

Mkhondo Local Municipality
Physical: 33 Mark & De Wet Streets, eMkhondo, 2380
Finance Department
Tel: 087 630 0180
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FORM A: RESIDENTIAL (FULL TITLE AND SECTIONAL TITLE USED FOR RESIDENTIAL PURPOSES)

THE MUNICIPAL MANAGER
MKHONDO CITY LOCAL MUNICIPALITY

Appeal/Request
for information no
* delete where
not applicable

REQUEST FOR FURTHER INFORMATION OR LODGING OF AN OBJECTION AGAINST THE DECISION OF THE MUNICIPAL VALUER REGARDING MATTERS PERTAINING TO A SPECIFIC PROPERTY AS REFLECTED IN OR OMITTED FROM THE GENERAL VALUATION ROLL/ SUPPLEMENTARY VALUATION ROLL FOR THE PERIOD 1 JULY 2018 TO 30 JUNE 2023.

DESCRIPTION OF PROPERTY IN RESPECT OF WHICH THE OBJECTION IS MADE (COMPLETE A SEPARATE FORM FOR EACH ENTRY OBJECTED TO), DELETE SECTIONS WHICH ARE NOT APPLICABLE.

ERF/UNIT NO

TOWNSHIP / SCHEME
NAME

SECTION 1: OBJECTOR INFORMATION 1.1 OBJECTOR IS THE OWNER

| | | | | |
|------------------------------|------|--|-------------------------------|------|
| REGISTERED OWNER OF PROPERTY | | | | |
| IDENTITY NO. | | | COMPANY OR CC REGISTRATION NO | |
| PHYSICAL ADDRESS OF OWNER | | | | CODE |
| POSTAL ADDRESS OF OWNER | | | | CODE |
| TELEPHONE NO | HOME | | WORK | |
| | CELL | | FAX | |
| E-MAIL ADDRESS | | | | |

1.2 OBJECTOR IS NOT THE OWNER OR THE MUNICIPALITY IS THE OBJECTOR

| | | | | |
|--|------|--|-------------------------------|------|
| NAME OF OBJECTOR | | | | |
| IDENTITY NO. | | | COMPANY OR CC REGISTRATION NO | |
| POSTAL ADDRESS OF OBJECTOR | | | | CODE |
| TELEPHONE NO | HOME | | WORK | |
| | CELL | | FAX | |
| E-MAIL ADDRESS | | | | |
| STATUS OF OBJECTOR e.g. Tenant, Pending Purchaser, Municipality, other | | | | |

1.3 AUTHORISED REPRESENTATIVE OF THE OBJECTOR

| | | | | |
|----------------------------------|------|--|-------------------------------|------|
| NAME OF REPRESENTATIVE | | | | |
| IDENTITY NO. | | | COMPANY OR CC REGISTRATION NO | |
| POSTAL ADDRESS OF REPRESENTATIVE | | | | CODE |
| TELEPHONE NO | HOME | | WORK | |
| | CELL | | FAX | |
| E-MAIL ADDRESS | | | | |

IF A REPRESENTATIVE IS APPOINTED, PROOF OF AUTHORISATION MUST BE ATTACHED

SECTION 2: PROPERTY DETAILS (FOR SECTIONAL TITLES SEE SECTION 4)

PHYSICAL ADDRESS

CODE

EXTENT OF PROPERTY

| | |
|--|----------------|
| | M ₂ |
|--|----------------|

MUNICIPAL ACCOUNT NO (If available)

| NAME OF BOND HOLDER | REGISTERED AMOUNT OF BOND |
|---------------------|---------------------------|
| | |

(If applicable)

PROVIDE FULL DETAILS OF ALL SERVITUDES, ROADS PROCLAMATIONS OR OTHER ENDORSEMENTS AGAINST THE PROPERTY (IF APPLICABLE)

| | | | |
|------------------|--|---------------|----------------|
| SERVITUDE NO | | AFFECTED AREA | M ² |
| IN FAVOUR OF | | | |
| FOR WHAT PURPOSE | | | |

| | | | |
|----------------------------|-----|--------|---|
| WAS COMPENSATION PAID | YES | NO | |
| IF YES: DATE OF PAYMENT | | AMOUNT | R |

SECTION 3: DESCRIPTION OF RESIDENTIAL DWELLING (FOR SECTIONAL TITLES SEE SECTION 4) (INDICATE NUMBER OR STATE YES/NO IN APPROPRIATE BOX)

MAIN DWELLING

| | | | | | | | |
|-----------------|--|-----------------------------|--|--------------------|--|----------|--|
| NO.OF BEDROOMS | | NO. OF BATHROOMS | | KITCHEN | | LOUNGE | |
| DINNING ROOM | | LOUNGE WITH DINNING ROOM | | STUDY | | PLAYROOM | |
| TELEVISION ROOM | | LAUNDRY | | SEPARATE TOILET | | | |
| OTHER | | | | OTHER | | | |
| OTHER | | | | OTHER | | | |

OUTBUILDINGS

| | | | | | |
|-------------------|--|--|----------------------------|--|----------------|
| NO.OF GARAGES | | OTHER BUILDINGS (ATTACH ANNEXURE) | SIZE OF MAIN DWELLING | | M ² |
| GRANNY FLAT/ROOMS | | | SIZE OF OUT BUILDING | | M ² |
| OTHER | | | SIZE OF OTHER BUILDINGS | | M ² |
| | | | TOTAL BUILDING SIZE | | M ² |

OTHER

| | | | | | |
|---------------|--|-----------------|------|---------|------|
| SWIMMING POOL | | TENNIS COURT | | | |
| BORE HOLE | | GARDEN | GOOD | AVERAGE | POOR |
| OTHER | | OTHER | | | |

| | | | | |
|---------|-------|------|--------|--------|
| FENCING | FRONT | BACK | SIDE 1 | SIDE 2 |
| TYPE | | | | |
| HEIGHT | | | | |

| | |
|---------------------------------|--|
| DRIVE WAY (E.G. Bricks, pavers) | |
|---------------------------------|--|

IS YOUR PROPERTY SITUATED IN A
BOOMED AREA OR SECURITY

| | |
|-----|----|
| YES | NO |
| | |

OTHER FEATURES

Note – All data fields on the form must be completed in full and omitted data may invalidate your application. For fields that do not apply to your circumstance then to reflect as Not Applicable (N/A). The onus is on the objector to confirm that your objection has been received by the Municipality within the prescribed objection period for the validation, and late objections received after the close of the objection period, will not be accepted.

GENERAL CONDITION OF PROPERTY (TICK APPROPRIATE BOX)

| | | | | | |
|------|--|---------|--|------|--|
| GOOD | | AVERAGE | | POOR | |
|------|--|---------|--|------|--|

SECTION 4: SECTIONAL TITLES UNITS

| | | | | | | | |
|-----------|--|----------------|--|------------------|--|-----------|----------------|
| SCHEME NO | | NAME OF SCHEME | | FLAT NO/ DOOR NO | | UNIT SIZE | M ² |
|-----------|--|----------------|--|------------------|--|-----------|----------------|

| | | | |
|------------------------|--|---------|--|
| NAME OF MANAGING AGENT | | TEL NO. | |
|------------------------|--|---------|--|

INDICATE NUMBER OR STATE YES/NO IN APPROPRIATE BOX

| | | | | | | | |
|-----------------|--|--------------------------|--|-----------------|--|----------|--|
| NO.OF BEDROOMS | | NO. OF BATHROOMS | | KITCHEN | | LOUNGE | |
| DINNING ROOM | | LOUNGE WITH DINNING ROOM | | STUDY | | PLAYROOM | |
| TELEVISION ROOM | | LAUNDRY | | SEPARATE TOILET | | | |
| OTHER | | | | OTHER | | | |
| OTHER | | | | OTHER | | | |

| | |
|--------------|---|
| MONTHLY LEVY | R |
|--------------|---|

COMMON PROPERTY CONSISTS OF:

| | |
|---------------|--|
| SWIMMING POOL | |
| TENNIS COURT | |
| OTHER | |
| OTHER | |
| OTHER | |

DETAILS OF EXCLUSIVE USE AREAS

| | | |
|--------------|--|----------------|
| GARAGE | | M ² |
| CARPORT | | M ² |
| OPEN PARKING | | M ² |
| STORE ROOM | | M ² |
| GARDEN | | M ² |
| OTHER | | M ² |

SECTION 5: MARKET INFORMATION

IF YOUR PROPERTY IS CURRENTLY ON THE MARKET

| | |
|---------------------------|---|
| WHAT IS THE ASKING PRICE? | R |
| OFFER RECEIVED | R |
| NAME OF AGENT | |

IF YOUR PROPERTY HAS BEEN ON THE MARKET THE LAST 3 YEARS

| | |
|---------------------------------|---|
| WHAT WAS THE BEST ASKING PRICE? | R |
| OFFER RECEIVED | R |

SALE TRANSACTIONS (OF OTHER PROPERTIES IN THE VICINITY) USED BY THE OBJECTOR IN DETERMINING THE MARKET VALUE OF PROPERTY OBJECTED TO

| ERF/UNIT NO | SUBURB/SCHEME NAME | DATE OF SALE | SELLING PRICE |
|-------------|--------------------|--------------|---------------|
| | | | |
| | | | |
| | | | |
| | | | |

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SECTION 6: OBJECTION DETAILS

| | PARTICULARS AS REFLECTED IN THE VALUATION ROLL | CHANGES REQUESTED BY OBJECTOR |
|---------------------------------------|--|-------------------------------|
| DESCRIPTION OF THE PROPERTY/ UNIT NO. | | |
| CATEGORY | | |
| PHYSICAL ADDRESS/DOOR NO./FLAT NO. | | |
| EXTENT | | |
| MARKET VALUE | | |
| NAME OF OWNER | | |

ADVERSE FEATURES AND/OR FURTHER REASONS IN SUPPORT OF THIS OBJECTION (ANNEXURES CAN BE PROVIDED)

SECTION 7: DECLARATION

ATTENTION IS HEREBY DRAWN TO SECTION 42(2) OF THE ACT WHICH STATES THAT WHERE ANY DOCUMENT, INFORMATION OR PARTICULARS WERE NOT PROVIDED WHEN REQUIRED IN TERMS OF SUBSECTION 42(1) OF THE ACT AND THE OWNER CONCERNED RELIES ON SUCH DOCUMENT, INFORMATION O R PARTICULARS IN AN APPEAL TO AN APPEAL BOAR D, THE APPEAL BOARD MAY MAKE AN ORDER AS TO COSTS IN TERMS OF SECTION 70 OF THE ACT IF THE APPEAL BOARD IS OF THE VIEW THAT THE FAILURE TO HAVE PROVIDED ANY SUCH DOCUMENT, INFORMATION OR PARTICULARS HAS PLACED AN UNNECESSARY BURDEN ON THE FUNCTIONS OF THE MUNICIPAL VALUER OR THE APPEAL BOARD.

I / WE.....HEREBY DECLARE THAT THE INFORMATION AND PARTICULARS SUPPLIED ARE TRUE AND CORRECT.

| | | |
|------|-------|-----|
| YEAR | MONTH | DAY |
| | | |

SIGNATURE

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