



GFD GROUP

www.gfdgroup.co.za

SERVICE

AGREEMENT

Platinum Plan

(For Farmers)



GFD GROUP (PTY) LTD
Registration nr: 2014 / 210332 / 07
Tax nr: 9094842193
VAT nr: 4430274086

JCE LABOUR LAW (PTY) LTD
Registration nr: 2018/226237/07
Tax nr: 9007175277

CLIENTS DETAILS

NAME AND SURNAME : [REDACTED]
ID NR : [REDACTED]
CELL NR : [REDACTED] [REDACTED]
E-MAIL : [REDACTED]
RESIDENTIAL ADDRESS : [REDACTED]
DISTRICT : [REDACTED]
CODE : [REDACTED]
NAME OF BUSINESS: [REDACTED]
VAT NR: [REDACTED]
CONTACT NR OF BUSINESS: [REDACTED]

COMPANY OR CC DETAILS

COMPANY NAME : [REDACTED]
REG NR OR CC NR: [REDACTED] [REDACTED]
VAT NR : [REDACTED]

TRUST DETAILS

TRUST NAME : [REDACTED]
IT NR : [REDACTED]
VAT NR : [REDACTED]
RESIDENTIAL ADDRESS : [REDACTED]
DISTRICT : [REDACTED]
CODE : [REDACTED]

PARAFEER (GFD GROUP): _____ PARAFEER: _____
NAAM VAN BEMARKER: _____

GFD Group Labour undertakes to provide the services to the clients as specified in the attached Services schedule. The client undertakes to provide the company with all relevant information in order for the company to provide the client with the best possible service. The company will not take any responsibility for advice given to the client based on the incorrect information given by the client to the company. The client's contract with the company will be for a compulsory period of 1 (ONE) year from signature from both parties and payment of this agreement. Notice of cancellation of 60 days before the end of this agreement

For a monthly fee the following services will be provided by GFD group for R100.00 per employee

<ul style="list-style-type: none"> ➤ Letters of employment, restraint of trade, etc. in 10 days from the start of this agreement. All new employees drawing up of contracts appointed 3 working days. ➤ Labour matters, warnings, strikes, under the influence of alcohol, absence from work, etc. ➤ Disciplinary Hearings with no extra cost and no limits. ➤ Representation at CCMA hearings at no extra cost and no limit .Representation at bargaining councils ,MIBCO, MEI BC etc. R10 000.00 to R60 000.00 labour court coverage. ➤ Advice and assistance with retrenchments. ➤ Negotiations with unions on behalf of employers and also strike management. ➤ Condonation and Rescission application. ➤ Access to telephonic, e-mail, fax and website helpline to address urgent and other labour issues. ➤ Every Second month the employees files will be audited on bases that the correct information is given 5 day before a udit. ➤ Will go out to the place of work for any Labour matter or issue at no cost to the employer. ➤ Registration of UIF (Unemployment Insurance Fund) for employers and Workman's Compensation commissioner. ➤ Assistance with evictions on farms. PLEASE NOTE THAT GFD GROUP WILL TAKE NO RESPONSIBILITY WITH EVICTION COST ➤ Pay sheets . ➤ BEE. ➤ Safety report every month. ➤ Risk report every month ➤ Hygiene report. ➤ Poison report if required for farms nurseries etc. ➤ Incident book will be updated by GFD every month for client. ➤ Accident report will be filled in by GFD and will be report to labour ➤ Labour / Health & Safety inspections with Dept. of Labour. (Client don't need to be present)

The following services for a once off admission fee of R9 690.00 (excluding VAT)

