



# SAFPS

SOUTHERN AFRICAN  
FRAUD PREVENTION  
SERVICE

## PROTECTIVE REGISTRATION APPLICATION PROCESS

Please follow the process below to successfully complete your application.

**Step 1:** Complete the application form below

**Step 2:** Return the completed form together with the below documentation to SAFPS

- ✓ Certified copy of ID
- ✓ Copy of proof of address

**Step 3:** Email to [protection@safps.org.za](mailto:protection@safps.org.za)

Sent by: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_

## APPLICATION FOR PROTECTIVE REGISTRATION

Protective Registration is a FREE service to the public to protect one's identity against impersonation. Your details will be added to the SAFPS database and be made available to SAFPS Member Organisations to assist in in protecting you against future identity fraud.

Please be aware that this Protective Registration filing will alert the SAFPS Member to take precautionary measures to ensure that you are protected. They also need to ensure that they are indeed dealing with the genuine owner of the Identity Document. It is possible that your application may be delayed whilst your identity is being confirmed and you may be requested to provide additional information to the SAFPS Member in this regard. Please be aware that this is being done to protect both yourself and our member organisation.

SAFPS and its Members **ACCEPTS NO LIABILITY OR RESPONSIBILITY**. By applying for Protective Registration, you accept that this exclusion is reasonable. You must take all other necessary precautions to protect your identity. SAFPS is a non-profit organization and is not connected to any Government department or the South African Police Service. It is funded by its members' annual fees.

## YOUR DECLARATION

I,.....(INSERT NAME) request Protective Registration by Southern African Fraud Prevention Service (SAFPS) and declare that the information provided in this application is true and correct.

I agree to the information provided being made available to Southern African Fraud Prevention Service (SAFPS) members and other bona fide agencies for the purpose of fraud prevention.

I indemnify Southern African Fraud Prevention Service (SAFPS), its Members, Agents and Servants against any liability, loss, claim or proceedings whatsoever, whether arising in common law or statute,

Southern African Fraud Prevention Service NPC 2000/020784/08  
T: + 27 (0)11 867 2234  
SAFPS@safps.org.za [www.safps.org.za](http://www.safps.org.za) P.O. Box, 2629, Alberton, 1450 NCRCB20

**Freedom from Fraud**



Southern African Fraud Prevention Service (NPC) is a registered credit bureau. NCRCB20



however arising out of the course of or caused by the carrying out of any service by Southern African Fraud Prevention Service (SAFPS), whether due to any act or omission of Southern African Fraud Prevention Service (SAFPS) or their Members, Agents and Servants or otherwise.

I hereby affirm that the facts provided by me and the information given by me in this declaration are within my personal knowledge and are true and correct. I understand that making a materially false declaration is a criminal offence, punishable by law. I confirm that I have no objection to making this statement and I certify that I take full accountability for the content thereof

**SIGNATURE OF APPLICANT:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

TITLE: \_\_\_\_\_

FULLNAME: \_\_\_\_\_

SURNAME: \_\_\_\_\_

ID NUMBER: \_\_\_\_\_

DRIVERS LICENSE NUMBER: \_\_\_\_\_

RESIDENTIAL ADDRESS: \_\_\_\_\_

POSTAL CODE: \_\_\_\_\_

**CONTACT NUMBERS:**

HOME: \_\_\_\_\_

CELL: \_\_\_\_\_

WORK: \_\_\_\_\_

EMAIL: \_\_\_\_\_

**EMPLOYMENT DETAILS:**

EMPLOYER: \_\_\_\_\_

JOB TITLE: \_\_\_\_\_