



NATIONAL BARGAINING COUNCIL FOR THE CLOTHING MANUFACTURING INDUSTRY

HEAD OFFICE

Address: 7th Floor, Industria House, 350 Victoria Rd, Salt River, 7925
Tel: 021 460 4000 **Fax:** 021 460 4191 **Post:** PO Box 1142, Woodstock 7915 **Website:** www.nbc.org.za

APPLICATION FORM FOR THE ISSUE OF A COMPLIANCE CERTIFICATE

I/We the undersigned, with the necessary authority, hereby apply for a compliance certificate. We also understand that by submitting our application electronically or in writing, I/we bind ourselves and the company I/we represent to the conditions contained herein and declare that the information supplied is correct.

Registered name of company:	
Trading name of company:	
Other Operating Name(s):	

Manufacturing:		Design Centre:	
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Company /CC registration number:		SARS registration number:	
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VAT registration number:		E-mail address:	
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Physical address of company:		Postal address of company:	
		Postal Code:	

Telephone number:		Fax number:	
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Declaration:	I/we the persons authorized thereto by the above company hereby undertake that in the event of a compliance certificate being issued to the above company, that the certificate issued by the national bargaining Council, is in respect of goods manufactured at the address mentioned above and that the said certificate will not be utilised for purposes of importing manufactured garments or any garment manufacturing work sub-contracted to another manufacturer.
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Name of person/s submitting application:	
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Capacity in which person is applying:	
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Signature: (if faxed or posted)		Date of Application:	
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REGIONAL CHAMBERS:

CAPE
 Industria House
 350 Victoria Road
 Salt River 7925
 P.O. Box 1142
 Woodstock 7915
 Tel: 021 460 4000
 Fax: 021 447 0628

KWAZULU NATAL
 127/129 Magwaza Maphalala Street (Gale Street)
 Umbilo, Durban 4001
 P.O. Box 18354
 Dalbridge 4014
 Tel: 031 362 0700
 Fax: 031 307 6716

NORTHERN
 1st Floor, Garment Centre
 148 Kerk Street
 Johannesburg 2001
 P.O. Box 5101
 Johannesburg 2000
 Tel: 011 402 2737
 Fax: 011 402 7375

INVESTIGATION SCHEDULE TO BE FOLLOWED BY STAFF CONDUCTING INVESTIGATIONS FOR THE ISSUE OF COMPLIANCE CERTIFICATES

1. PROCEDURE

The following procedure must be adhered to by the Labour Affairs Manager in the course of investigating manufacturers who have applied for compliance certificates to be issued:

- 1.1 The LAM or his nominee will visit the company applying for a compliance certificate at which instance the checklist (Section A and B) supplied below will be utilized to audit the company.
- 1.2 On completion of the investigation the LAM or his nominee will obtain the information as required in Section C of the supplied checklist below.
- 1.3 The LAM will ensure that the checklist is properly audited and completed. Once completed the LAM will forward the information to the NCM.
- 1.4 The LAM will ensure that the investigation will be completed within 7 days from the date of receipt from the NCM, unless otherwise instructed in writing by the NCM.
- 1.5 Any employer refusing or who is unable to provide the information required in Section A, B and C below will not receive further consideration for the issuing of a compliance certificate.

1. SECTION A

1. Name of Company:			
2. Physical Address of Company:			
2.			
3. Postal Address of Company:			
3.			
4. Telephone No. of Company:		Fax No.	
5. Employer Status (mark the applicable box with X):	Party	<input type="checkbox"/>	Non-Party
5.1 If, Party member, Name of Organisation:			
6. Company Registration No.:			
7. Company VAT No.:			
8. Company SARS No.:			
9. Garment/s Manufactured:			
10. Inspect goods being manufactured and ascertain for which Retailer's/CMT's/ Design Houses the orders are:			
11. Date of application for compliance certificate:			

