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AGRICULTURAL HOLDINGS AND FARMS

APPEAL NO:	

FORM C

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

OLDING/PORTION NO: AGRICULTURAL HOLDING/FARM:				
COTION 1. ADDELLANT INFORMATION	FARM NO:		REG DIV:	
ECTION 1: APPELLANT INFORMATION				
1 APPELLANT IS THE OWNER				
Registered Owner of Property:				
Identity No:	Comp	any/C.C. Registr	ation No:	
Physical Address of Owner:			Code:	
Postal Address of Owner:			Code:	
Telephone No: Home ()		Work: ()	
Cellular No:		Fax No: ()	
E-mail Address:				
2 APPELLANT IS NOT THE OWNER OR I		PPELLANT		
2 APPELLANT IS NOT THE OWNER OR Appellant:	MUNICIPALITY IS THE A			
2 APPELLANT IS NOT THE OWNER OR Appellant: Identity No:	MUNICIPALITY IS THE A	any/C.C. Registr		
2 APPELLANT IS NOT THE OWNER OR A Name of Appellant: Identity No: Physical Address of Appellant:	MUNICIPALITY IS THE A	any/C.C. Registr	ation No:	
2 APPELLANT IS NOT THE OWNER OR A Name of Appellant: Identity No: Physical Address of Appellant: Postal Address of Appellant:	MUNICIPALITY IS THE A	any/C.C. Registr	ation No: Code: Code:	
Name of Appellant: Identity No: Physical Address of Appellant: Postal Address of Appellant: Telephone No: Home ()	MUNICIPALITY IS THE A	any/C.C. Registr Work: (ation No:	
2 APPELLANT IS NOT THE OWNER OR A Name of Appellant: Identity No: Physical Address of Appellant: Postal Address of Appellant: Telephone No: Home ()	MUNICIPALITY IS THE A	any/C.C. Registr	ation No: Code: Code:	
2 APPELLANT IS NOT THE OWNER OR A Name of Appellant: Identity No: Physical Address of Appellant: Postal Address of Appellant: Telephone No: Home ()	MUNICIPALITY IS THE A	any/C.C. Registr Work: (ation No: Code: Code:	

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1.3 AUTHORISED REPRESENTATIVE OF THE APPELLANT

Name of Representative:	
Postal Address:	Code:
Telephone No: Home ()	Work: ()
Cellular No:	Fax No: ()
E-mail Address:	
* If a Representative is appointed, pro	of of authorisation must be attached
SECTION 2: PROPERTY DETAILS (For Sectional Titles see	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? C Yes C No	
(If Yes) Date of Payment:	Amount: R

Complete: Portion/Holding No: Farm/Holding:

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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

3.1	MAIN	DWELLING	ON F	ARM/	HOLDING	•
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Bedrooms			Kitchen	L	ounge
Dinning Room	Lounge with Dinning Room		Study	Pla	yroom
Television Room	Laundry		Separate Toilet		
Other					
			Size of Main Dwe	elling:	m²
3.2 OTHER BUILDIN	IGS: (Attach Annexure)				
	DescriptionSi	ize m²	Condition	• Is Buildii	ng Functional
3.3 Is Any Portion	of the Property Used for Ar	ny Other I	Purpose Other than A	gricultural?	Yes O No
If Yes – Describ	e Use/s:				
			If necessary provid	le Annexure B	
3.4 LAND USE ANA	ALYSIS:				
Non Agricultural	(Refer to 3.3):	ha	Co	ndition of Fenc	es:
	Grazing:	ha	Good	Average	O Poor
Und	er Irrigation:	ha	Area Game-Fe	enced:	ha
	Dry Land:	ha			ha
Perma	nent Crops:	ha	No of Bore	eholes:	
Other:		ha	Output &	?/hour:	
Other:		ha	No of	Dams:	
Olle a m		la a		pacity:	
					
	TOTAL	ha	Is Property Expo	osed to 1 River?	Yes © No
Complete: Portion	 n/Holding No:	Farm/Hol	ding:		Page 3 of 6

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3.5 LAND USE ANALYSIS: Is your Property affected by a Land Claim? O Yes O No If Yes: - Date of Claim: _____ Gazette No. ____ O Yes O No Do you have Water Rights? If Yes: Details -Have you applied for a Rezoning or Consent Use? O Yes No (e.g. Guest House, Business) If Yes: Details -Has your Agricultural Holding been Excised? O Yes No If Yes: New Farm Description -If Yes: Full Details -Tenant and Rent Information – ANNEXURE C: Name of • Size Rental Escalation Other Term of Lease • Start Date Tenant (excl. VAT) of Rental Contributions **SECTION 4: MARKET INFORMATION** If your property has been on If your Property is currently on the the market in the last 3 years, market, what is the Asking Price? R_____ what was the Asking Price? R_____ Offers Received: R _____ Offers Received: R Name of Agent: ______ Tel: _____ Sale Transactions (of Other Property in the vicinity) used by the Appellant in determining the Market Value of Property Objected to: HOLDING NO: AGRICULTURAL HOLDING/FARM: DATE OF SALE: SELLING PRICE:

Complete: Portion/Holding No: Farm/Holding: Page 4 of 6

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SECTION 5: APPEAL DETAILS

	PARTICULARS AS REFLECTED IN THE VALUATION ROLL	Changes requested By appellant
Description of Property:		
Category:		
Physical Address:		
Extent:		
Market Value:		
Name of Owner:		
FORM A: RESIDENTIAL (FULL TITLE A SECTION 7: DECLARATION	ND SECTIONAL TITLE USED FOI	RESIDENTIAL PURPOSES)
Attention is hereby drawn to section information or particulars were not produced the owner concerned relies on suppeal Board, the Appeal Board may the Appeal Board is of the view that particulars has placed an unnecessing Appeal Board.	ovided when required in terms of uch document, information or p y make an order as to costs in to failure to have provided any su	of Subsection 42 (1) of the Act particulars in an appeal to an erms of Section 70 of the Act it uch document, information or
I/We		hereby declare that the
(FULL	NAME)	
information and particulars supplied of	are true and correct.	
Signed at		on the
Date: 20 / / / / / DD	<u> </u>	SIGNATURE
TTTT 1911VI DU		CONCIONE

Complete: Portion/Holding No: Farm/Holding:

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OFFICIAL USE

SECTION 8: DECISION OF THE VALUATION APPEAL BOARD

Description of Property:				
Category:				
Physical Address:				
Extent:				
Market Value:				
Name of Owner:				
asons of the Chairperson of the Valuatio	on Appeal Board:			
			/	/
Name of Chairperson of	Signature		/	/
Name of Chairperson of Valuation Appeal Board	Signature	YYYY	/	/
Valuation Appeal Board		YYYY	/	/
		YYYY	/	. /
Valuation Appeal Board	APPEAL BOARD	YYYY		. / DD
Valuation Appeal Board		YYYY	/MM DATE	. / DD
Valuation Appeal Board	APPEAL BOARD	YYYY		. /
Valuation Appeal Board CTION 8: DECISION OF THE VALUATION A —— Valuation Roll Adjusted	APPEAL BOARD			. /
Valuation Appeal Board CTION 8: DECISION OF THE VALUATION A Valuation Roll Adjusted Appellant Notified	APPEAL BOARD SIGNATURE			. /
Valuation Appeal Board CTION 8: DECISION OF THE VALUATION A	APPEAL BOARD SIGNATURE			/

Complete: Portion/Holding No: Farm/Holding: Page 6 of 6