



Eswatini Water Services Corporation Customer Services

Customer Details Confirmation Form for Companies

Account Number:

Please fill in the following spaces with your current details:

Company Name:	<input type="text"/>
Registration Number:	<input type="text"/>
Phone Number:	<input type="text"/>
Fax Number:	<input type="text"/>
Email Address:	<input type="text"/>
Applicant Name:	<input type="text"/>
Applicants Number:	<input type="text"/>
Postal Address:	<input type="text"/>
Physical Address:	<input type="text"/>

Date	Signature
<input type="text"/>	<input type="text"/>

Attachments: a) Form J or Certificate of Incorporation, b) Directors ID copy