



labour

Department:  
Labour  
REPUBLIC OF SOUTH AFRICA



## Sworn Statement

I, First name and Surname: \_\_\_\_\_

Identity No.: \_\_\_\_\_, Sex: \_\_\_\_\_

Occupation: \_\_\_\_\_, Company address: \_\_\_\_\_

\_\_\_\_\_ Telephone: \_\_\_\_\_

State under oath that the information below is the information of the (Name of business)

\_\_\_\_\_

UIF/ CK number (CK for companies without UIF reference number)	
Sector/ Industry classification (Please see classification list attached)	
Number of employees currently employed	
Total Annual Turnover	
Total Gross asset value (Excluding Fixed Assets)	

I know and understand the contents of this statement. I have no objection to taking the prescribed oath. I consider the prescribed oath to be binding on my conscience.

I swear that the contents of this statement are true.

\_\_\_\_\_  
Signature of the deponent

\_\_\_\_\_  
Date

### COMMISSIONER OF OATHS

I certify that the deponent has acknowledged that he knows and understands the contents of this statement. This statement was sworn before me and the deponent's signature was placed hereon in my presence at \_\_\_\_\_ on \_\_\_\_\_

Full name and Surname \_\_\_\_\_

Designation \_\_\_\_\_

Address \_\_\_\_\_

Tel/Cell no \_\_\_\_\_

\_\_\_\_\_  
Signature of commissioner of Oaths

\_\_\_\_\_  
Date

DATE STAMP

