

FORM B: PROPERTIES OTHER THAN RESIDENTIAL OR AGRICULTURAL (e.g businesses, factories, offices, schools)

APPEAL NO. [ ]

THE CHAIRPERSON: VALUATION APPEAL BOARD

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 ..... TO 30 JUNE .....

\* Delete whichever is not applicable

DESCRIPTION OF PROPERTY IN RESPECT OF WHICH THE APPEAL IS MADE

(COMPLETE A SEPARATE FORM FOR EACH ENTRY OBJECTED TO)

ERF/PORTION/UNIT NO. [ ] SUBURB/FARM/SCHEME [ ] FARM NO. [ ] REG. DIV [ ]

SECTION 1: APPELLANT INFORMATION

1.1 APPELLANT IS THE OWNER

REGISTERED OWNER OF PROPERTY [ ] IDENTITY NO. [ ] COMPANY OR C.C REGISTRATION NO [ ] PHYSICAL ADDRESS OF OWNER [ ] CODE [ ] POSTAL ADDRESS OF OWNER [ ] CODE [ ] TELEPHONE NO: HOME [ ] WORK [ ] CELL [ ] FAX NO [ ] E-MAIL ADDRESS [ ]

1.2 APPELLANT IS NOT THE OWNER OR MUNICIPALITY IS THE APPELLANT

NAME OF APPELLANT [ ] IDENTITY NO. [ ] COMPANY OR C.C REGISTRATION NO [ ] POSTAL ADDRESS OF APPELLANT [ ] CODE [ ] TELEPHONE NO: HOME [ ] WORK [ ] CELL [ ] FAX NO [ ] E-MAIL ADDRESS [ ] STATUS OF APPELLANT (e.g. Tenant, Pending Purchaser, Municipality etc) [ ]

1.3 AUTHORISED REPRESENTATIVE OF THE APPELLANT

NAME OF REPRESENTATIVE: [ ] POSTAL ADDRESS [ ] CODE [ ] TELEPHONE NO: HOME [ ] WORK [ ] CELL [ ] FAX NO [ ] E-MAIL ADDRESS [ ]

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

Complete: Erf/Unit No..... Area/Scheme Name.....

PLEASE COMPLETE THE BOTTOM OF EACH PAGE

**FORM B: PROPERTIES OTHER THAN RESIDENTIAL OR AGRICULTURAL (e.g businesses, factories, offices, schools)**  
**SECTION 2: PROPERTY DETAILS** (FOR SECTIONAL TITLES SEE SECTION 4)

PHYSICAL ADDRESS  CODE

EXTENT OF PROPERTY  m<sup>2</sup>

MUNICIPAL ACCOUNT NO.  (If available)

NAME OF BOND HOLDER	REGISTERED AMOUNT OF BOND	(If applicable)
<input type="text"/>	<input type="text"/>	

PROVIDE FULL DETAILS OF ALL SERVITUDES, ROAD PROCLAMATIONS OR OTHER ENDORSEMENTS AGAINST THE PROPERTY (If applicable)

SERVITUDE NO.	<input type="text"/>	AFFECTED AREA	<input type="text"/> m <sup>2</sup>
IN FAVOUR OF	<input type="text"/>		
FOR WHAT PURPOSE	<input type="text"/>		

WAS COMPENSATION PAID IF YES:-  YES  NO

DATE OF PAYMENT  AMOUNT  R

**SECTION 3: DESCRIPTION OF BUILDINGS ( FOR SECTIONAL TITLE COMPLETE SECTION 4)**  
 (INFORMATION UNDER 3.1 TO 3.4 TO BE SUPPLIED BY MEANS OF ANNEXURES AS FOLLOWS)

**3.1 TENANT AND RENT INFORMATION - ANNEXURE A**

NAME OF TENANT	SIZE	RENTAL (EXCL VAT)	ESCALATION OF RENTAL	OTHER CONTRIBUTIONS	TERM OF LEASE	START DATE
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**3.2 SCHEDULE OF EXPENSES INCLUDING: MUNICIPAL, ADMINISTRATION, INSURANCES, SECURITY etc. - ANNEXURE B**

**3.3 STATEMENT OF INCOME & EXPENDITURE FOR PREVIOUS FINANCIAL YEAR - ANNEXURE C**

**3.4 BUILDING SIZES - ANNEXURE D**

BUILDING NO.	SIZE m <sup>2</sup>	DESCRIPTION e.g used as a shop, office etc.	CONDITION
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**3.5 IF THE PROPERTY HAS NOT BEEN DEVELOPED TO ITS HIGHEST AND BEST USE, INDICATE THE EXTENT OF LAND THAT IS AVAILABLE FOR FURTHER DEVELOPMENT**

m<sup>2</sup>

OTHER FEATURES OF BUILDINGS: (PROVIDE ANNEXURE E IF NECESSARY)

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Complete Erf/Unit No. .... Area/Scheme Name. ....  
 PLEASE COMPLETE THE BOTTOM OF EACH PAGE

**FORM B: PROPERTIES OTHER THAN RESIDENTIAL OR AGRICULTURAL (e.g businesses, factories, offices, schools)  
SECTION 4: SECTIONAL TITLE UNITS**

SCHEME NO.  NAME OF SCHEME  FLAT NO./ DOOR NO.  UNIT SIZE  m<sup>2</sup>

NAME OF MANAGING AGENT  TEL. NO.

SHOPS	<input type="text"/> m <sup>2</sup>	OTHER	<input type="text"/> m <sup>2</sup>
OFFICES	<input type="text"/> m <sup>2</sup>	OTHER	<input type="text"/> m <sup>2</sup>
FACTORIES	<input type="text"/> m <sup>2</sup>	OTHER	<input type="text"/> m <sup>2</sup>

**TENANT AND RENT INFORMATION - ANNEXURE A**

NAME OF TENANT	SIZE	RENTAL (EXCL VAT)	ESCALATION	OTHER CONTRIBUTIONS	TERM OF LEASE	START DATE
MONTHLY LEVY	R	<input type="text"/>				

COMMON PROPERTY CONSISTS OF:

SWIMMING POOL	<input type="text"/>
TENNIS COURT	<input type="text"/>
OTHER	<input type="text"/>
OTHER	<input type="text"/>
OTHER	<input type="text"/>

DETAILS OF EXCLUSIVE USE AREAS

GARAGE	<input type="text"/> m <sup>2</sup>
CARPORT	<input type="text"/> m <sup>2</sup>
OPEN PARKING	<input type="text"/> m <sup>2</sup>
STORE ROOM	<input type="text"/> m <sup>2</sup>
GARDEN	<input type="text"/> m <sup>2</sup>
OTHER	<input type="text"/> m <sup>2</sup>

**SECTION 5: MARKET INFORMATION**

IF YOUR PROPERTY IS CURRENTLY ON THE MARKET WHAT IS THE ASKING PRICE? R

IF YOUR PROPERTY HAS BEEN ON THE MARKET IN THE LAST 3 YEARS WHAT WAS THE ASKING PRICE? R

OFFER RECEIVED R

OFFER RECEIVED R

NAME OF AGENT:  TEL. NO.

