

CRIMINAL INDEMNITY BY APPLICANT

I, _____ (Full name, surname)

ID no: _____

Address : _____

Has approached the following TPN Subscriber _____

I hereby authorize the above TPN / TPN's duly authorized agent, namely I-Digital, to make my name, surname and identity number and or fingerprints available to the South African Police Services.

I furthermore authorize i-Digital to conduct a criminal name clearance with the South African Police Services and to furnish said personal information regarding my criminal background, criminal history, previous convictions and / or any other relevant information such as is usually furnished by the Criminal Record Centre of the South African Police Service, to TPN / TPN's duly authorized agent.

I furthermore unconditionally indemnify the South African Police Service and all its members, employees as well as the Government of the Republic of South Africa against any liability which results or may result from furnishing information in this regard.

Signed at _____ (place)

this _____ day of _____ (month) _____ (year)

WITNESSES:

1. _____

2. _____

Signature of the applicant

Signature of parent or guardian (if the applicant is a minor)

PLEASE COMPLETE AND RE-FAX TO I-Digital AT 0866 888 711