

WINGATE PARK SECURITY VILLAGE SIGN UP INCENTIVE

Herewith I, _____

active industry agent of:

(company name) _____ herewith confirm that the following residents were fully informed of the Security Closure, the monthly subscription and the benefits pertaining to the closure.

RESIDENTIAL ADDRESS

I further confirm that my details for the 1st month's contribution are to be paid to me into the following account:

BANK _____

BRANCH _____

ACC NR _____

TYPE _____

REF – WIPRA NPC

I further confirm that I have disclosed the commission to be received with the principal of the Company.

Name of Agent: _____

Name of Principal: _____

Signed _____
Agent

Date _____

Signed _____
WIPRA Chairman

Date _____

Send the completed form along with the new owner's forms to wingateparkra+signup@gmail.com