Name of person submitting application

Signature

SECTION B

	Checklist Task	Investigation Outcome	Investigated By	Date
1.	Investigation at the factory			
1.1	Enter Factory and advise employer and notify the Chief Shop Steward that an investigation is going to be conducted in respect of the application submitted for the issuing of a compliance certificate. In the event of the employer refusing to co-operate the result will be that the investigation will immediately be stopped and the employer will have to re-apply at a later date.			
1.2	Advise factory your intent to conduct an inspection and immediately proceed to do a headcount			
1.3	Enter factory and count number of employees operating on the floor. Write the number counted			
1.4	Request a copy of the payroll. This copy must be retained and be kept on the file of the company. Also check with the Shop Stewards if there outstanding monies or back pay due to staff members. If there are reported cases follow-up and verify the exact nature thereof.			
1.5	Complete the information required in Section A above			
1.6	Count the number of employees on the payroll and compare to the headcount.			
1.7	Request the employer to explain and/or provide reasons for any discrepancy between the number of employees counted on the floor and the payroll and note the reasons. Attach these to this checklist.			
1.8	Obtain a copy of the company registration certificate with the Department of Trade & Industry			
1.9	Obtain a copy of the VAT and SARS certificate issued to the company			
1.10	Enquire from the shop stewards as to the number of employees employed at the factory and compare to headcount and payroll, if any discrepancy is detected enquire as to the reason from the employer. Note the reasons given.			

SECTION C

	Checklist tasks	If there is a variance, supply details	Compliance Status (Is company compliant)	
			Yes	No
1.	Check the following against the payroll received:			
1.1	That the wage rate, on the payroll, for individual staff correspond to the rate on the Council system and the prescribed wage.			
1.2	Check that overtime rates paid conform to Agreement			
1.3	Check that leave pay was paid in terms of the Agreement.			
1.4	Check that no leave pay is outstanding.			
1.5	That the annual bonus has been paid in terms of the Agreement.			
1.6	The number of employees reflected on the payroll is the same as the number on the Council system.			
1.7	That the hours of work as reflected are in conformity with the Agreement			
2.	Check the following against the Council records (Monthly returns):			
2.1	That the council contribution paid is correct.			
2.2	That the provident fund contributions paid are correct.			
2.3	That the medical contributions paid are correct.			
2.4	That the sick fund contributions paid are correct.			
2.5	That the HIV/Aids levies paid are correct.			
2.6	That the SACTWU bursary levies paid are correct.			
2.7	That the union subscriptions paid are correct.			
2.8	That the employer association subscriptions paid are correct.			
3.	Verify hereunder any other contributions/levies payable in terms of the chamber agreement:			
3.1				
3.2				
3.3				
4.	Check the following on the Council computer system:			
4.1	That the employer/employee contribution rates comply to the agreement			
4.2	Number of employees on the payroll are the same as on the system			
4.3	That there are no outstanding levies or arrears due to the Council. If any arrears have been identified supply the amount, for how long the arrears have been outstanding and for what the arrears are.			

4.4	That there are no wage any other guarantees outstanding			
4.5	That there are no outstanding wage claims and that arrear wages have been paid in full.			
4.6	<p>If the employer has been granted exemption provide the following information in the column supplied:</p> <ul style="list-style-type: none"> - Date exemption was applied for - Date exemption expires - Nature of exemption granted - Confirmation by investigation that the employer is conforming to the provisions of the exemption 			
4.7	Date employer registered with the Council.			
5.	If the company has been found to be non-compliant, issue a compliance order before leaving the premises			

SECTION D

To be completed by the Designated Agent that investigated the company and the Labour Affairs Manager to whom the Designated Agent reports.

I, Designated Agent, declare that I have investigated the above company and that the information supplied herein to the best of my knowledge is true and correct.

SIGNATURE

DATE

I, Labour Affairs Manager hereby recommend/ not recommend (delete whichever is not applicable) that a Compliance Certificate be issued. If not recommended, provide reasons hereunder.

SIGNATURE

DATE

SECTION E

The Council's computer records have duly been updated on: _____

SIGNATURE

DATE