



TRANSPORTER ONBOARDING FORM

Section A: Company / Driver Information

- Transporter Name / Company Name: _____
- Type:
☐ Individual Driver ☐ Company Fleet Owner
- Company Registration No. (if any): _____
- Contact Person: _____
- Phone Number: _____

Section B: Vehicle Details

- No. of Vehicles: _____

Vehicle Registration Number	Year of Manufacture	Vehicle Size	Vehicle Type

Section C: Driver Details

- Are you the driver?
☐ Yes ☐ No

If no, complete driver form.

Section D: Operating Zones

- ☐ Local Deliveries
- ☐ Regional (e.g. Gabs–Francistown)
- ☐ Cross-border (Specify countries): _____

Section E: Banking & Payment

- Bank Name: _____
- Account Name: _____
- Account Number: _____
- Branch Number: _____
- Branch Name: _____

Section F: Supporting Documents

(✓ Upload or attach)

- ☐ Company Registration Certificate (if applicable)
- ☐ Company Extract (if applicable)
- ☐ Shareholders/Directors IDs
- ☐ VAT Certificate
- ☐ Tax Clearance Certificate
- ☐ Driver's License
- ☐ PrDP
- ☐ Vehicle Registration (Blue Book)
- ☐ Roadworthiness Certificate
- ☐ Insurance (3rd Party or Comprehensive)
- ☐ Insurance (Carriers Liability and/or Goods in Transit)
- ☐ Transit Guarantee
- ☐ Safety Gear and HAZMAT compliance