



**B·H·F**  
PRACTICE CODE  
NUMBERING SYSTEM

Lower Ground Floor, South Tower, 1Sixty Jan Smuts,  
Jan Smuts Ave, cnr Tyrwhitt Ave, Rosebank, 2196  
P O Box 2324, Parklands 2121, South Africa  
Client Services: 0861 30 20 10 • Fax: 086 607 3703  
Tel: +27 11 537 0200 • Fax: +27 11 880 5959  
e-mail: [clientservices@bhfglobal.com](mailto:clientservices@bhfglobal.com) • web: [www.bhfglobal.com](http://www.bhfglobal.com)

## APPLICATION FOR AN INSPECTION: UNATTACHED OPERATING THEATRE UNIT/DAY CLINIC

BHF has contracted the Council for Health Service Accreditation of Southern Africa (COHSASA) to conduct the inspection on its behalf. All inspections will be carried out in accordance with the current BHF inspection criteria. A copy of the criteria is attached for your information and the following documentation/payment must be submitted to the BHF office before an inspection can be arranged:

- a) The completed questionnaire requesting an inspection.
- b) An inspection fee of R6 030.00 (VAT exclusive) together with an estimated payment of R8 000.00 to cover all travelling expenses
- c) A certified copy of the registration certificate from the Department of Health.
- d) BHF annual registration fee for 2018 of R1 000.00 (VAT inclusive)
- e) Total amount payable R15 030.00

**Please note that the amounts specified in b and c above must be paid to BHF prior to the inspection being undertaken.** Final invoices will be issued for the inspection fee and actual travel costs. **In the event of a re-fund, the amount will be paid into the same account as given on the banking details verification form.**

The inspection and PCNS registration fees may be paid by cheque or direct deposit into the PCNS bank account

<b>BANK:</b>	<b>NEDBANK</b>
<b>BRANCH NAME:</b>	<b>ROSEBANK</b>
<b>BRANCH CODE:</b>	<b>197705 (add 00 – if paying from STANDARD BANK)</b>
<b>ACCOUNT NAME:</b>	<b>PCNS</b>
<b>ACCOUNT NUMBER:</b>	<b>1958 518 530</b>

For security reasons, "Cash Payments are no longer accepted on the premises". Please attach a copy of the deposit slip to the application form.

Should you require any further assistance please do not hesitate to contact the Client Services Department on telephone number 0861 302 010.

**NB. All completed applications must be posted:**

**P O Box 2324  
Parklands  
2121**

Yours faithfully

***Application Specialist: PCNS Department***

SERVING MEDICAL SCHEME MEMBERS



DIRECTORS: Executive K Mothudi (Managing), Non-Executive: A Hamdulay (Chairman), A Fourie-Van Zyl, G Goolab, I Isdale, Y Mabule, O Mahanjana, V Memela, H Nhlapo, C Raftopoulos, S Sanyanga (Zimbabwe), H Stephens, C Schafer (Namibia), T Moumakwa (Botswana), N Nyathi, M Mahlaba, M Bayley, SA Matsoso (Lesotho).