**SALES TRANSACTIONS USED BY THE APPELLANT IN DETERMINING THE MARKET VALUE OF THE PROPERTY APPEALED TO (IF INSUFFICIENT SPACE PROVIDE ANNEXURE F)**

ERP/PTN/UNIT NO	SUBURB/FARM/SCHEME NAME	DATE OF SALE	SELLING PRICE

**SECTION 6: APPEAL DETAILS**

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

ADVERSE FEATURES AND/OR FURTHER REASONS IN SUPPORT OF THIS APPEAL (ANNEXURE G CAN BE PROVIDED)

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**FORM B: PROPERTIES OTHER THAN RESIDENTIAL OR AGRICULTURAL (e.g businesses, factories, offices, schools)**  
**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 OR PARTICULARS IN AN APPEAL TO AN APPEAL BOARD, THE APPEAL BOARD MAY MAKE AN ORDER AS TO COSTS IN TERMS OF SECTION 76 OF THE ACT IF THE APPEAL BOARD IS OF THE VIEW THAT THE FAILURE TO SO HAVE PROVIDED ANY SUCH DOCUMENT, INFORMATION OR PARTICULARS HAS PLACED AN UNNECESSARY BURDEN ON THE FUNCTION OF THE MUNICIPAL VALUER OR THE APPEAL BOARD.

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

DATE: 

YEAR	MONTH	DAY

SIGNATURE \_\_\_\_\_

**OFFICIAL USE**

**SECTION 8: DECISION OF THE VALUATION APPEAL BOARD**

DESCRIPTION OF THE PROPERTY/UNIT NO	
CATEGORY	
PHYSICAL ADDRESS/DOOR NO./FLAT NO.	
EXTENT	
MARKET VALUE	
NAME OF OWNER	

REASONS OF THE VALUATION APPEAL BOARD

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 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

NAME OF THE CHAIRPERSON OF VALUATION APPEAL BOARD

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SIGNATURE

DATE: 

YEAR	MONTH	DAY

**SECTION 9: NOTIFICATION OF OUTCOME**

VALUATION ROLL ADJUSTED	SIGNATURE	DATE
APPELLANT NOTIFIED		
OWNER NOTIFIED		

Complete: Erf/Unit No. .... Area/Scheme Name.....  
 PLEASE COMPLETE THE BOTTOM OF EACH PAGE

FORM A: RESIDENTIAL (FULL TITLE AND SECTIONAL TITLE USED FOR RESIDENTIAL PURPOSES)

APPEAL NO. [ ]

THE CHAIRPERSON: VALUATION APPEAL BOARD  
..... 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 ..... TO 30 JUNE .....

\* Delete whichever is not applicable

DESCRIPTION OF PROPERTY IN RESPECT OF WHICH THE APPEAL IS MADE

(COMPLETE A SEPARATE FORM FOR EACH ENTRY APPEALED TO)

ERF/UNIT NO. [ ] SUBURB/ SCHEME NAME [ ]

SECTION 1: APPELLANT INFORMATION

1.1 APPELLANT IS THE OWNER

REGISTERED OWNER OF PROPERTY [ ]

IDENTITY NO. [ ] COMPANY OR C.C. REGISTRATION NO. [ ]

PHYSICAL ADDRESS OF OWNER [ ] CODE [ ]

POSTAL ADDRESS OF OWNER [ ] CODE [ ]

TELEPHONE NO.: HOME ( [ ] ) WORK ( [ ] )

CELL [ ] FAX NO. ( [ ] )

E-MAIL ADDRESS [ ]

1.2 APPELLANT IS NOT THE OWNER OR MUNICIPALITY IS THE APPELLANT

NAME OF APPELLANT: [ ]

IDENTITY NO. [ ] COMPANY OR C.C. REGISTRATION NO. [ ]

POSTAL ADDRESS OF APPELLANT [ ] CODE [ ]

TELEPHONE NO.: HOME ( [ ] ) WORK ( [ ] )

CELL [ ] FAX NO. ( [ ] )

E-MAIL ADDRESS [ ]

STATUS OF APPELLANT (e.g. Tenant, Pending Purchaser, Municipality etc)  
[ ]

1.3 AUTHORISED REPRESENTATIVE OF THE APPELLANT

NAME OF REPRESENTATIVE: [ ]

POSTAL ADDRESS [ ] CODE [ ]

TELEPHONE NO.: HOME ( [ ] ) WORK ( [ ] )

CELL [ ] FAX NO. ( [ ] )

E-MAIL ADDRESS [ ]

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

Complete: Erf/Unit No..... Area/Scheme Name.....

PLEASE COMPLETE THE BOTOM OF EACH PAGE

**FORM A: RESIDENTIAL (FULL TITLE AND SECTIONAL TITLE USED FOR RESIDENTIAL PURPOSES)**  
**SECTION 2: PROPERTY DETAILS (FOR SECTIONAL TITLES SEE SECTION 4)**

PHYSICAL ADDRESS  CODE

EXTENT OF PROPERTY  m<sup>2</sup>

MUNICIPAL ACCOUNT NO  (if available)

NAME OF BOND HOLDER	REGISTERED AMOUNT OF BOND
<input type="text"/>	<input type="text"/>

(if applicable)

PROVIDE FULL DETAILS OF ALL SERVITUDES, ROAD PROCLAMATIONS OR OTHER ENDORSEMENTS AGAINST THE PROPERTY (if applicable)

SERVITUDE NO.	<input type="text"/>	AFFECTED AREA	<input type="text"/> m <sup>2</sup>
IN FAVOUR OF	<input type="text"/>		
FOR WHAT PURPOSE	<input type="text"/>		

WAS COMPENSATION PAID IF YES:-

YES	NO
<input type="checkbox"/>	<input type="checkbox"/>

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	<input type="text"/>	NO. OF BATHROOMS	<input type="text"/>	KITCHEN	<input type="text"/>	LOUNGE	<input type="text"/>
DINING ROOM	<input type="text"/>	LOUNGE WITH DINING ROOM	<input type="text"/>	STUDY	<input type="text"/>	PLAYROOM	<input type="text"/>
TELEVISION ROOM	<input type="text"/>	LAUNDRY	<input type="text"/>	SEPARATE TOILET	<input type="text"/>		
OTHER	<input type="text"/>			OTHER	<input type="text"/>		
OTHER	<input type="text"/>			OTHER	<input type="text"/>		

