of the additional account.

Yours Sincerely

*(signed by authorised representatives)

*Insert capacity Director: Office of the Treasury

*(director/member/trustee/chairman/company secretary)

*(signed by authorised representatives)

*Insert capacity

*(director/member/trustee/chairman/company secretary)

Opening of an Additional Account

UNRESTRICTED

Date 0 3 0 8 2 0 1 2

Dear

Opening of additional account(s) with Absa Bank Limited (Reg no 1986/004794/06) and VAT registration number 490112230, a public company duly registered as a bank under the laws of the Republic of South Africa with its registered address at 7th Floor, Absa Towers West, 15 Troye Street, Johannesburg, 2001, and conducting business from

("Absa")

Registration no N/A

We kindly request you to open additional account(s) for Nelson Mandela Bay Metropolitan Municipality

(name of the client should be the same as the name of the client appearing on the letterhead)

Date of signing product terms and conditions 0 1 0 8 2 0 1 2

Account name 1 Feather Market Account	Block debit orders Account name 1		✓
Account name 2	Block debit orders Account name 2		
Account name 3	Block debit orders Account name 3		

OPTION 1

We authorise the following mandated official(s) to act for/and on our behalf on the additional account:

1	2	3
(Capacity, eg CFO/CEO)	(Capacity, eg CFO/CEO)	(Capacity, eg CFO/CEO)

Please find attached a resolution, a power of attorney or a delegation of powers in terms of which the above mandated official(s) have been authorised to act for and on our behalf.

OPTION 2

(Note: If the client wants mandated officials to act)

We authorise the mandated officials as per the resolution dated _____ and whose details you have, to also act on the requested additional account.

According to our records the name(s) of the mandated official(s) is/are and/or

and/or

(Capacity, eg CFO/CEO)

We confirm that we:

- have completed and signed Absa's standard terms and conditions, as amended applicable to accounts;
- acknowledge that we are bound to the said terms and conditions, and agree that, by signing this document we agree to the opening of an additional account as contemplated in this document, on the said terms and conditions;
- will advise Absa if and when any of our circumstances, contact details, or authorised representatives change; and
- will advise Absa of any change in respect of the information provided to Absa which enabled Absa to open previous account(s) including but not limited to our name, physical address, postal address, contact details, personal details of authorised representatives, address of authorised representatives or contact details of authorised representatives.

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We look forward to receiving the details of the additional account.

Yours Sincerely

*(signed by authorised representatives)

*Insert capacity Director : Office of the Treasury

*(director/member/trustee/chairman/company secretary)

*(signed by authorised representatives)

*Insert capacity

*(director/member/trustee/chairman/company secretary)

Opening of an Additional Account

UNRESTRICTED

Date 28/09/2012

Dear

Opening of additional account(s) with Absa Bank Limited (Reg no 1986/004794/06) and VAT registration number 4901022130, a public company duly registered as a bank under the laws of the Republic of South Africa with its registered address at 7th Floor Absa Towers West, 15 Troye Street, Johannesburg, 2001 and conducting business from

("Absa")

Reg. number no K10

We kindly request you to open additional account/s for Nelson Mandela Bay Metropolitan Municipality

(name of the client should be the same as the name of the client appearing on the letterhead).

Date of signing product terms and conditions 01/08/2012

Account name 1 Munelek Account	Block debit orders Account name 1 ✓
Account name 2	Block debit orders Account name 2
Account name 3	Block debit orders Account name 3

OPTION 1

We authorise the following mandated official(s) to act for/and on our behalf on the additional account

1	2	3
(Capacity eg CFO/CEO)	(Capacity eg CFO/CEO)	(Capacity eg CFO/CEO)

Please find attached a resolution / power of attorney or a delegation of powers in terms of which the above mandated official(s) have been authorised to act for and on our behalf.

OR OPTION 2

(Note: If the client wants mandated official/s to act)

We authorise the mandated official/s as per the resolution dated _____ and whose details you have, to also act on the additional account/s as mentioned.

According to our records the name/s of the mandated official(s) is/are _____ and/or

_____ and/or

_____

(Capacity eg CFO/CEO)

We confirm that we:

- have completed and signed Absa's standard terms and conditions as amended applicable to accounts;
- acknowledge that we are bound to the said terms and conditions, and agree that, by signing this document we agree to the opening of an additional account as contemplated in this document, on the said terms and conditions;
- will advise Absa if and when any of our circumstances, contact details, or authorised representatives change; and
- will advise Absa of any change in respect of the information provided to Absa which enabled Absa to open previous account(s) including but not limited to our name, physical address, postal address, contact details, personal details of authorised representatives, address of authorised representatives or contact details of authorised representatives.

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We look forward to receiving the details of the additional account.

