

Client Signature

MANDATE AND POWER OF ATTORNEY

I, the undersigned,							
						(Fu	ll Names)
Of					(Resid	dential address) bor	n on the
	day of		19	with ID no:			
	e by appoint <u>ITHUSEN</u> lic of South Africa w		_	•		• •	
1.	Obtain my Credit Bu	reau records from th	ne relevant Cred	dit Bureaux;			
2.	Obtain my payslip a	nd bank statements;					
3.	Obtain information relating to my credit agreements/court orders/bank documents from all relevant parties;						
4.	Use the information obtained to assess my credit health and determine what relevant action should be taken to assist me in improving it, while maintaining confidentiality;						
5.	Engage with third parties to assist with making payment arrangements or resolving disputes and illegal or unaffordable Garnishee Orders; and						
6.	Refer me to appropriate institutions for lodging complaints where my dispute does not fall within the jurisdiction of the ICS or there is no cooperation from the parties with who I have a dispute.						
Signed	at	on this	day of		20		
Email A	ddress:						

your specialists in debt management

Ithuseng Credit Solutions (Pty)Ltd.

Client Cell Number

Office: 011 326 3459 | WhatsApp: 071 850 1706

Address: Shop No 322, Level 3, Banking Court, Randburg Square Shopping Centre, Pretoria Avenue, Ferndale, 2196Co Registration number: 2010/012339/07 |

Debt Counselling Registration number: NCRDC2476 Registered Alternative Dispute Resolution Agent NCRADR1

Directors: EM Mphahlele | Ms Meladi Mampane