**OUTBUILDINGS**

NO. OF GARAGES	<input type="text"/>	SIZE OF MAIN DWELLING	<input type="text"/> m <sup>2</sup>
GRANNY FLAT/ROOMS	<input type="text"/>	SIZE OF OUTBUILDING	<input type="text"/> m <sup>2</sup>
OTHER	<input type="text"/>	SIZE OF OTHER BUILDINGS	<input type="text"/> m <sup>2</sup>
		TOTAL BUILDING SIZE	<input type="text"/> m <sup>2</sup>

OTHER BUILDINGS (ATTACH ANNEXURE)

OTHER:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	SWIMMING POOL		TENNIS COURT		
	BORE HOLE		GARDEN	GOOD	AVERAGE POOR
	OTHER		OTHER		

FENCING:

	FRONT	BACK	SIDE 1	SIDE 2
TYPE	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
HEIGHT	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

DRIVE WAY (e.g. Bricks, pavers)

IS YOUR PROPERTY SITUATED IN A BOOMED AREA OR SECURITY  Tick

YES	NO
<input type="checkbox"/>	<input type="checkbox"/>

OTHER FEATURES

GENERAL CONDITION OF PROPERTY:  (Tick  1)

GOOD	<input type="checkbox"/>	AVERAGE	<input type="checkbox"/>	POOR	<input type="checkbox"/>
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Complete. Erf/Unit No ..... Area/Scheme Name.....  
**PLEASE COMPLETE THE BOTOM OF EACH PAGE**

**FORM A: RESIDENTIAL (FULL TITLE AND SECTIONAL TITLE USED FOR RESIDENTIAL PURPOSES)**  
**SECTION 4: SECTIONAL TITLE UNITS**

SCHEME NO.  NAME OF SCHEME  FLAT NO./ DOOR NO.  UNIT SIZE  m<sup>2</sup>

NAME OF MANAGING AGENT  TEL. NO.

INDICATE NUMBER OR STATE YES/NO IN APPROPRIATE BOX

NO. OF BEDROOMS		NO. OF BATHROOMS		KITCHEN		LOUNGE	
DINING ROOM		LOUNGE WITH DINING 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 <sup>2</sup>
CARPORT		m <sup>2</sup>
OPEN PARKING		m <sup>2</sup>
STORE ROOM		m <sup>2</sup>
GARDEN		m <sup>2</sup>
OTHER		m <sup>2</sup>

**SECTION 5: MARKET INFORMATION**

IF YOUR PROPERTY IS CURRENTLY ON THE MARKET WHAT IS THE ASKING PRICE?

R

IF YOUR PROPERTY HAS BEEN ON THE MARKET IN THE LAST 3 YEARS WHAT WAS THE ASKING PRICE?

R

OFFER RECEIVED R

OFFER RECEIVED R

NAME OF AGENT:  TEL. NO.

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

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

**SECTION 6: APPEAL DETAILS**

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

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

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\_\_\_\_\_

\_\_\_\_\_

Complete: Erf/Unit No. .... Area/Scheme Name .....

PLEASE COMPLETE THE BOTTOM OF EACH PAGE

**FORM A: RESIDENTIAL (FULL TITLE AND SECTIONAL TITLE USED FOR RESIDENTIAL PURPOSES)**  
**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 OR PARTICULARS IN AN APPEAL TO AN APPEAL BOARD, 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 SO 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.

DATE: 

YEAR	MONTH	DAY

SIGNATURE \_\_\_\_\_

**OFFICIAL USE**

**SECTION 8: DECISION OF THE VALUATION APPEAL BOARD**

DESCRIPTION OF THE PROPERTY/UNIT NO.	
CATEGORY	
PHYSICAL ADDRESS/DOOR NO./FLAT NO.	
EXTENT	
MARKET VALUE	
NAME OF OWNER	

REASONS OF THE VALUATION APPEAL BOARD

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NAME OF THE CHAIRPERSON OF THE VALUATION APPEAL BOARD

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SIGNATURE:

DATE: 

YEAR	MONTH	DAY

**SECTION 9: NOTIFICATION OF OUTCOME**

VALUATION ROLL ADJUSTED  
 APPELLANT NOTIFIED  
 OWNER NOTIFIED

SIGNATURE	DATE

Complete: Ed/Unit No. .... Area/Scheme Name.....

PLEASE COMPLETE THE BOTTOM OF EACH PAGE



FORM C: AGRICULTURAL HOLDINGS OR FARMS

APPEAL NO.

THE CHAIRPERSON: VALUATION APPEAL BOARD  
 ..... 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 ..... TO 30 JUNE .....  
 \*Delete whichever is not applicable

DESCRIPTION OF PROPERTY IN RESPECT OF WHICH THE APPEAL IS MADE

(COMPLETE A SEPARATE FORM FOR EACH ENTRY APPEALED TO)

HOLDING/PORTION NO.	<input type="text"/>	AGRICULTURAL HOLDING/FARM	<input type="text"/>
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SECTION 1: APPELLANT INFORMATION	FARM NO.	<input type="text"/>	REG. DIV.	<input type="text"/>
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1.1 APPELLANT IS THE OWNER

REGISTERED OWNER OF PROPERTY

IDENTITY NO.	<input type="text"/>	COMPANY OR C.C. REGISTRATION NO.	<input type="text"/>
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PHYSICAL ADDRESS OF OWNER	<input type="text"/>	CODE	<input type="text"/>
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POSTAL ADDRESS OF OWNER	<input type="text"/>	CODE	<input type="text"/>
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TELEPHONE NO.:	HOME ( <input type="text"/> )	WORK ( <input type="text"/> )
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CELL	<input type="text"/>	FAX NO. ( <input type="text"/> )
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E-MAIL ADDRESS

1.2 APPELLANT IS NOT THE OWNER OR MUNICIPALITY IS THE APPELLANT

NAME OF APPELLANT:

IDENTITY NO.	<input type="text"/>	COMPANY OR C.C. REGISTRATION NO.	<input type="text"/>
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POSTAL ADDRESS OF APPELLANT	<input type="text"/>	CODE	<input type="text"/>
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TELEPHONE NO.:	HOME ( <input type="text"/> )	WORK ( <input type="text"/> )
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CELL	<input type="text"/>	FAX NO. ( <input type="text"/> )
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E-MAIL ADDRESS

STATUS OF APPELLANT (e.g. Tenant, Pending Purchaser, Municipality etc)

1.3 AUTHORISED REPRESENTATIVE OF THE APPELLANT

NAME OF REPRESENTATIVE

POSTAL ADDRESS	<input type="text"/>	CODE	<input type="text"/>
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TELEPHONE NO.:	HOME ( <input type="text"/> )	WORK ( <input type="text"/> )
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CELL	<input type="text"/>	FAX NO. ( <input type="text"/> )
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E-MAIL ADDRESS

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

Complete: Portion/Holding No. .... Farm/Holding .....

