



South African Nursing Council  
Regulating nursing, advocating for the public

## Application for Distinguishing Devices

### 1. How to order your distinguishing devices

At the counter	Email	Important Notes
<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 5 pairs 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> courier) – 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, SA ID/Passport/SA Driver's License document and payment credit/debit card to the cashier at the counter on the ground floor of the Council building, weekdays between 08:00 and 16:00. <b>You cannot pay using cash at the counter. In addition, postal orders, cheques, SASSA Cards, American Express Cards and Diners Club Cards are no longer accepted.</b></li></ol>	<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 5 pairs 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> courier) – this is the amount due.</li><li>6. Date and sign your order form.</li><li>7. Pay for your order at the bank or EFT using your SANC Number followed by the word SALEDDS as beneficiary/recipient reference.</li><li>8. Email the order form together with your proof of payment to; Email: <a href="mailto:devices@sanc.co.za">devices@sanc.co.za</a></li></ol>	<ul style="list-style-type: none"><li>❖ <b>If you send someone else to purchase your devices at the counter, you <u>must</u> also complete the authorisation letter at the back of the order form and give the person a <u>certified copy</u> of your SA ID/SA driver's license document/passport.</b></li><li>❖ <b>Devices will ONLY be issued to persons who have valid ID documents/SA driver's license documents/passports.</b></li><li>❖ <b>Postal orders, cheques, SASSA Cards, American Express Cards and Diners Club Cards are no longer accepted.</b></li></ul> <p><b><u>BANKING DETAILS:</u></b> <b>ACCOUNT NAME:</b> SA NURSING COUNCIL <b>BANK:</b> FIRST NATIONAL BANK <b>ACCOUNT NO:</b> 51421186193 <b>BRANCH:</b> 253145</p> <p><b>REFERENCE:</b> USE YOUR 8-DIGIT SANC NUMBER FOLLOWED BY THE TRANSACTION CODE: SALEDDS. <b>FOR EXAMPLE:</b> 12345678SALEDDS</p>



Cecilia Makiwane Building,  
602 Pretorius Street, Arcadia, Pretoria 0083  
Private Bag X132, Pretoria 0001,  
Republic of South Africa



Tel: 012 420 1000  
Fax: 012 343 5400  
SANC Fraud Hotline: 0800 377 377



website: [www.sanc.co.za](http://www.sanc.co.za)

## 2. Please read the following notes carefully–

- The prices shown are valid as at 1 April 2025, but prices are subject to change.
- The prices shown on this form will be applicable to orders received on or after t1 April 2025.
- An order is considered to have been received when both the payment and the order form have been submitted.
- The distinguishing devices shall be worn as prescribed in the relevant regulations **unless** the person is a member of the South African Military Health 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.
- The form must be completed by pen and signed by hand.
- 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 **FIVE SETS** of each type at one time. You are also limited to **FIVE 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. You are also not allowed to offer someone distinguishing devices as a present/gift.
- Distinguishing devices ordered by email **cannot** be collected at the counter unless you have made prior arrangements to do so with the Distinguishing Devices Section when sending your order. This is also applicable to courier services.
- Distinguishing devices are sent by insured parcel courier at the buyer's risk.
- Allow six weeks for your distinguishing devices to reach you after you have made the order.
- 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-courier
  - Cheques
  - SASSA Card
  - Diners Club Card
  - American Express Card.

## 4. Returns Policy

Distinguishing devices which are found to be defective must be returned to the SANC within three months from the date of purchase. If, after examination by the 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.



Cecilia Makiwane Building,  
602 Pretorius Street, Arcadia, Pretoria 0083  
Private Bag X132, Pretoria 0001,  
Republic of South Africa



Tel: 012 420 1000  
Fax: 012 343 5400  
SANC Fraud Hotline: 0800 377 377



website: [www.sanc.co.za](http://www.sanc.co.za)

## Personal Details

SANC Reference Number																											
Surname																											
Given Names																											
Maiden Name (if applicable)																											
Identity Number																											
Telephone (office hours)																		Cell phone									
<b>Physical address: (if ordering by email your distinguishing devices will be delivered to this physical address)</b>																											
Street/Stand/Lot Number and Street Name										Town/Township/Village Name																	
City										Province																	

