



**South African Nursing Council**  
(Established under the Nursing Act, 2005)

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## Application for Distinguishing Devices

### 1. How to order your distinguishing devices–

At the counter	By post	By fax
<ol style="list-style-type: none"> <li>1. Read this instruction sheet through carefully to make sure you understand what to do before starting to complete the order form.</li> <li>2. Complete the personal details section.</li> <li>3. Locate the devices you wish to order and fill in the number required in the space provided (maximum 3 per item in any 12 month period).</li> <li>4. Calculate the total cost per item and write it in the Amount column.</li> <li>5. Calculate the total amount (<b>excluding</b> postage) – this is the amount due so make sure you can pay this amount when you come to the counter.</li> <li>6. Date and sign your order form.</li> <li>7. Hand your order form, ID document, and payment (credit/debit card, <u>bank guaranteed cheque</u>) to the cashier at the counter on the ground floor of the Council building, weekdays between 08:00 and 16:00. <b><u>You cannot pay using cash at the counter.</u></b></li> </ol> <p>❖ <b>PLEASE TAKE NOTE:</b> If you send someone else to purchase your devices at the counter, you <b>must</b> also complete the authorization letter on the back of the order form and give the person a <b>certified copy</b> of your ID document.</p> <p>❖ <b>NOTE: Devices will ONLY be issued to persons who have valid ID documents.</b></p>	<ol style="list-style-type: none"> <li>1. Read this instruction sheet through carefully to make sure you understand what to do before starting to complete the order form.</li> <li>2. Complete the personal details section.</li> <li>3. Locate the devices you wish to order and fill in the number required in the space provided (maximum 3 per item in any 12 month period).</li> <li>4. Calculate the total cost per item and write it in the Amount column.</li> <li>5. Calculate the total amount (<b>including</b> postage) – this is the amount due.</li> <li>6. Date and sign your order form.</li> <li>7. Pay for your order at the bank :– <ul style="list-style-type: none"> <li>• Fill in the direct deposit slip at the bottom of the form;</li> <li>• Hand the order form to the teller at any branch of First National Bank together with your cash payment for the amount due; and</li> <li>• Make sure the teller stamps your order form and gives you a proof of deposit.</li> </ul> </li> <li>8. Post the order form together with your proof of deposit into the Council bank account to: <p align="center">Distinguishing Devices Section S A Nursing Council P O Box 1123 PRETORIA 0001</p> </li> </ol> <p><b>NB: Postal Orders and cheques are no longer accepted for orders by post or payments into the bank account.</b></p>	<ol style="list-style-type: none"> <li>1. Read this instruction sheet through carefully to make sure you understand what to do before starting to complete the order form.</li> <li>2. Complete the personal details section.</li> <li>3. Locate the devices you wish to order and fill in the number required in the space provided (maximum 3 per item in any 12 month period).</li> <li>4. Calculate the total cost per item and write it in the Amount column.</li> <li>5. Calculate the total amount (<b>including</b> postage) – this is the amount due.</li> <li>6. Date and sign your order form.</li> <li>7. Pay for your order at the bank :– <ul style="list-style-type: none"> <li>• Fill in the direct deposit slip at the bottom of the form;</li> <li>• Hand the order form to the teller at any branch of First National Bank together with your cash payment for the amount due; and</li> <li>• Make sure the teller stamps your order form and gives you a proof of deposit.</li> </ul> </li> <li>8. Fax the order form together with your proof of deposit into the Council bank account to: <p align="center">(012) 343-5400 (24-hour line)</p> </li> </ol> <p><b>NB: Cheques are no longer accepted for payments into the bank account.</b></p>

### 2. Please read the following notes carefully–

- The prices shown are valid as at 1 January 2017, but prices are subject to change.
- The distinguishing devices shall be worn as prescribed in the relevant regulations **unless** the person is a member of the South African Military Nursing Services and wears the military uniform.
- Only persons who are registered and / or enrolled with the South African Nursing Council are permitted to wear the distinguishing devices.
- You may only purchase distinguishing devices that you are entitled to wear by virtue of the categories in which you are registered / enrolled.

- You may purchase a maximum of **THREE SETS** of each type at one time. You are also limited to **THREE SETS** of each type in any 12 month period (i.e. the total ordered in this order plus any other orders received during the previous 12 months).
- It is an **offence** to sell or supply distinguishing devices supplied to you to any other person.
- Distinguishing devices ordered by post or by fax **cannot** be collected at the counter unless you have made arrangements to do so with the Distinguishing Devices Section when sending your order.
- Distinguishing devices are sent by insured parcel post at the buyer's risk.
- Allow six weeks for your distinguishing devices to reach you by post.
- Make bank guarantees cheques payable to **South African Nursing Council**. (N.B. Bank guaranteed cheques may only be paid in at the counter).
- Unfortunately, the Council **cannot** accept the following methods of payment:
  - Telegraphic money orders
  - Post Office donation coupons
  - Postal Orders
  - Cash at the Council Offices (Counter)
  - Cash on Delivery (C.O.D.) for orders to be dispatched by post

### 3. Special Arrangements for Bulk Orders–

Please abide by the following arrangements if your organization submits bulk orders on behalf of the nurses working for you.