PLEASE COMPLETE THE BOTTOM OF EACH PAGE

**FORM C: AGRICULTURAL HOLDINGS OR FARMS**  
**SECTION 2: PROPERTY DETAILS**

PHYSICAL ADDRESS (IF AVAILABLE)  CODE

EXTENT OF PROPERTY  m<sup>2</sup>

MUNICIPAL ACCOUNT NO.  (If available)

NAME OF BOND HOLDER	REGISTERED AMOUNT OF BOND
<input type="text"/>	<input type="text"/> (If applicable)

PROVIDE FULL DETAILS OF ALL SERVITUDES, ROAD PROCLAMATIONS OR OTHER ENDORSEMENTS AGAINST THE PROPERTY (If applicable)

SERVITUDE NO.	AFFECTED AREA	m <sup>2</sup>
<input type="text"/>	<input type="text"/>	<input type="text"/>
IN FAVOUR OF <input type="text"/>		
FOR WHAT PURPOSE <input type="text"/>		

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

**SECTION 3: DESCRIPTION OF BUILDINGS**

3.1 MAIN DWELLING ON FARM/HOLDING (INDICATE NUMBER OR STATE YES/NO IN APPROPRIATE BOX)

NO. OF BEDROOMS	<input type="text"/>	NO. OF BATHROOMS	<input type="text"/>	KITCHEN	<input type="text"/>	LOUNGE	<input type="text"/>
DINING ROOM	<input type="text"/>	LOUNGE WITH DINING ROOM	<input type="text"/>	STUDY	<input type="text"/>	PLAYROOM	<input type="text"/>
TELEVISION ROOM	<input type="text"/>	LAUNDRY	<input type="text"/>	SEPARATE TOILET	<input type="text"/>		
OTHER	<input type="text"/>			SIZE OF MAIN DWELLING	<input type="text"/> m <sup>2</sup>		

3.2 OTHER BUILDINGS - ATTACH AS ANNEXURE A

BUILDING NO.	DESCRIPTION	SIZE	m <sup>2</sup>	CONDITION	IS THE BUILDING FUNCTIONAL
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

3.3 IS ANY PORTION OF THE PROPERTY USED FOR ANY PURPOSE OTHER THAN AGRICULTURAL? (e.g. Business, mining, eco-tourism, trading in or hunting of game)

Tick  YES  NO IF YES:- DESCRIBE THE USE(S)   
 IF NECESSARY PROVIDE ANNEXURE B

3.4 LAND USE ANALYSIS:

NON AGRICULTURAL (REFER TO 3.3)	<input type="text"/>	ha
GRAZING	<input type="text"/>	ha
UNDER IRRIGATION	<input type="text"/>	ha
DRY LAND	<input type="text"/>	ha
PERMANENT CROPS	<input type="text"/>	ha
OTHER .....	<input type="text"/>	ha
OTHER .....	<input type="text"/>	ha
OTHER .....	<input type="text"/>	ha
TOTAL	<input type="text"/>	ha

CONDITION OF FENCES		
GOOD	AVERAGE	POOR
<input type="text"/>	<input type="text"/>	<input type="text"/>

AREA GAME FENCED  ha

NUMBER OF BOREHOLES   
 OUTPUT LITRES/HOUR

DAMS   
 CAPACITY

IS THE PROPERTY EXPOSED TO A RIVER?  
 YES  NO

Complete: Portion/Holding No. .... Farm/Holding .....  
 PLEASE COMPLETE THE BOTTOM OF EACH PAGE

**FORM C: AGRICULTURAL HOLDINGS OR FARMS**

3.5 OTHER:  
IS YOUR PROPERTY AFFECTED BY A LAND CLAIM?  YES  NO

IF YES:-  
DATE OF CLAIM   
GAZETTE NO

DO YOU HAVE WATER RIGHTS?  YES  NO  
IF YES:- DETAILS:

HAS YOUR APPLIED FOR A REZONING OR CONSENT USE?  YES  NO  
CONSENT USE e.g as guest house, business etc.  
IF YES:- DETAILS:

HAS YOUR AGRICULTURAL HOLDINGS PROPERTY BEEN EXCISED?  YES  NO  
IF YES:- NEW FARM DESCRIPTION

HAS THE TOWNSHIP BEEN APPLIED FOR OR PROCLAIMED?  YES  NO  
IF YES:- FULL DETAILS

TENANT AND RENT INFORMATION - ANNEXURE C

NAME OF TENANT	SIZE	RENTAL (EXCL VAT)	ESCALATION	OTHER CONTRIBUTIONS	TERM OF LEASE	START DATE	USE

**SECTION 4: 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 IN  
THE LAST 3 YEARS WHAT WAS THE ASKING PRICE?

R

OFFER RECEIVED R

TEL NO.

SALE TRANSACTIONS USED BY THE APPELLANT IN DETERMINING THE MARKET VALUE OF THE PROPERTY APPEALED TO  
(IF INSUFFICIENT SPACE PROVIDE ANNEXURE D)

HOLDING/PORTION NO	AGRICULTURAL HOLDING /FARM	DATE OF SALE	SELLING PRICE

**SECTION 5: APPEAL DETAILS**

DESCRIPTION OF THE PROPERTY	PARTICULARS AS REFLECTED IN VALUATION ROLL	CHANGES REQUESTED BY APPELLANT
CATEGORY		
PHYSICAL ADDRESS		
EXTENT		
MARKET VALUE		
NAME OF OWNER		

ADVERSE FEATURES AND/OR FURTHER REASONS IN SUPPORT OF THIS APPEAL (ANNEXURE E CAN BE PROVIDED)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Complete: Portion/Holding No..... Farm/Holding.....

PLEASE COMPLETE THE BOTOM OF EACH PAGE

**FORM C: AGRICULTURAL HOLDINGS OR FARMS  
SECTION 6: 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 OR PARTICULARS IN AN APPEAL TO AN APPEAL BOARD, 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 SO 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.

DATE

YEAR	MONTH	DAY

SIGNATURE \_\_\_\_\_

**OFFICIAL USE**

**SECTION 7: DECISION OF THE VALUATION APPEAL BOARD**

DESCRIPTION OF THE PROPERTY	
CATEGORY	
PHYSICAL ADDRESS	
EXTENT	
MARKET VALUE	
NAME OF OWNER	

**7.1 REASONS OF THE VALUATION APPEAL BOARD**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

NAME OF THE CHAIRPERSON OF VALUATION APPEAL BOARD

SIGNATURE


DATE

YEAR	MONTH	DAY

**SECTION 8: NOTIFICATION OF OUTCOME**

	SIGNATURE	DATE
VALUATION ROLL ADJUSTED		
APPELLANT NOTIFIED		
OWNER NOTIFIED		

Complete: Portion/Holding No. .... Farm/Holding .....  
PLEASE COMPLETE THE BOTTOM OF EACH PAGE

FORM A: RESIDENTIAL (FULL TITLE AND SECTIONAL TITLE USED FOR RESIDENTIAL PURPOSES)

OBJECTION NO.