SERVICES RENDERED

Basic condition and health and safety posters every year includes basic condition health and safety, tobacco act, etc.	No extra cost
Occupational Health and safety boards as required See annex -A.	No extra cost
First aid training Level 1, 2 and 3 that is required by department of labour, basic fire fighting, basic fire awareness, safety representative, introduction of occupational health and safety Act, preliminary incident investigation, safety for supervisor training course, safety for supervisor training course with practical, SHE representative course, SHE representative functions & health and safety training every year.	No extra cost
1 first aid box	Free
1 Alcohol Breathalyser	Free
Drawing up of contracts and print of contracts	Free
5 year equity plan	Free
Emergency Evacuation Plan	Free

If Fire Extinguishers is needed GFD GROUP can arrange it for you for your own account

PARAFEER (GFD GROUP): _____

PARAFEER: _____

NAAM VAN BEMARKER: _____

ADMISSION AND MONTHLY FEES

Admission Fee:			Labour Services:		
			Monthly		
			VAT (15%)		
VAT (15%):			Total per month		
			OR		
			Yearly		
			VAT (15%)		
TOTAL			Total per year		

The fee for the monthly service is the amount of **R_____** payable as above into the account as nominated on the attached debit order form. Non payment or late payment of the monthly fee will result in a late payment fee of R50,00 (FIFTY RAND) per month. Further the client will be responsible for all and any legal, tracing and collection costs that may occurred due to non payment by the client. The client accepts the jurisdiction of the Magistrates Court.

The company undertakes to keep all information given by the client to the company as confidential and will only make client information available on instruction by the client.

Signed at _____ on this _____ day of _____ 2018.

 CLIENT OR BUSINESS

 COMPANY
 (JCE LABOUR LAW T/A GFD GROUP)

 COMPANY OR CC

 WITNESS

 REPRESENTATIVE OF TRUST

 WITNESS

BANK DETAILS:

**GLOBAL FARMERS DEVISION
 GROUP (PTY) LTD**

JCE LABOUR LAW (PTY) LTD

JCE LABOUR LAW (PTY) LTD

STANDARD BANK
 CHEQUE / CURRENT ACCOUNT
 ACCOUNT NR: 202 214 257
 BRANCH: BRANDWAG,
 BLOEMFONTEIN

NEDBANK
 CHEQUE / CURRENT ACCOUNT
 ACCOUNT: 116 483 1836
 BRANCH: MOSSEL BAY

NEDBANK
 TRUST ACCOUNT
 ACCOUNT: 116 509 3138
 BRANCH: MOSSEL BAY
**ONLY FOR COMPENSATION, UIF,
 ESTA OF 1997, SETTLEMENTS AND
 RETRENCHMENT PAYMENTS**

PARAFEER (GFD GROUP): _____

PARAFEER: _____

NAAM VAN BEMARKER: _____

STRATCOL GEBRUIKER NO: 9242
 STRATCOL GEBRUIKER NAAM: JCE LABOUR LAW T/A GFD GROUP
 STRATCOL BANKSTAAT VERWYSING: GFDARBEID
 (Die Verwysing staan bekend as "Abbreviated Name" in die debiet order Industrie)
 Tax nr: 9007175277
 STRATCOL GEBRUIKER FISIESE ADRES:
71 ORANJE STR
KROONSTAD
 Faks: 086 606 1291
 E-Pos: financial.dept@gfdgroup.co.za



DEBIETORDER MAGTIGING

BESONDERHEDE VAN REKENINGHOUER:

ID Nommer / Registrasienommer: _____ Naam & Van / Naam v Besigheid: _____
 Adres: _____ Kode _____
 Kontak Besonderhede: _____ (Huis) _____ (Sel) _____ (Werk)
 Indien 'n Besigheid, Naam van gemagtigde persoon vir die teken hiervan: _____
 Rekeninghouer: _____ Bank: _____
 Takkode: _____ Rekeningnummer: _____
 Rekeningtype: Besonderhede indien ANDER: _____

KOLLEKSIE INSTRUKSIE:

Interval:
 Is dit 'n vaste bedrag of kan die bedrag wissel in die toekoms? Vaste Bedrag:
Wisselende Bedrag:

Nota: Indien Wisselend, mag die bedrae hieronder (indien ingevul) oorskry word.

