



“Promoting the Auction Industry by Serving our Members, Stakeholders and the Public”.

Office: (021) 054 5815
WhatsApp: 081 410 2622
Email: sonja.styger@auctioneering.co.za

www.auctioneering.co.za
89 05903/08

APPLICATION FOR SAIA MEMBERSHIP

CORPORATE APPLICATION DETAILS

Answer all applicable questions in full. Please complete the form in block letters, answer all applicable questions in full and indicate answer with a cross (x) in the appropriate block.

TYPE OF MEMBERSHIP	STAFF COMPLIMENT	COST
CORPORATE MEMBERSHIP	1-10	R2 750
	10+	R5 500

*****PLEASE NOTE A ONCE OFF JOINING FEE OF R1 100 IS APPLICABLE**

COMPANY NAME (LEGAL ENTITY NAME):

TRADING NAME:

REGISTRATION NUMBER:

VAT NUMBER:

REGISTERED DIRECTORS:

BUSINESS ADDRESS:

_____ CODE: _____

POSTAL ADDRESS:

_____ CODE: _____

BUSINESS TEL NO:

MOBILE NO:

EMAIL ADDRESS:

WEBSITE ADDRESS:



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ADMIN CONTACT PERSON: _____

TOTAL NO OF STAFF EMPLOYED: _____

TOTAL NO OF YEARS IN AUCTION INDUSTRY: _____

LIST THE TYPE OF ASSETS AUCTIONED BY YOUR COMPANY:

- Movable only
- Immovables only
- Movable and Immovables

Disciplines

- | | | |
|--|---|---|
| <input type="checkbox"/> Residential Property | <input type="checkbox"/> Retail Vehicles | <input type="checkbox"/> Commercial Property |
| <input type="checkbox"/> Agricultural Property | <input type="checkbox"/> Commercial Vehicles | <input type="checkbox"/> Agricultural Products |
| <input type="checkbox"/> Agricultural Vehicles and Machinery | <input type="checkbox"/> Audio Visual & Electronics | <input type="checkbox"/> Aviation, Marine & Rail |
| <input type="checkbox"/> Catering & Hospitality | <input type="checkbox"/> Charities | <input type="checkbox"/> Computers, Software & Networking |
| <input type="checkbox"/> Construction | <input type="checkbox"/> Development Property | <input type="checkbox"/> Diamonds – rough & polished |
| <input type="checkbox"/> Fine Art & Antiques | <input type="checkbox"/> Furniture & Appliances | <input type="checkbox"/> Game |
| <input type="checkbox"/> General Auction Room | <input type="checkbox"/> Gold | <input type="checkbox"/> Hospitality Property |
| <input type="checkbox"/> Household & Living | <input type="checkbox"/> Industrial Machinery | <input type="checkbox"/> Industrial Property |
| <input type="checkbox"/> Investment Property | <input type="checkbox"/> Jewellery, Collectables & Firearms | <input type="checkbox"/> Livestock |
| <input type="checkbox"/> Mining, Petrochemical, Oil & Gas | <input type="checkbox"/> Plant, Machinery & Printing | <input type="checkbox"/> Repossessed Property |
| <input type="checkbox"/> Retail Property | <input type="checkbox"/> Salvage | <input type="checkbox"/> Textiles Apparel & Footwear |

DO YOU SPECIALISE IN ANY PARTICULAR FIELD?

YES	NO
-----	----

IF YES, SPECIFY: _____

FIDELITY FUND DECLARATION

All corporate and individuals selling **immovable property** must be in possession of a **Fidelity Fund Certificate** issued by the **Property Practitioners Regulating Authority** OR Sign the below declaration confirming that you do not sell fixed property.

I, the undersigned, _____ (Full Name & Surname) of
_____ (Company Name)

Hereby confirm that we **do not** sell or offer to sell immovable property & are **not** required to be registered with the Property Practitioners Regulating Authority (PPRA).