## Order Form

VAT: All prices include 15% 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 60,00 per pair	x	= R
<b>Epaulettes (maroon)</b> for General Nurses	R 110,00 per pair	x	= R
<b>Bars (navy blue)</b> for Psychiatric Nurses	R 50,00 per pair	x	= R
<b>Bars (green)</b> for Midwives / Accoucheurs	R 50,00 per pair	x	= R
<b>Bars (white)</b> for Nursing Education	R 50,00 per pair	x	= R
<b>Bars (silver)</b> for Nursing Administration	R 50,00 per pair	x	= R
<b>Bars (yellow)</b> for Public / Community Health Nursing	R 50,00 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 130,00 per pair	x	= R
<b>Oval Badges (maroon)</b> for Enrolled Nurse <b>only</b>	R 80,00 per pair	x	= R
Devices for ENROLLED NURSING AUXILIARIES	Price each	No. required	
<b>Round Brooch</b> for Enrolled Nursing Auxiliaries	R 70,00 each	x	= R
<b>Total Amount (excl. Courier)</b>			<b>R</b>
<b>ADD: Courier Cost</b>			<b>R 90,00</b>
<b>Total Amount (incl. Courier)</b>			<b>R</b>

  

Date of Order	Y	Y	Y	Y	-	M	M	-	D	D
Signature										

As the payment reference, use your SANC reference number followed by payment code SALEDDS (eg.12345678SALEDDS). This will identify your payment as one for Distinguishing Devices.



Cecilia Makiwane Building,  
602 Pretorius Street, Arcadia, Pretoria 0083  
Private Bag X132, Pretoria 0001,  
Republic of South Africa



Tel: 012 420 1000  
Fax: 012 343 5400  
SANC Fraud Hotline: 0800 377 377



website: [www.sanc.co.za](http://www.sanc.co.za)

## Authorisation Letter

(for someone else to collect Distinguishing Devices on your behalf)

**This Authorisation Letter must only be completed and signed by the Applicant**

### Personal Details of Practitioner

<p><i>I hereby declare that:</i></p> <ul style="list-style-type: none"> <li>- I authorise the person designated below, to collect and pay for the Distinguishing Devices ordered by me, on my behalf;</li> <li>- these distinguishing devices are for my own personal use;</li> <li>- I am aware that it is an <b>offence</b> to supply distinguishing devices to any other person in terms of the regulations regarding distinguishing devices.</li> </ul> <p><i>I have enclosed a certified copy of my ID document together with this application.</i></p>												
S. A. Nursing Council Reference Number	1									<p><b>NOTE:</b></p> <p><i>If you have changed any of the details appearing in your identity document or passport and if you have not already done so, you must submit certified proof substantiating the change together with this Letter.</i></p>		
Title <small>(tick ✓ one box)</small>	Dr.	Mr.	Ms.	Prof.								
Surname												
Given Names (in full)												
Maiden Name (if applicable)												
Date of Birth	Y	Y	Y	Y	-	M	M	-	D	D		
South African Identity Number:												
<p><b>OR</b> alternatively, for those applicants who do not have a South African Identity Number:</p>												
Passport Number												
Passport Country of Issue												
Passport Issue Date	Y	Y	Y	Y	-	M	M	-	D	D		
Passport Expiry Date	Y	Y	Y	Y	-	M	M	-	D	D		

### Details of person authorised to collect on Practitioner's behalf

<p><i>I hereby declare that:</i></p> <ul style="list-style-type: none"> <li>- I authorise the person designated below, to collect and pay for the Distinguishing Devices ordered by me, on my behalf;</li> <li>- these distinguishing devices are for my own personal use;</li> <li>- I am aware that it is an <b>offence</b> to supply distinguishing devices to any other person in terms of the regulations regarding distinguishing devices.</li> </ul> <p><i>I have enclosed a certified copy of my ID document together with this application.</i></p>												
Name and Surname (Authorised Person)												
South African Identity Number (Authorised Person)												
Signature of Applicant												
Full Name and Surname of Applicant												
Date	Y	Y	Y	Y	-	M	M	-	D	D		

SANC-13 (2025-04-01)



Cecilia Makiwane Building,  
602 Pretorius Street, Arcadia, Pretoria 0083  
Private Bag X132, Pretoria 0001,  
Republic of South Africa



Tel: 012 420 1000  
Fax: 012 343 5400  
SANC Fraud Hotline: 0800 377 377



website: [www.sanc.co.za](http://www.sanc.co.za)