THE MUNICIPAL MANAGER

..... Municipality

LODGING OF AN OBJECTION AGAINST A MATTER REFLECTED IN OR OMITTED FROM THE VALUATION ROLL/SUPPLEMENTARY VALUATION ROLL\* FOR THE PERIOD 1 JULY ..... TO 30 JUNE .....

*\*Delete whichever is not applicable*

(COMPLETE A SEPARATE FORM FOR EACH ENTRY OBJECTED TO)

ERF/UNIT NO.  SUBURB/ SCHEME NAME

SECTION 1: OBJECTOR INFORMATION

1.1 OBJECTOR IS THE OWNER

REGISTERED OWNER OF PROPERTY

IDENTITY NO.  COMPANY OR C.C. REGISTRATION NO.

PHYSICAL ADDRESS OF OWNER  CODE

POSTAL ADDRESS OF OWNER  CODE

TELEPHONE NO.: HOME (  ) WORK (  )

CELL  FAX NO. (  )

E-MAIL ADDRESS

1.2 OBJECTOR IS NOT THE OWNER OR MUNICIPALITY IS THE OBJECTOR

NAME OF OBJECTOR

IDENTITY NO.  COMPANY OR C.C. REGISTRATION NO.

POSTAL ADDRESS OF OBJECTOR  CODE

TELEPHONE NO.: HOME (  ) WORK (  )

CELL  FAX NO. (  )

E-MAIL ADDRESS

STATUS OF OBJECTOR (e.g. Tenant, Pending Purchaser, Municipality etc)

1.3 AUTHORISED REPRESENTATIVE OF THE OBJECTOR

NAME OF REPRESENTATIVE

POSTAL ADDRESS  CODE

TELEPHONE NO.: HOME (  ) WORK (  )

CELL  FAX NO. (  )

E-MAIL ADDRESS

\* IF A REPRESENTATIVE IS APPOINTED, PROOF OF AUTHORISATION MUST BE ATTACHED  
Complete: Erf/Unit No..... Area/Scheme Name.....

PLEASE COMPLETE THE BOTTOM OF EACH PAGE

**FORM A: RESIDENTIAL (FULL TITLE AND SECTIONAL TITLE USED FOR RESIDENTIAL PURPOSES)**

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

PHYSICAL ADDRESS  CODE

EXTENT OF PROPERTY  m<sup>2</sup>

MUNICIPAL ACCOUNT NO.  (If available)

NAME OF BOND HOLDER	REGISTERED AMOUNT OF BOND
<input type="text"/>	<input type="text"/> (If applicable)

PROVIDE FULL DETAILS OF ALL SERVITUDES, ROAD PROCLAMATIONS OR OTHER ENDORSEMENTS AGAINST THE PROPERTY (If applicable)

SERVITUDE NO.	AFFECTED AREA	m <sup>2</sup>
<input type="text"/>	<input type="text"/>	<input type="text"/>
IN FAVOUR OF <input type="text"/>		
FOR WHAT PURPOSE <input type="text"/>		

WAS COMPENSATION PAID IF YES:-  YES  NO  
 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
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
DINING ROOM	LOUNGE WITH DINING ROOM	STUDY	PLAYROOM
TELEVISION ROOM	LAUNDRY	SEPARATE TOILET	
OTHER		OTHER	
OTHER		OTHER	

**OUTBUILDINGS**

NO. OF GARAGES	SIZE OF MAIN DWELLING	m <sup>2</sup>
<input type="text"/>	<input type="text"/>	<input type="text"/>
GRANNY FLAT/ROOMS	SIZE OF OUTBUILDING	m <sup>2</sup>
<input type="text"/>	SIZE OF OTHER BUILDINGS	m <sup>2</sup>
OTHER	TOTAL BUILDING SIZE	m <sup>2</sup>

**OTHER BUILDINGS (ATTACH ANNEXURE)**

OTHER:	GOOD	AVERAGE	POOR
SWIMMING POOL	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
TENNIS COURT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
BORE HOLE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
GARDEN	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
OTHER	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
OTHER	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**FENCING:**

	FRONT	BACK	SIDE 1	SIDE 2
TYPE	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
HEIGHT	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

DRIVE WAY: (e.g. Bricks, pavers)  Tick   
 IS YOUR PROPERTY SITUATED IN A BOOMED AREA OR SECURITY  YES  NO

OTHER FEATURES:

GENERAL CONDITION OF PROPERTY: (Tick  )

GOOD	AVERAGE	POOR
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Complete: Erf/Unit No. .... Area/Scheme Name.....  
 PLEASE COMPLETE THE BOTOM OF EACH PAGE

**FORM A: RESIDENTIAL (FULL TITLE AND SECTIONAL TITLE USED FOR RESIDENTIAL PURPOSES)**

**SECTION 4: SECTIONAL TITLE UNITS**

SCHEME NO.  NAME OF SCHEME  FLAT NO./ DOOR NO.  UNIT SIZE  m<sup>2</sup>

NAME OF MANAGING AGENT  TEL NO.

INDICATE NUMBER OR STATE YES/NO IN APPROPRIATE BOX

NO. OF BEDROOMS	<input type="text"/>	NO. OF BATHROOMS	<input type="text"/>	KITCHEN	<input type="text"/>	LOUNGE	<input type="text"/>
DINING ROOM	<input type="text"/>	LOUNGE WITH DINING ROOM	<input type="text"/>	STUDY	<input type="text"/>	PLAYROOM	<input type="text"/>
TELEVISION ROOM	<input type="text"/>	LAUNDRY	<input type="text"/>	SEPARATE TOILET	<input type="text"/>		
OTHER	<input type="text"/>			OTHER	<input type="text"/>		
OTHER	<input type="text"/>			OTHER	<input type="text"/>		

MONTHLY LEVY  R

**DETAILS OF EXCLUSIVE USE AREAS**

**COMMON PROPERTY CONSISTS OF:**

SWIMMING POOL	<input type="text"/>
TENNIS COURT	<input type="text"/>
OTHER	<input type="text"/>
OTHER	<input type="text"/>
OTHER	<input type="text"/>

GARAGE	<input type="text"/>	m <sup>2</sup>
CARPORT	<input type="text"/>	m <sup>2</sup>
OPEN PARKING	<input type="text"/>	m <sup>2</sup>
STORE ROOM	<input type="text"/>	m <sup>2</sup>
GARDEN	<input type="text"/>	m <sup>2</sup>
OTHER	<input type="text"/>	m <sup>2</sup>

**SECTION 5: MARKET INFORMATION**

IF YOUR PROPERTY IS CURRENTLY ON THE MARKET WHAT IS THE ASKING PRICE?