Signature

Date



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INDICATE THE GEOGRAPHICAL AREA/S IN WHICH YOU COMPANY OPERATES:

- | | | |
|--|---|--|
| <input type="checkbox"/> Gauteng | <input type="checkbox"/> Northwest Province | <input type="checkbox"/> Free State |
| <input type="checkbox"/> Limpopo | <input type="checkbox"/> Mpumalanga | <input type="checkbox"/> KwaZulu Natal |
| <input type="checkbox"/> Northern Cape | <input type="checkbox"/> Eastern Cape | <input type="checkbox"/> Western Cape |

Other: _____

BANK ACCOUNT DETAILS:

ACCOUNT TYPE	BANK	BRANCH	ACCOUNT NO
TRUST ACCOUNT			
BUSINESS ACCOUNT			

FINANCIAL INTELLIGENCE CENTRE REGISTRATION:

YES	NO
-----	----

NUMBER: _____

REGISTER AS SECONHAND GOODS DEALER:

YES	NO
-----	----

NUMBER: _____

HAS FIDELITY INSURANCE EVER BEEN REFUSED TO YOU?

YES	NO
-----	----

IF YES, GIVE DETAILS:



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PROFESSIONAL DESIGNATION APPLICATION DETIALS

PROFESSIONAL DESIGNATION	CPD HOURS	NQF LEVEL	NUMBER OF YEARS AUCTIONEERING EXPERIENCE	MEMBERSHIP FEES
CANDIDATE AUCTIONEER	18 HOURS PER ANNUM	4	0 – 2 YEARS	R500
ASSOCIATE AUCTIONEER	18 HOURS PER ANNUM	4	2 – 5 YEARS	R1000
CERTIFIED AUCTIONEER	18 HOURS PER ANNUM	5	5+ YEARS	R2000

PLEASE NOTE A ONCE OFF JOINING FEE OF R550 IS APPLICABLE SHOULD YOUR COMPANY NOT BE REGISTERED

***PLEASE COMPLETE THIS SECTION FOR EACH INDIVIDUAL TO BE REGISTERED ***

SURNAME:

Prof	Dr	Mr	Mrs	Miss
------	----	----	-----	------

FIRST NAMES:

I.D. NO:

DATE OF BIRTH:

HOME ADDRESS:

_____ CODE: _____

EMAIL ADDRESS:

MOBILE NO:

ARE YOU A SOUTH AFRICAN CITIZEN?

YES	NO
-----	----

NATIONALITY:

PARTICULARS OF ACADEMIC QUALIFICATIONS:

QUALIFICATIONS	WHERE OBTAINED	YEAR

MEMBERSHIP OF ORGANISATIONS, INSTITUTES, ASSOCIATIONS:

ORGANISATION	YEAR OF ADMISSION



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WORK EXPERIENCE:

*****PLEASE ATTACH A SYNOPSIS OF YOUR CV TO THE APPLICATION**

TOTAL EXPERIENCE IN YEARS: FULL TIME: _____ PART TIME: _____

TOTAL AUCTIONEERING EXPERIENCE IN YEARS: FULL TIME: _____ PART TIME: _____

PRESENT EMPLOYER: _____

POSITION / DESIGNATION WITH PRESENT EMPLOYER: _____

PRESENT POSITION HELD, NUMBER OF YEARS: _____

PREVIOUS EMPLOYER: _____

POSITION / DESIGNATION WITH PRESENT EMPLOYER: _____

PERIOD EMPLOYED NUMBER OF YEARS: _____

ARE YOU INVOLVED IN AUCTIONEERING

YES	NO
-----	----

IF NO, WHAT IS YOUR MAIN OCCUPATION: _____

ARE YOU A VALUER IN TERMS OF THE VALUERS ACT 1982:

YES	NO	ASSOCIATED	IN TRAINING
-----	----	------------	-------------

DATE OF APPOINTMENT: _____

ARE YOU AN APPRAISER IN TERMS OF THE ADMINISTRATION OF ESTATES ACT 1965?:

YES	NO
-----	----

IF YES, IN WHICH MAGISTERIAL DISTRICT: _____

HAVE YOU EVER BEEN CONVICTED OF ANY CRIMINAL OFFENCE?

