www.sheriffs.org.za



## **Deputy Update Form**

88 Loop Street PO Box 15223 Tel: (021) 426 0577 Cape Town 8001 Vlaeberg 8018 Fax: (021) 426 2598

Required to be completed and returned to the South African Board for Sheriffs.

\* Please note each deputy sheriff is required to fill out a form.

## **DEPUTY SHERIFF'S PERSONAL DETAILS**

(FOR RECORD PURPOSES)

Title	○ <sub>Mr</sub>	OMrs	O <sub>Ms</sub>		Gender	O Male	○ Female
Full names							
Surname					ID Number		
Race	○ African ○ Coloured ○ Indian ○ White						
Residential Address					Postal Address		
Area Code					Postal Code		
DOCEX Number							
Name of Sheriff Appointed to							
Jurisdictions							

## **DEPUTY SHERIFF'S CONTACT DETAILS**

(FOR RECORD PURPOSES)		
Residential Phone Number		
Personal Cell Number		
Personal Email		
Signature:	Date:	