

SMART INVOICE COMMITMENT FORM

ver 1.2

1. Company/Business Information	
Company Name/ Business Name	
TPIN	
Physical Address	
E-mail	
Telephone No	
2. Details of the Owner/ Director/ Legal Representative of the business or company	
Name	
Position	
Postal Address	
Telephone No.	
Email	
NRC/Passport No*:	
3. Smart Invoice Solution Required (Check One)	
<input type="checkbox"/> Desktop/Laptop (Windows) <input type="checkbox"/> Tablet (Android) <input type="checkbox"/> PDA (Android) <input type="checkbox"/> Smartphone (Android)	Device Details Device Serial Number: Device Model Name:
<input type="checkbox"/> Online Portal	
4. Addition of Branches	
<p>To add a branch, complete Appendix A – Application Form to add Branch</p>	

5. Integration and Certified Software Vendor details

Virtual Sales Data
Controller (VSDC)

Certified Software Vendor / Self details:

TPIN: 2002098917.....

NAME: Fiscal Edge Solutions Limited.....

Applicable invoicing system requiring integration:

NAME: Sage Pastel.....

VERSION: V11.....

6. Commitment by taxpayer applying for Smart invoice Software

As the business/company eligible to use Smart Invoice under TPIN No....., I commit to the following:

- a) I hereby confirm that I am ready to receive the Smart Invoice software and I shall use it properly.
- b) I will not proceed with **formatting/resetting** the device on which the Smart Invoice is installed until I get written authorization from Zambia Revenue Authority upon an officially submitted request.
- c) I understand that I must return the Electronic Fiscal Device(s) being used (if any) to ZRA, **within Five(5) working days** from the date of installation of the Smart Invoice software.
- d) I commit to hold all confidential information provided to me in the use of Smart Invoice by third parties in strict confidence and take all reasonable precautions to prevent unauthorized disclosure.
- e) I commit to use confidential information solely for the purpose for which it is provided.

Names and signature of the Owner/ Director /Legal Representative of the Business or Company

Name.....

Signature.....

Date of Application (dd/mm/yyyy):.... /..... /.....

**For foreigners use Passport number in lieu of National Registration Card (NRC) number*

Appendix A – Application Form to add Branch

1. Company/Business Branch Information	
Branch Name	
Would you like to update this branch to be the main branch?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Physical Address	
E-mail	
Telephone No	
2. Details of Branch Manager	
Name	
Position	
Postal Address	
Telephone No.	
Email	
NRC/Passport No*:	
3. Branch device details	
Device Details	
Device Serial Number	
Device Model Name	

Notes:

1. Complete the form **Appendix A – ‘Application Form to add Branch’** to apply for more branches
2. For foreigners use Passport number in lieu of National Registration Card (NRC) number