R

IF YOUR PROPERTY HAS BEEN ON THE MARKET IN THE LAST 3 YEARS WHAT WAS THE ASKING PRICE?

R

OFFER RECEIVED

R

OFFER RECEIVED

R

NAME OF AGENT:

TEL NO.

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
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**SECTION 6: OBJECTION DETAILS**

DESCRIPTION OF THE PROPERTY/UNIT NO.	PARTICULARS AS REFLECTED IN THE VALUATION ROLL	CHANGES REQUESTED BY OBJECTOR
CATEGORY	<input type="text"/>	<input type="text"/>
PHYSICAL ADDRESS/DOOR NO./FLAT NO.	<input type="text"/>	<input type="text"/>
EXTENT	<input type="text"/>	<input type="text"/>
MARKET VALUE	<input type="text"/>	<input type="text"/>
NAME OF OWNER	<input type="text"/>	<input type="text"/>

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

Complete: Erf/Unit No. .... Area/Scheme Name.....  
PLEASE COMPLETE THE BOTTOM OF EACH PAGE

**FORM A: RESIDENTIAL (FULL TITLE AND SECTIONAL TITLE USED FOR RESIDENTIAL PURPOSES)**

**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 OR PARTICULARS IN AN APPEAL TO AN APPEAL BOARD, 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 SO 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.

DATE: 

YEAR	MONTH	DAY

SIGNATURE \_\_\_\_\_

**OFFICIAL USE**

**SECTION 8: DECISION OF MUNICIPAL VALUER**

DESCRIPTION OF THE PROPERTY/UNIT NO.	
CATEGORY	
PHYSICAL ADDRESS/DOOR NO./FLAT NO.	
EXTENT	
MARKET VALUE	
NAME OF OWNER	

**REASONS OF THE MUNICIPAL VALUER**

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

NAME OF MUNICIPAL VALUER/ ASSISTANT MUNICIPAL VALUER\*  
*\*Delete whichever is not applicable*  
 SIGNATURE: 


DATE: 

YEAR	MONTH	DAY

**SECTION 9: NOTIFICATION OF OUTCOME**

	SIGNATURE	DATE
VALUATION ROLL ADJUSTED		
OBJECTOR NOTIFIED		
OWNER NOTIFIED		
SECTION 52(1)(a) WHERE APPLICABLE		

Complete: Erf/Unit No..... Area/Scheme Name.....  
 PLEASE COMPLETE THE BOTOM OF EACH PAGE



**FORM B: PROPERTIES OTHER THAN RESIDENTIAL OR AGRICULTURAL (e.g businesses, factories, offices, schools)**

OBJECTION NO.

**THE MUNICIPAL MANAGER**

..... Municipality

**LODGING OF AN OBJECTION AGAINST A MATTER REFLECTED IN OR OMITTED FROM THE VALUATION ROLL/SUPPLEMENTARY VALUATION ROLL\* FOR THE PERIOD 1 JULY ..... TO 30 JUNE .....**

**DESCRIPTION OF PROPERTY IN RESPECT OF WHICH THE OBJECTION IS MADE**

(COMPLETE A SEPARATE FORM FOR EACH ENTRY OBJECTED TO)

ERF/PORITION/UNIT NO.  SUBURB/FARM/SCHEME

**SECTION 1: OBJECTOR INFORMATION**

FARM NO.  REG. DIV

**1.1 OBJECTOR IS THE OWNER**

REGISTERED OWNER OF PROPERTY

IDENTITY NO.  COMPANY OR C.C. REGISTRATION NO.

PHYSICAL ADDRESS OF OWNER  CODE

POSTAL ADDRESS OF OWNER  CODE

TELEPHONE NO.: HOME (  )  WORK (  )

CELL  FAX NO. (  )

E-MAIL ADDRESS

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

NAME OF OBJECTOR:

IDENTITY NO.  COMPANY OR C.C. REGISTRATION NO.

POSTAL ADDRESS OF OBJECTOR  CODE

TELEPHONE NO.: HOME (  )  WORK (  )

CELL  FAX NO. (  )

E-MAIL ADDRESS

STATUS OF OBJECTOR (e.g. Tenant, Pending Purchaser, Municipality etc)

**1.3 AUTHORISED REPRESENTATIVE OF THE OBJECTOR**

NAME OF REPRESENTATIVE:

POSTAL ADDRESS  CODE

TELEPHONE NO.: HOME (  )  WORK (  )

CELL  FAX NO. (  )

E-MAIL ADDRESS

- IF A REPRESENTATIVE IS APPOINTED, PROOF OF AUTHORISATION MUST BE ATTACHED  
Complete: Erf/Unit No..... Area/Scheme Name.....

PLEASE COMPLETE THE BOTOM OF EACH PAGE

**FORM B: PROPERTIES OTHER THAN RESIDENTIAL OR AGRICULTURAL (e.g businesses, factories, offices, schools)**

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

ADDRESS  CODE

OF  m<sup>2</sup>

ACCOUNT  (If available)

NAME OF BOND HOLDER	REGISTERED AMOUNT OF BOND	(If applicable)
<input type="text"/>	<input type="text"/>	

PROVIDE FULL DETAILS OF ALL SERVITUDES, ROAD PROCLAMATIONS OR OTHER ENDORSEMENTS AGAINST THE PROPERTY AGAINST THE PROPERTY (If applicable)

SERVITUDE NO.	AFFECTED AREA	m <sup>2</sup>
IN FAVOUR OF	<input type="text"/>	
FOR WHAT PURPOSE	<input type="text"/>	

WAS COMPENSATION PAID IF YES:-

YES	NO	DATE OF PAYMENT	AMOUNT	R
<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**SECTION 3: DESCRIPTION OF BUILDINGS ( FOR SECTIONAL TITLE COMPLETE SECTION 4)**  
(INFORMATION UNDER 3.1 TO 3.4 TO BE SUPPLIED BY MEANS OF ANNEXURES AS FOLLOWS)

**3.1 TENANT AND RENT INFORMATION - ANNEXURE A**

NAME OF TENANT	SIZE	RENTAL (EXCL VAT)	ESCALATION OF RENTAL	OTHER CONTRIBUTION	TERM OF LEASE	START DATE
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**3.2 SCHEDULE OF EXPENSES INCLUDING: MUNICIPAL, ADMINISTRATION, INSURANCES, SECURITY etc. - ANNEXURE B**

**3.3 STATEMENT OF INCOME & EXPENDITURE FOR PREVIOUS FINANCIAL YEAR - ANNEXURE C**

**3.4 BUILDING SIZES - ANNEXURE D**

BUILDING NO.	SIZE m <sup>2</sup>	DESCRIPTION e.g used as a shop, office etc	CONDITION
--------------	---------------------	--	-----------

