



City of Johannesburg  
Department

1<sup>st</sup> Floor  
JMPD Head Office  
195 Main Road  
Martindale  
2192

PO Box 58063  
Newville  
2114

Tel +27(0) 11 758 9100 (O)  
Tel +27(0) 11 758 9124(D)  
Fax +27(0) 11 758 9161  
E-mail:  
MHenneker@joburg.org.za  
[www.joburg.org.za](http://www.joburg.org.za)

## EXTERNAL CLIENTS ACKNOWLEDGEMENT OF PAYMENT

### EVENT ORGANISER DETAILS

### COMPANY RESPONSIBLE FOR ACCOUNT:

NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
\_\_\_\_\_  
VAT REG NO: \_\_\_\_\_  
EMAIL: \_\_\_\_\_  
CONTACT NO: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### EVENT DETAILS

NAME OF EVENT: \_\_\_\_\_  
DATE OF EVENT: \_\_\_\_\_  
EVENT VENUE: \_\_\_\_\_  
ESTIMATED COST FOR EVENT: \_\_\_\_\_

I/We \_\_\_\_\_ accept full responsibility for the payment of the event mentioned above.

Full Name: \_\_\_\_\_ Signature: \_\_\_\_\_  
Date: \_\_\_\_\_

### PAYMENT TERMS:

Payment will become due on IMMEDIATE receipt of a Tax Invoice from our Finance Department. Please note that if these terms are not adhered to the JMPD have no choice but to withhold all future services.

### URGENT

**PLEASE NOTE THIS FORM NEEDS TO BE COMPLETED AND RETURNED TO THE EVENTS SECTION 7(SEVEN)DAYS FROM THE DATE OF EVENT. BY NOT ADHERING TO THESE CONDITIONS YOUR EVENT MIGHT NOT TAKE PLACE.**