YES	NO
-----	----

IF YES, GIVE DETAILS: _____

HAVE YOU EVER BEEN SEQUESTERED?

YES	NO
-----	----

IF YES, GIVE DETAILS: _____

HAVE YOU BEEN REHABILITATED?

YES	NO
-----	----

IF YES, GIVE DETAILS: _____

HAS A COMPANY OF WHICH YOU WERE A DIRECTOR BEEN LIQUIDATED?

YES	NO
-----	----

IF YES, GIVE DETAILS: _____

HAVE YOU BY REASON OF IMPROPER CONDUCT BEEN DISMISSED FROM A POSITION OF TRUST?

YES	NO
-----	----

IF YES, GIVE DETAILS: _____



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ARE THERE ANY OTHER FACTS OR CIRCUMSTANCES WHICH MAY DIRECTLY OR INDIRECTLY IMPACT UPON THE ASSESSMENT OF YOUR APPLICATION TO BE ADMITTED AS A MEMBER OF THE INSTITUTE?

IF SO, PLEASE PROVIDE DETAILS: _____

I hereby certify that I have applied my mind to the questions contained in this application and that my answers thereto are both true and correct in all respects. I understand that the information provided by me is material to the granting or refusal of my membership application. By my signature hereto I hereby agree that all the information provided by me may be verified by the South African Institute of Auctioneers without the necessity of reverting to me for my prior approval. I furthermore hereby consent to the South African Institute of Auctioneers carrying out such credit or criminal record checks or such other checks as it may in its sole discretion deem fit. I understand that, if my application is successful, I will be bound by the provisions, terms and conditions contained in the Constitution of the South African Institute of Auctioneers and the Code of Conduct (as amended from time to time). I furthermore agree to be bound by any decisions and directives as issued by the Institute pertaining to my conduct as an auctioneer.

SIGNED AT: _____ **THIS** _____ **DAY OF** _____ **20** _____

Please note that SAIA and its directors have the right to accept any application as an intern candidate for a period of 1 (one) year. This membership will have the same rights as a full membership but will, however, will be subject to scrutiny and guidelines, as set down by SAIA and its directors, for the first 12 (twelve) months.

THE SOUTH AFRICAN INSTITUTE OF AUCTIONEERS CODE OF CONDUCT UNDERTAKING

I, the undersigned, _____ (Full Name & Surname) of
_____ (Company Name)

Hereby confirm that I have read and understood the contents of this Code of Conduct, outlining the practices and standards expected of members of SAIA, and commit to upholding these values and standards at all times. And furthermore irrevocably bind myself and all the company represented by me to conform to the Code of Conduct. I confirm that as a member of SAIA and governed as such by the Code of Conduct I will always uphold the interests of the auction profession as well as SAIA and all its members.

Signature

Date

Please download our Code of Conduct



SAIA Code of
Conduct .pdf



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DOCUMENT CHECKLIST

PLEASE SUBMIT THESE DOCUMENTS WITH YOUR APPLICATION.

- Completed SAIA Application Form
- CIPC documents
- Current and Valid Fidelity Fund Certificate (if selling immovable property)
- Current and Valid Tax Clearance Certificate
- Current and Valid BEE Certificate / Affidavit
- Professional Indemnity & Fidelity Guarantee Insurance Cover Confirmation
- Confirmation of Trust Bank Account
- Synopsis of Curriculum Vitae - CV (Evidence of Work Experience)
- Qualifications / Diplomas / Training Certificates
- Copy of ID Document
- Proof of payment of Consumer & Business Profile check Fee