



SNUS

SOUTH AFRICA

Application - Retail Opportunity

Registered Shop/Business Name:	
Form of business: Retail Store(s) <input type="checkbox"/> Internet Sales <input type="checkbox"/> Other <input type="checkbox"/>	
If other, please specify:	
Do you have a website, if yes, please provide details:	
Please provide brands of other home Snus products you stock:	
Are you looking at selling this brands on your website:	
Have you sold any of these brands before:	
If so, which:	
Please provide business / store's physical location / delivery address:	

Business / Store contact number:	
VAT Number:	
Company Registration No:	
Buyers Details	Accounts Person Details
Name:	Name:
Cellphone Number:	Tel Number:
Email Address:	Email Address:

• Approval criteria can be changed without notice.
• By signing below, you hereby confirm the above information within this 'Retail Application' is accurate and allow to be submitted for the review and approval.

Name:	Date:	Confirmation (signature):
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