

# COSM TRUST ADMINISTERED BY THE SOUTH AFRICAN IRON AND STEEL INSTITUTE CLAIM FORM FOR VALUE ADDED IRON AND STEEL PRODUCTS

EXPORTER'S NAME: \_\_\_\_\_

							Mass Exp	orted (Tons	s)	
OLUMN 1	COLUMN 2	COLUMN 3	COLUMN 4	COLUMN 5	COLUMN 6	COLUMN 7	COLUMN 8	COLUMN 9	COLUMN 10	COLUMN 1
onsignment umber	Final Destination	DA 550 / DA 554/ SAD 500 no.	SARS Release Notification Y = Yes N = No	Tariff heading	Claiming Partially Y = Yes N = No	Gross mass = Tare mass + product gross mass + add. packaging Column 7 = Columns 8 + 9	Tare mass = Empty mass of container	Product Gross mass = Ex factory gate (Incl. coating/ galv, packaging and pallet)	Net mass = Steel content of final product ex factory (Excl coating/ galv./ packaging/container)	Customs Export value (FOB) FOB = Value on DA550 / 5
					TOTAL					
AFFIDAV I that:							n with Manag	ement Respons	ibility hereby declare	e under oath
b) the infor	mation contained net steel conten	d in the above of above to		orrect in all res rapping, coatin	spects; lgs and other m	naterial that is not steel;				
						and drawn primary stee A Customs Union and e		out in annexure 7)	is 20% and more	
d) the net s e) the certi				•						
d) the net s e) the certi f) the expo	orted products we	ere exported for		frica;						

**REVISION NO.** 13 **REVISED:** 1 AUGUST 2006 Source: http://www.saisi.co.za/cosmrules.php

\* Delete that which is not applicable



# COSM TRUST ADMINISTERED BY THE SOUTH AFRICAN IRON AND STEEL INSTITUTE CLAIM FORM FOR NEW FILLED DRUMS FABRICATED FROM STEEL

EXPORTER'SNAME:\_\_

CLA	MANT'S N	AME:					_			EXPO	RTER'S	CUSTO	OMS	CODE	NUMBER:
EXPORTED PRODUCT			DRUM SPECIFICATIONS:		THI	THICKNESS OF:			EXPORTED PRODUCT			DDUCT			
onsign- ent umber	DA550/ DA554/ SAD 500 No	SARS Release Notifi- Cation Y = Yes N = No	Tariff Heading	Final destination	Type of Steel used	Size (mm)	Capacity (Litres)	Body (mm)	Top (mm)	Bottom (mm)	Net steel per drum (kg)	Number of drums Exported	Gross mass (ton)	Net Mass (ton)	FOB As per Certified Affidavit
											TOTAL				
a) the b) the c) the d) the f) the g) the h) the	e information total net st e net steel c e certified cc e exported p e exported p e exported p e exported p	n contained teel content ontent of th onversion p products we products ha product's n products co	I in the above exc e exported ercentage are exported ve not beer et mass co ontain steel	, be we claim is tru ludes any pa product cons as added valu d for the first to returned to ntains no imples to audit ar	ue and cor cking, coa sist of Sout ue to the p time; South Afric corted ste	rect in a tings an h Africa roduct r ca;	III respects; d other ma in produced	terial tha	t is not s	iteel; n primary	steel;			under oath	that:
, 0	·				•										
Signe	ed te that whic				Date		C	ommiss	sioner of	Oaths				Date	

**REVISION NO.** 13 **REVISED:** 1 AUGUST 2006 Source: http://www.saisi.co.za/cosmrules.php



# COSM TRUST ADMINISTERED BY THE SOUTH AFRICAN IRON AND STEEL INSTITUTE CLAIM FORM FOR LOCAL SHIPBUILDING

					EXPORTE	R'S NAME: _		
LAIMANT'S NAN	ИЕ:				EXPORTE	RS CUSTOMS	S CODE NU	MBER:
Consignment /	Ship's name	me Registered	Country where	INVOICE		STE	EL USED	Proof of currency earned
contract number		owner of ship	ship is registered	Date	Value	Gross mass (ton)	Net mass (ton)	Bank deposit slip number / Proof of electronic transfer / F178
				TOTAL				
FFIDAVIT				TOTAL				
) the information ) the total gross s ) the net steel cor ) the certified con ) the exported pro the exported pro ) the exported pro ) the exported pro	contained in the a steel content has need to the export oversion percental oducts were expo- oducts have not be oduct's net mass oducts contain si	above claim is true a been drawn against ted products consis	and correct in all resp /issued by our stores t of South African pro to the primary steel u ; uth Africa; steel	pects; s/stockyard; oduced rolled	d and drawn pri	imary steel;		eclare under oath that:
Signed			Date	_ Comm	issioner of O	aths		Date
Delete that which	is not applicable							