**3.5 IF THE PROPERTY HAS NOT BEEN DEVELOPED TO ITS HIGHEST AND BEST USE, INDICATE THE EXTENT OF LAND THAT IS AVAILABLE FOR FURTHER DEVELOPMENT**

m<sup>2</sup>

OTHER FEATURES OF BUILDINGS: (PROVIDE ANNEXURE E IF NECESSARY)

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Complete: Erf/Unit No. .... Area/Scheme Name.....  
PLEASE COMPLETE THE BOTOM OF EACH PAGE

**FORM B: PROPERTIES OTHER THAN RESIDENTIAL OR AGRICULTURAL (e.g businesses, factories, offices, schools)**  
**SECTION 4: SECTIONAL TITLE UNITS**

SCHEME NO.		NAME OF SCHEME		FLAT NO./ DOOR NO.		UNIT SIZE		m <sup>2</sup>
NAME OF MANAGING AGENT						TEL NO.		
SHOPS				OTHER				m <sup>2</sup>
OFFICES				OTHER				m <sup>2</sup>
FACTORIES				OTHER				m <sup>2</sup>

**TENANT AND RENT INFORMATION - ANNEXURE A**

NAME OF TENANT	SIZE	RENTAL (EXCL VAT)	ESCALATION	OTHER CONTRIBUTION	TERM OF LEASE	START DATE
MONTHLY LEVY	R					

COMMON PROPERTY CONSISTS OF:		
SWIMMING POOL		m <sup>2</sup>
TENNIS COURT		m <sup>2</sup>
OTHER		m <sup>2</sup>
OTHER		m <sup>2</sup>
OTHER		m <sup>2</sup>

DETAILS OF EXCLUSIVE USE AREAS		
GARAGE		m <sup>2</sup>
CARPORT		m <sup>2</sup>
OPEN PARKING		m <sup>2</sup>
STORE ROOM		m <sup>2</sup>
GARDEN		m <sup>2</sup>
OTHER		m <sup>2</sup>

**SECTION 5: MARKET INFORMATION**

IF YOUR PROPERTY IS CURRENTLY ON THE MARKET WHAT IS THE ASKING PRICE

R	
---	--

RECEIVED

R	
---	--

IF YOUR PROPERTY HAS BEEN ON THE MARKET IN THE LAST 3 YEARS WHAT WAS THE ASKING PRICE?

R	
---	--

RECEIVED

R	
---	--

NAME OF AGENT:

--

TEL NO.

--

**SALES TRANSACTIONS USED BY THE OBJECTOR IN DETERMINING THE MARKET VALUE OF THE PROPERTY OBJECTED TO (IF INSUFFICIENT SPACE PROVIDE ANNEXURE F)**

ERF/PTN/UNIT NO.	SUBURB/FARM/SCHEME NAME	DATE OF SALE	SELLING PRICE

**SECTION 6: OBJECTION DETAILS**

	PARTICULARS AS REFLECTED IN VALUATION ROLL	CHANGES REQUESTED BY OBJECTOR
DESCRIPTION OF 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 (ANNEXURE G CAN BE PROVIDED)

Complete: Erf/Unit No. .... Area/Scheme Name .....

PLEASE COMPLETE THE BOTTOM OF EACH PAGE

**FORM B: PROPERTIES OTHER THAN RESIDENTIAL OR AGRICULTURAL (e.g businesses, factories, offices, schools)**

**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 OR PARTICULARS IN AN APPEAL TO AN APPEAL BOARD, 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 SO HAVE PROVIDED ANY SUCH DOCUMENT, INFORMATION OR PARTICULARS HAS PLACED AN UNNECESSARY BURDEN ON THE FUNCTIONS OF THE MUNICIPAL VALUER OR APPEAL BOARD.

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

DATE:

YEAR	MONTH	DAY

SIGNATURE \_\_\_\_\_

**OFFICIAL USE**

**SECTION 8: DECISION OF MUNICIPAL VALUER**

DESCRIPTION OF THE PROPERTY/UNIT NO.	
CATEGORY	
PHYSICAL ADDRESS/DOOR NO./FLAT NO.	
EXTENT	
MARKET VALUE	
NAME OF OWNER	

**8.1 REASONS OF THE MUNICIPAL VALUER**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

NAME OF MUNICIPAL VALUER/ ASSISTANT MUNICIPAL VALUER\*  
*\* Delete whichever is not applicable*  
 SIGNATURE: \_\_\_\_\_


DATE

YEAR	MONTH	DAY

**SECTION 9: NOTIFICATION OF OUTCOME**

VALUATION ROLL ADJUSTED

OBJECTOR NOTIFIED

OWNER NOTIFIED

SECTION 52(1)(a)  
 WHERE APPLICABLE

SIGNATURE	DATE

Complete: Erf/Unit No. .... Area/Scheme Name.....  
 PLEASE COMPLETE THE BOTOM OF EACH PAGE

**FORM C: AGRICULTURAL HOLDINGS OR FARMS**

OBJECTION NO.

**THE MUNICIPAL MANAGER**

..... Municipality

**LODGING OF AN OBJECTION AGAINST A MATTER REFLECTED IN OR OMITTED FROM THE VALUATION ROLL/SUPPLEMENTARY VALUATION ROLL\* FOR THE PERIOD 1 JULY ..... TO 30 JUNE .....**

*\*Delete whichever is not applicable*

**DESCRIPTION OF PROPERTY IN RESPECT OF WHICH THE OBJECTION IS MADE**

**(COMPLETE A SEPARATE FORM FOR EACH ENTRY OBJECTED TO)**

HOLDING/PORTRION NO.  AGRICULTURAL HOLDING/FARM

**SECTION 1: OBJECTOR INFORMATION**

FARM NO.  REG. DIV

**1.1 OBJECTOR IS THE OWNER**

REGISTERED OWNER OF PROPERTY

IDENTITY NO.  COMPANY OR C.C. REGISTRATION NO.

PHYSICAL ADDRESS OF OWNER  CODE

POSTAL ADDRESS OF OWNER  CODE

TELEPHONE NO.: HOME (  ) WORK (  )

CELL  FAX NO. (  )

E-MAIL ADDRESS

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

NAME OF OBJECTOR:

IDENTITY NO.  COMPANY OR C.C. REGISTRATION NO.

POSTAL ADDRESS OF OBJECTOR  CODE

TELEPHONE NO.: HOME (  ) WORK (  )

CELL  FAX NO. (  )

E-MAIL ADDRESS

STATUS OF OBJECTOR (e.g. Tenant, Pending Purchaser, Municipality etc)

**1.3 AUTHORISED REPRESENTATIVE OF THE OBJECTOR**

NAME OF REPRESENTATIVE:

POSTAL ADDRESS  CODE

TELEPHONE NO.: HOME (  ) WORK (  )

CELL  FAX NO. (  )

E-MAIL ADDRESS

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

Complete: Portion/Holding No..... Farm/Holding.....

