



NPC  
 (A company incorporated in terms of section 10 of the Companies Act of 2008 (Act 71 of 2008)  
 (Old Section 21) Reg Nr 2007/012733 /08: 067-754-NPO

## GARSCOM RESIDENTS ASSOCIATION

### GARSCOM VISION

GarsCom's goal is to be a **caring, safe and secure** community where all of its residents' interests are supported and GarsCom provides outreach to less advantaged communities.

This is as per the initial vision when GarsCom started in 1998, to be an open, safe, friendly and involved community.

GarsCom is a non-profit community organisation comprising of residents of the area bordered by: □  
 Woodhill ● Solomon Mahlangu Drive ● Atterbury Road ● Garsfontein Road

### GARSCOM RESIDENTS ASSOCIATION (GRA) BENEFITS

- Be part of the **SAFEST COMMUNITY** in the Garsfontein Policing Area
- Have access to Street WhatsApp **ALERTS** on crime and community information
- Receive a **WEEKLY NEWSLETTER** by e-mail
- Receive **MONTHLY CRIME STATISTICS** provided at Monthly Meetings
- 24/7 Access to GarsCom's own state of the art **CONTROL ROOM**, manned by 4 operators
- The benefit of **SECURITY CAMERA'S** at both GarsCom entrances as well as at Woodhill Shopping Centre
- **COMMUNITY PROJECTS** e.g. Christmas Lights, Funday, Garden Competition, Recognition Evening, Environment, Recycling and many more
- **PROACTIVE PARTNERING AND CONTROL OF SECURITY PROVIDER - CHUBB**
- Feel that you **BELONG TO A COMMUNITY THAT CARES** for each other
- 24/7/365 **PRO-ACTIVE SECURITY PATROLS** (10 community night patrol teams driving from 19:00 - 05:00)
- Receive a **Section 18A TAX CERTIFICATE** for donations donated over and above the GRA membership fees. (SARS Tax Exemption Unit (TEU) forbids the issue of tax certificates for membership fees)

### GARSCOM RESIDENTS ASSOCIATION (GRA) MEMBERSHIP

The following membership options are available to GarsCom residents:

GRA MEMBERSHIP	MONTHLY COST	ANNUAL COST	BENEFITS
GARSOM RESIDENT	R 120 / month	R 1000 / annum	All GRA Benefits
COMPLEX RESIDENT	R 50 / month	R 500 / annum	All GRA Benefits

GarsCom allows for either a monthly debit order or an annual payment upfront.

### HOW TO BECOME A GARSCOM RESIDENTS ASSOCIATION (GRA) MEMBER

1. Obtain an Application & Debit Order Form  
[www.garscom.co.za](http://www.garscom.co.za) / [enquiries@garscom.co.za](mailto:enquiries@garscom.co.za)
2. Complete the Application & Debit Order Form (both pages must be signed)
3. Submit the Application & Debit Order Form to [enquiries@garscom.co.za](mailto:enquiries@garscom.co.za) AND [finance@garscom.co.za](mailto:finance@garscom.co.za)

\* Please request an EFT Form for EFT payments

**INWONERS VERENIGING LIDMAATSKAP AANSOEK VORM**  
**RESIDENTS ASSOCIATION MEMBERSHIP APPLICATION FORM**

DATUM:   
 DATE:

Wil u opteken om n GIV Lid te word?  Ja / Yes  
 Do you want to sign up to become a GRA Member?  Nee / No

MARKETER:   
 BEMARKER:

Van & Volle Name  
 Surname & Full Names

Noem Naam  
 Nickname  ID Nummer  
 ID Number

Adres  
 Address

Is u die eienaar van die eiendom?  
 Do you own this property?  Ja / Yes  
 Nee / No Eienaar Naam  
 Owner Name

Landlyn Telefoon Nommer  
 Fixed Line Telephone No  Sekuriteits Maatskappy  
 Security Company

Selfoon Nommer  
 Cellphone Number

E-pos Adres  
 E-mail Address

Eggenoot / Huismaat Volle Name  
 Spouse / Housemate Full Names

Selfoon Nommer  
 Cellphone Number

E-pos Adres  
 E-mail Address

Is u bereid om betrokke te raak by:  
 Are you willing to volunteer for: Gemeenskaps Projekte   
 Community Projects Gemeenskaps Patrolie   
 Community Patrols

Het u 'n twee-riqting hand radio: Ja / Yes   
 Do you have a two-way hand radio: Nee / No  Wil u een aanskaf: Ja / Yes   
 Would you like to acquire one: Nee / No

**GarsCom Member's Undertaking and Indemnity:**

I, the undersigned, agree and undertake as follows:

1. I understand that my decision, as an active member of GarsCom, to erect a GarsCom sign on my fence / property, is voluntary.
2. I understand that GarsCom is not a security company. I will neither expect nor require GarsCom or any of its members to act as the primary responder in the event of the activation of an alarm on my property or in the event of an emergency on my property. For this purpose GarsCom has entered into a co- operation agreement with Chubb Security ["Chubb"] which enables GarsCom members to join Chubb if they so wish.
3. I further undertake that I will desist from using Chubb's services if I am not a bona fide client of Chubb. I understand that Chubb officers are expressly forbidden to enter any GarsCom premises of which the owner is not a client of Chubb.
4. I'm aware in order to be a GRA member I have to pay the specified membership fee. If I fail to do so my GRA membership will be suspended.

**As per Act No. 4 of 2013: Protection of Personal Information Act, 2013 (POPI)**  
**GarsCom is compliant with the conditions for lawful processing of personal information**

Datum:  
 Date:

Handtekening:  
 Signature:

**INWONERS VERENIGING LIDMAATSKAP DEBIETORDER VORM**  
**RESIDENTS ASSOCIATION MEMBERSHIP DEBIT ORDER FORM**

DATUM:   
 DATE:

	<b>GarsCom Inwoner</b>		<b>Kompleks Inwoner</b>	
	<b>GarsCom Resident</b>		<b>Complex Resident</b>	
Ek betaal:	R120 per maand	<input type="text"/>	R50 per maand	<input type="text"/>
I am paying:	R120 per month	<input type="text"/>	R50 per month	<input type="text"/>

**BANK DEBIETORDER INSTRUKSIES**  
**BANK DEBIT ORDER INSTRUCTION**

Van & Volle Name Surname & Full Names	<input type="text"/>		
Adres Address	<input type="text"/>		
Kontak Nommer Contact Number	<input type="text"/>		
Belasting Nommer Tax Number	<input type="text"/>	Debiet Bedrag Debit Amount	<input type="text"/>

**BANK REKENING BESONDERHEDE**  
**BANK ACCOUNT DETAILS**

Rekening Naam Account Name	<input type="text"/>
Bank Naam Bank Name	<input type="text"/>
Rekening Nommer Account Number	<input type="text"/>
Tak Nommer Branch Number	<input type="text"/>
Rekening Tipe Account Type	<input type="text"/>

I hereby authorise GarsCom to debit my account with the sum of \_\_\_\_\_ per month,  
 on the **first day of each month**, in lieu of membership fees to the GarsCom Residents Association,  
 effective from \_\_\_\_\_

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**GarsCom is compliant with the conditions for lawful processing of personal information**

Datum:  
Date:

Handtekening:  
Signature: