APPEAL - RESIDENTIA



RESIDENTIAL

(FULL TITLE AND SECTIONAL TITLE USED FOR RESIDENTIAL PURPOSES)

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FORM A

The Chairperson: VALUATION APPEAL BOARD

Kwa Sani Municipality

LODGING OF AN APPEAL AGAINST THE DECISION OF THE MUNICIPAL VALUER REGARDING MATTERS PERTAINING TO SPECIFIC PROPERTY AS REFLECTED IN OR OMITTED FROM THE VALUATION ROLL/SUPPLEMENTARY VALUATION ROLL FOR THE PERIOD 1 JULY 2012 TO 30 JUNE 2016

(COMPLETE A SEPARATE FORM FOR EACH ENTRY OBJECTED TO)

TION 1: APPELANT INFORMATION		
APPELANT IS THE OWNER		
Registered Owner of Property:		
Identity No:	Company/C.C. Registration	on No:
Physical Address of Owner:		Code:
Postal Address of Owner:		Code:
Telephone No: Home ()	Work: ()
	Few No. /)
Cellular No:	Fax No: (,
Cellular No: E-mail Address: APPELANT IS NOT THE OWNER OR MUNICI		,
E-mail Address: APPELANT IS NOT THE OWNER OR MUNICI	IPALITY IS THE APPELLANT	
E-mail Address: APPELANT IS NOT THE OWNER OR MUNICI Name of Appellant:	IPALITY IS THE APPELLANT	
E-mail Address: APPELANT IS NOT THE OWNER OR MUNICI Name of Appellant: Identity No:	IPALITY IS THE APPELLANT Company/C.C. Registration	on No:
E-mail Address: APPELANT IS NOT THE OWNER OR MUNICI Name of Appellant: Identity No: Physical Address of Appellant:	IPALITY IS THE APPELLANT Company/C.C. Registration	on No:
E-mail Address: APPELANT IS NOT THE OWNER OR MUNICI Name of Appellant: Identity No: Physical Address of Appellant: Postal Address of Appellant:	Company/C.C. Registration	on No: Code:
E-mail Address: APPELANT IS NOT THE OWNER OR MUNICI Name of Appellant: Identity No: Physical Address of Appellant: Postal Address of Appellant:	PALITY IS THE APPELLANT Company/C.C. Registration Work: (on No:
E-mail Address: APPELANT IS NOT THE OWNER OR MUNICION Name of Appellant: Identity No: Physical Address of Appellant: Postal Address of Appellant: Telephone No: Home ()	Company/C.C. Registration Work: (Fax No: (on No: Code:

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12	VIITHUBISED	REPRESENTATIVE OF TH	E ADDELANT
1.J	AUIUOKISED	KELKEZEMIATIAE OL 1U1	CAPPELANI

Name of Representative:	
Postal Address:	Code:
Telephone No: Home ()	Work: ()
Cellular No:	Fax No: ()
E-mail Address:	
* If a Representative is appointed, p	roof of authorisation must be attached
SECTION 2: PROPERTY DETAILS (For Sectional Titles se	e Section 4)
Physical Address:	Code:
Extent of Property:	m²
Municipal Account No:	(if available)
Cellular No:	Fax No: ()
E-mail Address:	
Name of Bond Holder:	(if applicable)
Registered amount of Bond:	(if applicable)
Provide Full Details of All Servitudes, Road — Proclamations or Other Endorsements —	
Servitude No:	Affected Area: m²
In Favour of:	
For what Purpose:	
Was Compensation Paid? © Yes © No	
(If Yes) Date of Payment:	Amount: R

Complete: Erf/Unit No: Area/Scheme Name: Page 2 of 6

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SECTION 3: DESCRIPTION OF RESIDENTIAL DWELLING (For Sectional Titles see Section 4) Indicate Quantity and Complete Description of "Other" if applicable

