

# B-BBEE Affidavit GENERAL

HOW TO COMPLETE



# B-BBEE Affidavit GENERAL

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## SWORN AFFIDAVIT – B-BBEE EXEMPTED MICRO ENTERPRISE - GENERAL

I, the undersigned,

Full name & Surname	→ Name and Surname (as reflected on ID/Passport document)
Identity number	→ Full ID Number (SA Citizen) / Full Passport Number (Non-SA Citizen)

Hereby declare under oath as follows:

- The contents of this statement are to the best of my knowledge a true reflection of the facts.
- I am a Member / Director / Owner (**Select one**) of the following enterprise and am duly authorised to act on its behalf: \_\_\_\_\_

Member = CC  
 Director = Pty Ltd  
 Owner = Sole Proprietor = Independent Contractor

Enterprise Name:	→ Name of company; if Sole Proprietor – name of deponent as stated above
Trading Name (If Applicable):	→ If applicable – for Companies If Sole Proprietor, then "N/A"
Registration Number:	→ Registration number of company; ID/Passport number if Sole Proprietor
Vat Number (If applicable)	→ If applicable, otherwise "N/A"
Enterprise Physical Address:	→ Address of business if a company Residential Address if a Sole Proprietor (unless they use a specific location for operations)
Type of Entity (CC, (Pty) Ltd, Sole Prop etc.):	→ Confirmation of type of entity, such as Sole Proprietor
Nature of Business:	→ Nature of services provided, such as consulting, contracting, etc

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3. I hereby declare under Oath that:

- The Enterprise is \_\_\_\_\_ % Black Owned using the flow-through principle as per Amended Code Series 100 of the Amended Codes of Good Practice issued under section 9 (1) of B-BBEE Act No 53 of 2003 as Amended by Act No 46 of 2013,
- The Enterprise is \_\_\_\_\_ % Black Female Owned as per Amended Code Series 100 of the Amended Codes of Good Practice issued under section 9 (1) of B-BBEE Act No 53 of 2003 as Amended by Act No 46 of 2013,
- The Enterprise is \_\_\_\_\_ % Black Designated Group Owned as per Amended Code Series 100 of the Amended Codes of Good Practice issued under section 9 (1) of B-BBEE Act No 53 of 2003 as Amended by Act No 46 of 2013,
- Black Designated Group Owned % Breakdown as per the definition stated above:

- Black Youth % = Between 14 and 14 years old \_\_\_\_\_ %
- Black Disabled % = Applicable if classified as disabled \_\_\_\_\_ %
- Black Unemployed % = N/A \_\_\_\_\_ %
- Black People living in Rural areas % = N/A \_\_\_\_\_ %
- Black Military Veterans % = N/A \_\_\_\_\_ %

- Based on the Audited Financial Statements/Financial Statements and other information available on the latest financial year-end of \_\_\_\_\_ (DD/MM/YYYY), the annual Total Revenue was R10,000,000.00 (Ten Million Rands) or less
- Please Confirm on the below table the B-BBEE Level Contributor, by ticking the applicable box.

100% Black Owned	Level One (135% B-BBEE procurement recognition level)	If Sole Proprietor and 100.00% Black Owned, tick here
At least 51% Black Owned	Level Two (125% B-BBEE procurement recognition level)	
Less than 51% Black Owned	Level Four (100% B-BBEE procurement recognition level)	If Sole Proprietor and 0.00% Black Owned, tick here

0.00% if White or Foreign National (if Sole Proprietor)  
100.00% if African, Coloured or Indian SA Citizen (if Sole Proprietor)

IF DEFINITION MET:  
0.00% if White or Foreign National (if Sole Proprietor)  
100.00% if African, Coloured or Indian SA Citizen (if Sole Proprietor)

Underline accordingly – if Sole Proprietor then “Financial Statements and other information”

If Sole Proprietor, then as per SARS Tax Year. Cannot be older than 12 months. Write “Start-up” if no financial statements yet.

If company – depending on your members, it will be Level 1, 2 or 3



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4. I know and understand the contents of this affidavit and I have no objection to take the prescribed oath and consider the oath binding on my conscience and on the Owners of the Enterprise which I represent in this matter.
5. The sworn affidavit will be valid for a period of 12 months from the date signed by commissioner.

Deponent Signature: Sole Proprietor / Consultant / Individual to sign in front of Commissioner of Oaths ←

Date : Dated as per the date of Commissioner of Oaths ←

Commissioner of Oaths Signature  
Stamp  
Date ←

\_\_\_\_\_  
Commissioner of Oaths  
Signature & stamp  
Date:

# THANK YOU

Please reach out to [judy.Engelbrecht@tte-consulting.co.za](mailto:judy.Engelbrecht@tte-consulting.co.za) for any questions