* **Eenmalige Aftrekking**

Kolleksiedatum: dd ____ / mm ____ / 20 ____ R ____ . ____ (Bedrag)

* **Herhalende Aftrekking:** Herhaal die aftrekking onbepaald tot gekanselleer deur die kliënt? JA NEE

1ste Kolleksiedatum: dd ____ / mm ____ / 20 ____ R ____ . ____ (Bedrag)

Dag van Kolleksie daarna: _____ (1-31) Jaarlikse Eskalاسie: 0 (%) Eskalاسiemaand: _____

* **13de Premie** JA NEE

13 de Premie Kolleksiedatum: dd ____ / mm ____ / 20 ____ R ____ . ____ (Bedrag)

Ek / Ons, die kliënt of behoorlike gemagtigde veteenwoordiger, gee hiermee goedkeuring aan StratCol om d.m.v 'n elektroniese debietorder van die bogenoemde rekening te vorder, en om genoemde gelde oor te betaal aan die Stratcol gebruiker soos bo genoem.

(Ek / Ons bevestig dat Ek / Ons die gemagtigde persone is vir die teken en magtiging van hierdie debietorder, met handtekening magtigings soos by My/ Ons bank geregistreer.

HANDTEKENING (1): _____ HANDTEKENING (2): _____ DATUM: _____

SLEGS KANTOORGEBRUIK

Verwysings nommer van klient: _____

PARAFEER (GFD GROUP): _____

PARAFEER: _____

NAAM VAN BEMARKER: _____

OOREENKOMS

Ek / Ons gee hiermee toestemming aan STRATCOL om betaling instruksies uit te reik aan my /ons bankier vir die kolleksie teen my /ons bogemelde bankrekening by my /ons bank.

Die individuele betaling instruksies soos gemagtig, moet uitgereik en afgelewer word volgens die bogenoemde interval en op die datum wanneer die verpligting in terme van die ooreenkoms verskuldig is. Die bedrag van elke individuele instruksie kan nie verskil van dit wat hierin vervat word nie.

Die betaling instruksies soos gemagtig moet uitgereik word met 'n verwysings nommer, welke verwysing in die betalings instruksie ingesluit moet word om my / ons in staat stel om dien ooreenkoms die debiet op my / ons bankstaat te identifiseer. Die genoemde nommer moet aan hierdie vorm bygevoeg soos onder bladsy 1 aangedui is by kliënt verwysingsnommer en moet voor die uitreiking van enige betalingsopdrag en aan my / ons gestuur word direk nadat dit voltooi is deur my / ons.

Ek / Ons stem saam dat die eerste betaling opdrag uitgereik sal word en afgelewer soos per kolleksie instruksie.

As die datum van die betaling instruksie egter op 'n nie - erkende bankdag val (naweek of openbare vakansiedag) stem ek / ons in dat die betaling instruksie teen my / ons rekening op die volgende of die vorige werkdag ingestel kan word.

NAEDO

Naedo maak voorsiening vir die dophou depositos in my / ons bankrekening om aan te pas met die vloei van krediet teen geen bykomende koste vir myself / onself. Ek / Ons magtig die persoon wat die transaksie skep om van hierdie fasiliteit, nl. die EDO stelsel, gebruik te maak teen geen bykomende koste vir myself / onself.

Daaropvolgende betaling instruksies sal voortgaan om gehê te word in terme van hierdie instruksie totdat die verpligtinge ingevolge die ooreenkoms betaal is of totdat die magtiging deur my / ons gekanselleer word deur middel van skriftelike kennisgewing aan die STRATCOL gebruiker, welke skriftelike kennisgewing sal bevat van nie minder nie as die interval (soos aangedui op die magtiging) en gestuur per voorafbetaalde geregistreerde pos of afgelewer word by sy / haar adres hierbo aangedui.