MA	IN	DW	/EL	LIN	IG:
----	----	----	-----	-----	-----

MAIN DWELLING:							
Bedroom	s	Bathrooms		Kito	chen	_	Lounge
Dinning Roon	າ	Lounge with Dinning Room		S	itudy	_ PI	layroom
Television Roon	າ	Laundry		Separate 1	roilet	_	
Othe	r			C	Other		
OUTBUILDINGS:							
Gard	ages	_			Size of 1	Main Dwe	elling m²
Granny Flat/ Ro	oms	_			Size of	f Outbuild	lings m²
C	other		Describe Oth		Size of C)ther Build	lings m²
OTHER BUILDINGS	S: (Attach A	nnexure)					
Swimming	Pool	_ Tennis (Court				
Bore	hole	_ Ga	ırden		ood	Avera	ige 🖰 Poor
C	other						
FENCING:							
Г	FRON'		BACK	,	SIDE 1		SIDE 2
Type	TRON		<u> </u>		OIDE 1		SIDE Z
Height							
DRIVE WAY:							
						C	Yes ONo
Description:	e.g. Bricks, Pave	ers, Tar, etc.)		r property sined or Gated		area	
Other Features:	_						
				0 -			
General Condit	ion of Proper	ly: Good	C Averd	ige 🖱 Poor			
Complete: Frf	/Unit No:	A	rea/Sche	me Name:			Page 3 of 6

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SECTION 4: SECTIONAL TITLE UNITS

SCHEME NO:	NAME OF SCHEME:				T NO:/)R NO:	UNIT SIZE	m²
NAME OF MANAGING	AGENT:				TEL NO: ()	
Indicate Quantity a	nd Complete De	scription of "(Other" if ap	plicable			
Bedrooms _	Bath			Kitchen		Lounge _	
Dinning Room _	Loung Dinning	ge with g Room		Study		Playroom	
Television Room _	L	aundry	Separc	ate Toilet			
Other _				Other			
Other _				Other			
Monthly Levy: R				DETAILS (OF EXCLUSIV	VE USE AREAS:	
COMMON PROPERTY	Y CONSISTS OF:			G	arage		m²
Swimming Pool _				С	arport		m²
				Open P	arking		_ m²
				Store	Room		_ m²
				G	arden		_ m²
					Other		_ m²
SECTION 5: MARKET	ı	Describe Other					
SECTION 5. MARKET	INFORMATION		If your	r property	has been o	an .	
If your Property is c market, what is the		R	the mo	arket in th	e last 3 yea Asking Price	rs,	
Ot Name of Agent: _	ffers Received:				ers Receive	d: R	
Sale Transactions (o MarketValue of Prop) used by the	e Appelai	nt in determ	nining the	
ERF/UNIT NO:		SCHEME NAI			OF SALE:	SELLING PR	ICE:
Complete: Erf/Uni	it No:	Area/Sa	cheme Name	e:		Pag	ge 4 of 6

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SECTION 6: APPEAL DETAILS

	PARTICULARS AS REFLECTED IN THE VALUATION ROLL	Changes requested by appelant
Description of Property/Unit No:		
Category:		
Physical Address/Door No/Flat No:		
Extent:		
Market Value:		
Name of Owner:		
FORM A: RESIDENTIAL (FULL TITLE A SECTION 7: DECLARATION Attention is hereby drawn to section information or particulars were not pr	n 42(2) of the Act which states	s that where any document
and the owner concerned relies on s Appeal Board, the Appeal Board ma the Appeal Board is of the view that particulars has placed an unnecess Appeal Board.	such document, information or p y make an order as to costs in te failure to have provided any su	particulars in an appeal to a erms of Section 70 of the Act ach document, information c
I / We		hereby declare that the
•	NAME)	
information and particulars supplied o	are true and correct.	
Signed at		on the
Date: 20 / / / / DD		SIGNATURE

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OFFICIAL USE

SECTION 8: DECISION OF THE VALUATION APPEAL BOARD

Description of Property/Unit No.:				
Category:				
Physical Address/Door No./Flat No.:				
Extent:				
Market Value:				
Name of Owner:				
Reasons of the Chairperson of the Valuatio	on Appeal Board:			
			,	,
Name of Chairperson of	Signature	YYYY	/	DD
Valuation Appeal Board	Signatore	1111	IVIIVI	טט
SECTION 8: DECISION OF THE VALUATION A	APPEAL BOARD			
	SIGNATURE		DATE	
Valuation Roll Adjusted				
Appellant Notified				
Owner Notified				
Section 52(1)(a) Where applicable				

Complete: Erf/Unit No: Area/Scheme Name: Page 6 of 6