Yours Sincerely

X _____

*(signed by authorised representatives)

*Insert capacity Director / Office of the Treasury

*(director/member/trustee/chairman/company secretary)

X _____

*(signed by authorised representatives)

*Insert capacity _____

*(director/member/trustee/chairman/company secretary)

Opening of an Additional Account

UNRESTRICTED

Date 28/09/2012

Dear

Opening of additional account(s) with Absa Bank Limited (Reg no 1986/004794/06) and VAT registration number 4901122B0, a public company duly registered as a bank under the laws of the Republic of South Africa with its registered address at 7th Floor, Absa Towers West, 15 Troye Street, Johannesburg, 2001, and conducting business from

("Absa")

Registration no N/A

We kindly request you to open additional account(s) for Nelson Mandela Bay Metropolitan Municipality

(name of the client should be the same as the name of the client appearing on the letterhead)

Date of signing product terms and conditions 01/08/2012

Account name 1 Traffic Account	Block debit orders Account name 1		✓
Account name 2	Block debit orders Account name 2		
Account name 3	Block debit orders Account name 3		

OPTION 1

We authorise the following mandated official(s) to act for/and on our behalf on the additional account.

1	2	3
(Capacity, eg CFO/CEO)	(Capacity, eg CFO/CEO)	(Capacity, eg CFO/CEO)

Please find attached a resolution, a power of attorney or a delegation of powers in terms of which the above mandated official(s) have been authorised to act for and on our behalf

OPTION 2

(Note: If the client wants mandated officials to act)

We authorise the mandated officials as per the resolution dated _____ and whose details you have, to also act on the requested additional account

According to our records the name(s) of the mandated official(s) is/are and/or

and/or

(Capacity, eg CFO/CEO)

We confirm that we:

- have completed and signed Absa's standard terms and conditions as amended applicable to accounts;
- acknowledge that we are bound to the said terms and conditions, and agree that, by signing this document we agree to the opening of an additional account as contemplated in this document, on the said terms and conditions;
- will advise Absa if and when any of our circumstances, contact details, or authorised representatives change; and
- will advise Absa of any change in respect of the information provided to Absa which enabled Absa to open previous account(s) including but not limited to our name, physical address, postal address, contact details, personal details of authorised representatives, address of authorised representatives or contact details of authorised representatives.

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We look forward to receiving the details of the additional account.

Yours Sincerely

V

*(signed by authorised representatives)

*insert capacity Director: Office of the Treasury

*(director/member/trustee/chairman/company secretary)

V

*(signed by authorised representatives)

*Insert capacity

*(director/member/trustee/chairman/company secretary)

Opening of an Additional Account

UNRESTRICTED

Date 0 3 0 8 2 0 1 2

Dear

Opening of additional account(s) with Absa Bank Limited (Reg no 1986/004794/06) and VAT registration number 4901122301, a public company duly registered as a bank under the laws of the Republic of South Africa with its registered address at 7th Floor, Absa Towers West, 15 Troye Street, Johannesburg, 2001, and conducting business from

("Absa")

Registration no N/A

We kindly request you to open additional account(s) for Nelson Mandela Bay Metropolitan Municipality

(name of the client should be the same as the name of the client appearing on the letterhead)

Date of signing product terms and conditions 0 1 0 8 2 0 1 2

Account name 1 No.1 Account (Salaries)	Block debit orders Account name 1	✓
Account name 2	Block debit orders Account name 2	
Account name 3	Block debit orders Account name 3	

OPTION 1

We authorise the following mandated official(s) to act for/and on our behalf on the additional account:

1	2	3
(Capacity, eg CFO/CEO)	(Capacity, eg CFO/CEO)	(Capacity, eg CFO/CEO)

Please find attached a resolution, a power of attorney or a delegation of powers in terms of which the above mandated official(s) have been authorised to act for and on our behalf.

OPTION 2

(Note: If the client wants mandated officials to act)

We authorise the mandated officials as per the resolution dated and whose details you have, to also act on the requested additional account.

According to our records the name(s) of the mandated official(s) is/are and/or

and/or

(Capacity, eg CFO/CEO)

We confirm that we:

- have completed and signed Absa's standard terms and conditions as amended applicable to accounts;
- acknowledge that we are bound to the said terms and conditions, and agree that, by signing this document we agree to the opening of an additional account as contemplated in this document, on the said terms and conditions;
- will advise Absa if and when any of our circumstances, contact details, or authorised representatives change; and
- will advise Absa of any change in respect of the information provided to Absa which enabled Absa to open previous account(s) including but not limited to our name, physical address, postal address, contact details, personal details of authorised representatives, address of authorised representatives or contact details of authorised representatives.

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We look forward to receiving the details of the additional account.

Yours Sincerely

*(signed by authorised representatives)

*Insert capacity Director: Office of the Treasury.

*(director/member/trustee/chairman/company secretary)

*(signed by authorised representatives)

*Insert capacity

*(director/member/trustee/chairman/company secretary)