MANDAAT:

Ek / ons erken dat alle betaling instruksies uitgereik deur die STRATCOL gebruiker sal hanteer word deur my / ons bogenoemde bank asof die instruksies persoonlik uitgereik is deur my / ons.

KANSELASIE:

Ek / Ons stem in dat hoewel hierdie gesag en mandaat gekanselleer mag word deur my / ons, sodanige kansellasië nie die ooreenkoms sal kanselleer nie. Ek / Ons verstaan ook dat ek / ons nie bedrae, wat uit my / ons rekening (betaal) onttrek is, in terme van hierdie instruksie mag herroep indien sodanige bedrae wettiglik verskuldig was aan die STRATCOL gebruiker nie.

OORDRAG:

Ek / ons erken dat hierdie gesag gesedeer kan word aan 'n derde party indien die ooreenkoms ook gesedeer word aan daardie derde party.

GETEKEN TE _____ OP HIERDIE _____ DAG VAN _____ 20_____.

HANDTEKENING(E) SOOS BY BANK GEREGETREER

PARAFEER (GFD GROUP): _____

PARAFEER: _____

NAAM VAN BEMARKER: _____



GFD GROUP INFORMATION:

NATIONAL SWITCHBOARD: 086 999 0496

YOU CAN FIND OUR OFFICES AT:

KROONSTAD

71 ORANJE STREET
CENTRAL
KROONSTAD
FREE STATE

MOSSEL BAY:

1 LANG STREET
SANTOS
MOSSEL BAY
WESTERN CAPE

SOUTHERN FREE STATE

TROMPSBURG

GIVING YOU OUR BEST SERVICE AND ATTENTION AT ALL TIMES

GFD GROUP LABOUR – YOUR ONE STOP LABOUR ADVICE SERVICE



Like us on Facebook at www.facebook.com/gfdgroup.co.za

or



Visit our website at www.gfdgroup.co.za

PARAFEER (GFD GROUP): _____

PARAFEER: _____

NAAM VAN BEMARKER: _____

ANNEX A

FIRE FIGHTING • BRANDBESTRYDING

FB1	FB2	FB3	FB4	FB5	FB6	FB7	FB8
FB9	FB10	FB13	FB14				

INFORMATIE GENERAL • INLICHTING ALGEMEEN

GA1	GA2	GA3	GA4	GA5	GA6	GA7	GA8
GA9	GA10	GA11	GA12	GA13	GA14	GA15	GA16
GA17	GA18	GA19	GA20	GA21	GA22	GA23	GA24
GA25	GA26	GA27	GA28	GA29	GA30		

MANDATORY • VERPLIGTEND

MV1	MV2	MV3	MV4	MV5	MV6	MV7	MV8
MV9	MV10	MV11	MV12	MV13	MV14	MV15	MV16
MV17	MV18	MV19	MV20	MV21	MV22	MV23	MV24
MV25	MV26	MV27	MV28				

PROHIBITIVE • VERBODE

PV1	PV2	PV3	PV4	PV5	PV6	PV7	PV8
PV9	PV10	PV11	PV12	PV13	PV14	PV15	PV16
PV17	PV18	PV19	PV20	PV21	PV22	PV23	PV24
PV25	PV26	PV27	PV28	PV29	PV30	PV31	PV32
PV33	PV34	PV35	PV36	PV37	PV38		

WARNING • WAARSKUWING

WW1	WW2	WW3	WW4	WW5	WW6	WW7	WW8
WW9	WW10	WW11	WW12	WW13	WW14	WW15	WW16
WW17	WW18	WW19	WW20	WW21	WW22	WW23	WW24
WW25	WW26	WW27	WW28	WW29	WW30	WW31	WW32
WW33	WW34	WW35	WW36	WW37			

PARAFEER (GFD GROUP): _____

PARAFEER: _____

NAAM VAN BEMARKER: _____