Authentic Documents Solutions SA

CLIENT INFORMATION Full Name: ID / Passport Number: _____ Email Address: ___ Contact Number: Alternative Number (optional): Residential Address:_____ SERVICE REQUIRED ☐ SAPS Police Clearance Certificate ☐ Apostille Authentication (DIRCO / High Court) ☐ Unabridged Birth Certificate ☐ Unabridged Marriage Certificate ☐ Letter of Non-Impediment ☐ Retention of South African Citizenship ☐ Driver's Licence Confirmation Letter ☐ Other: **DELIVERY DETAILS** ☐ Courier (Local) ☐ Courier (International) ☐ Collect in Person Delivery Address: **DECLARATION & CONSENT** I, _____, confirm that: ✓ All information provided is true and correct. √ I authorise Authentic Documents Solutions SA to act on my behalf for the processing of this application. √ I understand that ADSA is not affiliated with the Department of Home Affairs and acts as an independent document facilitation service. √ I consent to the handling of my personal data in accordance with POPIA. Signature: _____

Date: _____