



# SACRRA | CREDIT & RISK REPORTING ASSOCIATION

## Assessment Form Data Contributor Details

### 1. Data Contributor Details

Name of business, company or organisation		
Trading name		
Postal address		
Physical address		
Province		
Telephone number landline:		
Cell phone number:		
Company email address:		
Company registration number:		
NCR Registration number, if applicable		
Total principal debt		
VAT registration number, if applicable:		

### 2. Business / Infrastructure / Readiness

Primary Credit bureau / Number Records / Products / Industry / SSP		
Do you currently use a Secondary Service Provider (SSP) or external Loan Management System (LMS)? If Yes, please complete 'SSP Contact Details' section		Yes
		No, but would consider using one
		No, will develop, manage and submit data on our own (complete questions below)
Do you keep customer and payment information on your customers? If No, please complete 'Capacity to Develop and Share' section		Yes
		No
If you have information on you customers, is it stored in an electronic format? If No, please complete 'Capacity to Develop and Share' section		Yes
		No
Is your data stored in a paper format? If Yes, please complete 'Capacity to Develop and Share' section		Yes
		No
Do you think you have the capacity, skill and resources to develop an electronic extract? If No, please complete 'Capacity to Develop and Share' section		Yes
		No
Do you have access to the internet? If No, please complete 'Capacity to Develop and Share' section		Yes
		No

### 3. Primary Credit Bureau

Which is your primary Credit Bureau?  If 'Don't use a credit bureau' or 'Don't know', please complete 'Capacity to Develop and Share' section		Compuscan
		Experian
		TransUnion
		XDS
		CPB
		Don't use a credit bureau
		Don't know

### 4. Number of Records

Number of consumer accounts / records on file  If 'Don't know', please complete 'Capacity to Develop and Share' section		None (new business)
		Records between 1-50
		Records between 51-99
		Records between 100-250
		Records between 251-500
		Records between 501-1000
		Records between 1001-2500
		Records between 2501-5000
		Records greater than 5000
		Don't know

5. Industry	
Industry Category	Banking Sector
	Microfinance
	Debt Recovery
	Direct Sales
	Life Insurance
	Short term Insurance
	Telecoms Provider
	Other (please state below)
6. Main and/or Owner Contact Details	
Owners / Director / Partners / Members (please provide separate document if required)	
Name:	Name:
Title:	Title:
Tel No:	Tel No:
Fax No:	Fax No:
Cell No:	Cell No:
E-mail Address:	E-mail Address:
Name:	Name:
Title:	Title:
Tel No:	Tel No:
Fax No:	Fax No:
Cell No:	Cell No:
E-mail Address:	E-mail Address:
7. Alternative Contact Details	
Manager / Supervisor / Accountant (please provide separate document if required)	
Name:	Name:
Title:	Title:
Tel No:	Tel No:
Fax No:	Fax No:
Cell No:	Cell No:
E-mail Address:	E-mail Address:
8. Service Provider Contact Details	
Secondary Service Provider / Loan Management System	
Service Provider Name:	If applicable:
Contact person name (1):	Contact person name (2)
Tel No:	Tel No:
Cell No:	Cell No:
E-mail Address:	E-mail Address:
If applicable:	If applicable:
Contact person name (3):	Contact person name (4)
Tel No:	Tel No:
Cell No:	Cell No:
E-mail Address:	E-mail Address:
9. Capacity to develop and share data	
Do you have the capacity or skills to develop an infrastructure to store data in an electronic format and develop an extract of the data according to a data specification and link to a data transfer portal via a web service to submit your files daily and monthly?	Yes
	No
Would you consider joining a SSP or LMSV to develop your extract and manage your data submissions on your behalf?	Yes
	No
How long will it take you to develop?	No capacity to develop / utilise a SSP or LMS
	Less than 3 Months
	0 - 3 Months
	3 - 6 Months
	6 - 12 Months
	More than a year
	Have no idea
Are you willing to attend a workshop / training course on the requirements?	Yes
	No
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