### **AGREEMENT TO CESSION OF CLAIM**

NB. To be completed by both the cedent and the cessionary

### 1. CEDENT (ASIGNOR)

	dersigned, in my oprietor/Partner of	capacity	as	*Public	Officer/Chie
hereby decla	ere that-				
a)	this *company/firm	/individual/c	oncei	n has the	right to clair
aj	from COSM by v				•
	goods which are lis			•	tile exporte
b)	I have provided			-	00 0000000
D)	documents to clair		Ullaly	with ti	ie liecessai
-1		•	C:4 :		. 4 4   2   2   2   3   4   4   4
c)	the right to claim C			•	•
	listed on the attach	ied claim ha	s bee	n ceded t	0 —

DA550 AND/OR DA554/SAD 500	TARIFF HEADING	CEDED TONNAGE TO BE CLAIMED
1)		
2)		
3)		
4)		
5)		
6)		
7)		
8)		
9)		
10)		

SIG	NATURE: DATE:
NAI	ME (In block letters):
ii)	having arranged the entire export transaction and having completed the export documentation without being a commission agent;
i)	*being the *manufacturer/partial manufacturer of the product(s) exported;
	that the right to claim COSM benefits in respect of the products listed on the attached claim form has been ceded to this *company/firm/individual/concern by virtue of it -
	hereby declare -
2.	CESSIONARY (RECIPIENT OF CESSION)  I, the undersigned, in my capacity as *Public Officer/Chief Executive/Proprietor/Partner of
•	elete which is not applicable)
SIG	NATURE: DATE:
NAI	ME (In blockletters):
f)	this company/firm/individual/concern undertakes not to lodge a claim to the COSM Trust for the goods listed in the attached claim.
e)	this *company/firm/individual/concern completed the required export documentation (DA550, F178, Commercial Invoice, Bill of Lading) and provided the recipient of the cession with the originals.
d)	this *company/firm/individual/concern exported the goods listed in the attached claim to a qualifying country for COSM purposes;

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\*(Delete which is not applicable)



### DECLARATION BY EXTERNAL AUTHORISED REPRESENTATIVE ACTING ON BEHALF OF THE CLAIMANT

l	(full name)
of th	e following address:
here	eby declare in my capacity as -
	of
	(company's name) that -
- \	There have an elected in terms of a letter dated
a)	I have been appointed in terms of a letter dated
	to prepare and submit the attached claim on behalf of -
b)	I have fully acquainted myself with the rules of the COSM Trust and that the
۵,	attached claim is submitted in accordance with these rules
c)	I accept full co-responsibility for any errors, omissions and mis-
	representations that might come to light in the processing and verification of
	this claim.
CIONATUR	E. DATE.
SIGNATUR	E: DATE:

### PRO FORMA LETTER

The Secretary
South African Iron and Steel Institute
Committee for Secondary Manufacture
PO Box 6318
PRETORIA
0001

0001
Dear Sir
APPOINTMENT OF AS EXTERNAL AUTHORISED REPRESENTATIVE
I herewith appoint
I herewith grant permission to the appointed representative to sign the claims on the company's/firm's behalf.
I/we acknowledged that claims submitted in terms of this appointment shall be accompanied by the Sworn Affidavit called for in Annexure 1 or 2 or 3.
I/we acknowledged that it remains the prerogative of the Administrators to consult with me directly in respect of any aspect including any disputes arising from the submission of my company's/firm's claims.
Yours faithfully
Signature
Capacity

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#### **DECLARATION OF STEEL PRODUCT**

	I,	, being the *Owner / Managing nt responsibility, hereby declare under oath
	that the steel was purchased from and that the following details are true and	
	and that the following details are tide and	d correct.
	CONSIGNMENT NO:	
1.	INPUT MATERIAL PURCHASED	
	Description of the product	
	Tariff classification code of the product	
	Tonnage purchased	
2.	STEEL PRODUCT MANUFACTURED A	ND EXPORTED
	Description of the product	
	Tariff classification code of the product	
	Tonnage exported	
	SIGNED	DATE
	COMMISSIONER OF OATHS	DATE
	* Delete which is not applicable	

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#### **VALUE ADDED PERCENTAGE CALCULATION**