- Each nurse must fill in and sign his / her own application form and must include a certified copy of his / her ID document.
- If you are sending a driver to collect the distinguishing devices at the counter, each nurse must fill in and sign the authorization letter on the back of the order form. (You are welcome to type in the relevant details of the driver before photo copying the forms.) Note that the persons name is required – you may not fill in a generic name such as “Bearer” or “Driver”.
- If you are ordering large quantities by post, please:
  - (1) Calculate the total amount of your bulk order excluding any postage;
  - (2) Call the Distinguishing Devices Section and request them to calculate the required postage (and insurance) fee for your order; and
  - (3) Add the postage and insurance to the total amount of your order and pay this amount directly into the Council's bank account or send a **bank guaranteed cheque** for this total amount due together with your bulk order. **Please DO NOT send cash for bulk orders – it will not be accepted.**

### 4. Assistance with Your Order–

Distinguishing devices are valuable goods and all orders are sent by insured parcel post. The Council cannot be held responsible for the loss of distinguishing devices within the postal system. Queries regarding lost items will have to be directed to the South African Post Office Ltd. The Distinguishing Devices section will provide you with the relevant Post Office Track and Trace barcode number.

If you have any problems filling in the order form or if you have any other questions, please contact the Call Centre for assistance on:

- (012) 420-1000 (Call Centre)

### 5. Returns Policy

Distinguishing devices which are found to be defective must be returned to SANC within three months from the date of purchase. If, after examination by SANC the devices are found to be defective (in the manufacturing process), such devices will be replaced by SANC at no additional charge to the original purchaser. The devices must be returned to SANC for inspection in the original packaging in which they were supplied.

**Personal Details :**

SANC Reference Number																		
Surname																		
Given Names																		
Maiden Name (if applicable)																		
Identity Number																		
Telephone (office hours)										Cell phone								
Postal Address (If ordering by post or fax, your distinguishing devices will be sent to this address)																		
Please use the above postal address for all future correspondence – tick (✓) one block															Yes		No	

**Order Form :**

**VAT :** All prices include 14% Value Added Tax

Devices for REGISTERED PERSONS :	Price per pair	No. of pairs	Amount
<b>Shoulder Badges (silver and blue)</b> for Registered Persons <i>(NB. These are worn on the Epaulettes but are sold separately)</i>	R 34,00 per pair	x	= R
<b>Epaulettes (maroon)</b> for General Nurses	R 70,00 per pair	x	= R
<b>Epaulettes (navy blue)</b> for Psychiatric Nurses	R 70,00 per pair	x	= R
<b>Epaulettes (dark blue)</b> for Mental Nurses	R 70,00 per pair	x	= R
<b>Epaulettes (light blue)</b> for Nurses for Mental Defectives	R 70,00 per pair	x	= R
<b>Epaulettes (green)</b> for Midwives / Accoucheurs	R 70,00 per pair	x	= R
<b>Epaulettes (purple)</b> for Sick Children's Nurses	R 70,00 per pair	x	= R
<b>Bars (navy blue)</b> for Psychiatric Nurses	R 23,00 per pair	x	= R
<b>Bars (dark blue)</b> for Mental Nurses	R 23,00 per pair	x	= R
<b>Bars (light blue)</b> for Nurses for Mental Defectives	R 23,00 per pair	x	= R
<b>Bars (green)</b> for Midwives / Accoucheurs	R 23,00 per pair	x	= R
<b>Bars (white)</b> for Nursing Education	R 23,00 per pair	x	= R
<b>Bars (silver)</b> for Nursing Administration	R 23,00 per pair	x	= R
<b>Bars (yellow)</b> for Public / Community Health Nursing	R 23,00 per pair	x	= R
Devices for ENROLLED NURSES / MIDWIVES :	Price per pair	No. of pairs	
<b>Epaulettes (white)</b> for Enrolled Nurses and/or Midwives	R 70,00 per pair	x	= R
<b>Oval Badges (maroon)</b> for Enrolled Nurse <b>only</b>	R 34,00 per pair	x	= R
<b>Oval Badges (green)</b> for Enrolled Midwife <b>only</b>	R 34,00 per pair	x	= R
<b>Oval Badges (half maroon and half green)</b> for person who is both Enrolled Nurse <b>and</b> Enrolled Midwife	R 34,00 per pair	x	= R
Devices for ENROLLED NURSING AUXILIARIES :	Price each	No. required	
<b>Round Brooch</b> for Enrolled Nursing Auxiliaries	R 21,00 each	x	= R

		<b>Total Amount (excl. postage)</b>	R
Date of order		<b>ADD: Postage and insurance</b>	R 60,00
Signature		<b>Total Amount (incl. postage)</b>	R

Bank date stamp

<b>FNB (First National Bank)</b>	<b>Deposit Slip</b>	Account holder	<b>S A Nursing Council</b>
<b>Details of Depositor:</b>		Branch No.	<b>2 5 3 – 1 4 5</b>
Full name		Account No.	<b>5 1 4 2 1 1 8 6 1 9 3</b>
Tel. No. ( )		Ref. No. <sup>(*)</sup>	<b>SALED DS</b>
Signature	Bank date stamp	Total Deposit	<b>R</b>

<sup>(\*)</sup> As the deposit reference number, use your SANC Ref. No. followed by the payment type code **SALED DS**. This code means that this payment is in respect of an order for distinguishing devices and it should be captured wherever possible – if permitted by the bank's system.

**Authorization Letter**

**(For Someone Else to Collect Distinguishing Devices on Your Behalf)**

I .....  
*(state full name)*

hereby authorize .....  
*(state full name of person authorized to collect distinguishing devices on your behalf)*

identity number .....  
*(state identity number of person authorized to collect distinguishing devices on your behalf)*

to collect and pay for the distinguishing devices ordered by me on my behalf.

These distinguishing devices are for my own personal use.

I am aware that it is an **offence** to supply distinguishing devices to any other person in terms of the regulations regarding distinguishing devices.

I have enclosed a certified copy of my ID document together with this application.

Signature: .....

Date: .....

SANC-13.21 (2017-01-12)

**FOR OFFICE USE**

<b>Date dispatched</b>											
<b>Post Office trace number</b>											
<b>Dispatched by</b>											
<b>ID Number of person who collected the devices (at the counter) –</b>											