

# REQUISITION

RE: \_\_\_\_\_ ("the Debtor")

1. I understand that application has been/ is to be made to the Supreme Court for an order for the *sequestration/ voluntary surrender* of the estate of the Debtor and for the placing of the Debtor in *provisional liquidation/ under judicial management*.
2. I declare that \_\_\_\_\_ ("the Creditor") is a creditor of the Debtor.
3. In my opinion it is in the interest of the creditors of the Debtor that a *provisional trustee/ liquidator/ judicial manager* be appointed in the estate of the Debtor for the reasons set out hereunder -

\_\_\_\_\_

4. I hereby nominate **TRACY TYLCOAT, P.O. BOX 2190, JOHANNESBURG, 2000, TEL: (011) 615-0921**  
for appointment as the *provisional trustee/ liquidator/ judicial manager* and request you to make the necessary appointment. The creditor intends proving a claim and voting for the final appointment of the aforementioned person at the first meeting of creditors in this estate
5. I declare that the Creditor is not a person disqualified, in terms of the provisions of Sections 52 and 53 of the Insolvency Act and Section 365(2)(a) of the Companies Act, from voting for the appointment of the aforesaid person as *trustee/ liquidator/ judicial manager*. . As far as I am aware the nominated person is not disqualified from the aforesaid appointment by virtue of the provisions of Section 55 of the Insolvency Act or Section 372 of the Companies Act.
6. I further declare that I have satisfied myself that the amount reflected herein as owing by the Debtor to the Creditor is, to the best of my knowledge and belief, true and correct.

7.1 NAME OF CREDITOR: \_\_\_\_\_

7.2 ADDRESS OF CREDITOR: \_\_\_\_\_  
\_\_\_\_\_

7.3 TELEPHONE NUMBER OF CREDITOR: \_\_\_\_\_

8. AMOUNT OF THE LIQUIDATED CLAIM: \_\_\_\_\_  
(Amount in words)

\_\_\_\_\_

9. CAUSE OF ACTION: The amount owing by the Debtor to the Creditor is owing in respect of:

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

Official stamp Company / Business / Close Corporation / Financial Institution

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
PRINTED NAME AND CAPACITY

\_\_\_\_\_  
DATE

## NOTES:

1. In the case of a company, this form is to be signed by a director or otherwise by any other person duly authorised thereto in terms of a resolution, a copy of which must be attached.
2. In the case of a partnership, a partner must sign.
3. In the case of a Financial Institution/Close Corporation, this form must be signed by the Manager/Director/Member or otherwise by any other person authorised thereto in terms of a resolution, a copy of which must be attached.
4. If signed under power of attorney, the original or a copy thereof must be attached.