CONSIGNMENT NO:			
CONCESSION RECEIVED FROM (if applicable):			_
CONCESSION PERIOD (if applicable):			
		AMOUNT	
Steel producers/steel merchants invoiced steel price per ton (input cost)	(1)		
Concession Rand per ton (if applicable)	(2)		
Discount Rand per ton if applicable (i.e. settlement, volume)	(3)		
Net cost per ton of steel input	Α		
FOB value per ton	В		
Percentage value added	С	%	

#### **EXPLANATION TO CALCULATE VALUE ADDITION PERCENTAGE**

- (A) = (1) (2) (3)
- (B) = FOB value ÷ Product gross mass
  The claimant's invoice applies if exporter and claimant differ. (Paragraph 9c of COSM rules p. 6)
- (C) = ((B-A) ÷ A x 100): The percentage value added must be more than 20% in order to qualify for assistance (19,9% will not qualify)



### **APPLICATION FOR PROJECT REGISTRATION**

APPLICATION D	ATE:	<del></del>								
CLAIMANT NAM	E:			CC	ONCESSION	YES / NO				
CONCESSION RECEIVED FROM : ESTIMATED CONCESSION AMOUNT/TON										
PROJECT NAME	PROJECT REF NO.	PROJECT CONSIGNEE	PROJECT DESTINATION	PROJECT COMMENCEMENT DATE	EXPECTED LAST SHIPMENT DATE	EXPECTED NUMBER OF SHIPMENTS	ESTIMATED NET MASS	ESTIMATED FOB VALUE		
								_		
	A confirmation of registration will be sent to you and a COSM registered project number will be provided for the project.  Please refer to the project reference number when submitting your export documents.									
Company Directo	Company Director / Responsible person									



#### **DETAIL OF STEEL PURCHASED**

STEEL PRODUCER / MERCHANT	ORDER NR.	TONNAGE	DATE PURCHASED

#### **APPLICATION OF PRIMARY STEEL PURCHASED**

PRIMARY PRODUCT TARIFF CLASSIFICATION CODE	VALUE ADDED PRODUCT TARIFF CLASSIFICATION CODE	DESCRIPTION

The completion & submission of this Annexure is compulsory and should accompany each claim.



#### **CLAIMANT REGISTRATION FORM**

By completing this registration form the claimant accepts, and agrees to adhere to, the rules and conditions imposed by the COSM Trust  ${\bf r}$ 

Name of company or entity	
VAT registration no. (Attach copy of certificate)	
Holding company (if applicable)	
Exporter's customs code (see DA550)	
Telephone of Company Code and Tel no.	( )
Facsimile of Company Code and Fax no.	( )
E-mail address of Company	
URL address of Company	
Postal address of Company	
Postal address of Company	
Postal Code	
Name and E-mail address of Contact person for claims	
Telephone of Contact person Code and Tel no.	( )
Facsimile of Contact person Code and Fax no.	( )
Name and E-mail address of Export Manager	
Name and E-mail address of Financial Manager	
Name and E-mail address of Managing Director	
Company Bank details: Account number	
Branch code	
Name of Bank	



#### **CLAIMANT PRODUCT INFORMATION**

Please supply the Harmonised System product classification statistical code and the description thereof, for the products you manufacture and want to claim on.

TARIFF CLASSIFICATION CODE	DESCRIPTION



#### **AGREEMENT TO VAT INVOICING**

I, the exporter and the undersigned, in my capacity as
of(company name)
hereby grant permission to SAISI to do invoicing of the COSM rebate on behalf of our company.
We undertake to :
<ul> <li>a) notify SAISI of any change in VAT status</li> <li>b) not to issue tax invoices, debit notes or credit notes in respect of the transaction/(s) in question.</li> </ul>
NAME : (in block letters)
SIGNATURE :
DATE:



### PERMISSION TO VERIFY DOCUMENTS AT CUSTOMS AND EXCISE

i, the <b>exporter</b> and the undersigned, in my capacity as				
of				
(Exporters customs cod	de number)			
hereby grant per for verification pu	mission to SARS to reveal the original export documentation to SAISI rposes.			
NAME:	(In block letters)			
SIGNATURE:				
DATE:				



#### **AFFIDAVIT**

### **DECLARATION OF LAST DA 554**

I, the <b>exporter</b> and the undersigned, in my capacity as		
	of	
(Company Name)		
(Exporters customs code number)		
hereby declare the following		
DA 554 no date	was the last DA 554 to amend information.	
The original DA 550 is no d	late	
NAME : (In block letters)		
SIGNATURE :		
DATE :		
COMMISSIONER OF OATHS	DATE	