PLEASE COMPLETE THE BOTTOM OF EACH PAGE

**FORM C: AGRICULTURAL HOLDINGS OR FARMS**

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

PHYSICAL ADDRESS (IF AVAILABLE)  CODE

EXTENT OF PROPERTY  m<sup>2</sup>

MUNICIPAL ACCOUNT NO.  (If available)

NAME OF BOND HOLDER	REGISTERED AMOUNT OF BOND	(If applicable)
<input type="text"/>	<input type="text"/>	

PROVIDE FULL DETAILS OF ALL SERVITUDES, ROAD PROCLAMATIONS OR OTHER ENDORSEMENTS AGAINST THE PROPERTY (If applicable)

SERVITUDE NO.	AFFECTED AREA	m <sup>2</sup>
<input type="text"/>	<input type="text"/>	<input type="text"/>
IN FAVOUR OF	<input type="text"/>	
FOR WHAT PURPOSE	<input type="text"/>	

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

**SECTION 3: DESCRIPTION OF BUILDINGS**

**3.1 MAIN DWELLING ON FARM/HOLDING (INDICATE NUMBER OR STATE YES/NO IN APPROPRIATE BOX)**

NO. OF BEDROOMS	NO. OF BATHROOMS	KITCHEN	LOUNGE
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
DINING ROOM	LOUNGE WITH DINING ROOM	STUDY	PLAYROOM
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
TELEVISION ROOM	LAUNDRY	SEPARATE TOILET	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
OTHER	SIZE OF MAIN DWELLING		m <sup>2</sup>
<input type="text"/>	<input type="text"/>		<input type="text"/>

**3.2 OTHER BUILDINGS - ATTACH AS ANNEXURE A**

BUILDING NO.	DESCRIPTION	SIZE m <sup>2</sup>	CONDITION	IS THE BUILDING FUNCTIONAL
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**3.3 IS ANY PORTION OF THE PROPERTY USED FOR ANY PURPOSE OTHER THAN AGRICULTURAL? (e.g. Business, mining, eco-tourism, trading in or hunting of game)**

Tick  YES  NO IF YES - DESCRIBE THE USE(S)

IF NECESSARY PROVIDE ANNEXURE B

**3.4 LAND USE ANALYSIS:**

NON AGRICULTURAL (REFER TO 3.3)	<input type="text"/> ha
GRAZING	<input type="text"/> ha
UNDER IRRIGATION	<input type="text"/> ha
DRY LAND	<input type="text"/> ha
PERMANENT CROPS	<input type="text"/> ha
OTHER: .....	<input type="text"/> ha
OTHER: .....	<input type="text"/> ha
OTHER: .....	<input type="text"/> ha
TOTAL	<input type="text"/> ha

**CONDITION OF FENCES**

GOOD	AVERAGE	POOR
<input type="text"/>	<input type="text"/>	<input type="text"/>

AREA GAME FENCED  ha

NUMBER OF BOREHOLES

OUTPUT LITRES/HOUR

DAMS

CAPACITY

IS THE PROPERTY EXPOSED TO A RIVER?

<input type="checkbox"/> YES	<input type="checkbox"/> NO
------------------------------	-----------------------------

Complete: Portion/Holding No..... Farm/Holding.....

PLEASE COMPLETE THE BOTTOM OF EACH PAGE

**FORM C: AGRICULTURAL HOLDINGS OR FARMS**

3.5 OTHER:

IS YOUR PROPERTY AFFECTED BY A LAND CLAIM?  YES  NO

IF YES:-  
 DATE OF CLAIM   
 GAZETTE NO.

DO YOU HAVE WATER RIGHTS?  YES  NO

IF YES:- DETAILS:

HAVE YOU APPLIED FOR A REZONING OR CONSENT USE?  YES  NO

CONSENT USE e.g as guest houses, business etc.

IF YES:- DETAILS:

HAS YOUR AGRICULTURAL HOLDINGS PROPERTY BEEN EXCISED  YES  NO

IF YES:- NEW FARM DESCRIPTION

HAS THE TOWNSHIP BEEN APPLIED FOR OR PROCLAIMED?  YES  NO

IF YES:- FULL DETAILS

**TENANT AND RENT INFORMATION - ANNEXURE C**

NAME OF TENANT	SIZE	RENTAL (EXCL VAT)	ESCALATION	OTHER CONTRIBUTIONS	TERM OF LEASE	START DATE	USE
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**SECTION 4: 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 IN  
 THE LAST 3 YEARS WHAT WAS THE ASKING PRICE?

R

OFFER RECEIVED R

TEL NO.

SALE TRANSACTIONS USED BY THE OBJECTOR IN DETERMINING THE MARKET VALUE OF THE PROPERTY OBJECTED TO  
 (IF INSUFFICIENT SPACE PROVIDE ANNEXURE D)

HOLDING/PORTION NO	AGRICULTURAL HOLDING /FARM	DATE OF SALE	SELLING PRICE

**SECTION 5: OBJECTION DETAILS**

DESCRIPTION OF THE PROPERTY	PARTICULARS AS REFLECTED IN VALUATION ROLL	CHANGES REQUESTED BY OBJECTOR
CATEGORY		
PHYSICAL ADDRESS		
EXTENT		
MARKET VALUE		
NAME OF OWNER		

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

Complete: Portion/Holding No. .... Farm/Holding .....

PLEASE COMPLETE THE BOTOM OF EACH PAGE

**FORM C: AGRICULTURAL HOLDINGS OR FARMS  
SECTION 6: 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 OR PARTICULARS IN AN APPEAL TO AN APPEAL BOARD, 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 SO HAVE PROVIDED ANY SUCH DOCUMENTS INFORMATION OR PARTICULARS HAS PLACED AN UNNECESSARY BURDEN ON THE FUNCTION OF THE MUNICIPAL VALUER OR THE APPEAL BOARD.

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

DATE: 

YEAR	MONTH	DAY

\_\_\_\_\_  
SIGNATURE

**OFFICIAL USE**

**SECTION 7: DECISION OF MUNICIPAL VALUER**

DESCRIPTION OF THE PROPERTY:	
CATEGORY	
PHYSICAL ADDRESS	
EXTENT	
MARKET VALUE	
NAME OF OWNER	

REASONS OF THE MUNICIPAL VALUER

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

NAME OF MUNICIPAL VALUER/  
ASSISTANT MUNICIPAL VALUER\*  
*\* Delete whichever is not applicable*  
SIGNATURE:

--	--

DATE: 

YEAR	MONTH	DAY

**SECTION 8: NOTIFICATION OF OUTCOME**

VALUATION ROLL ADJUSTED	<table border="1" style="width: 100%;"><tr><th>SIGNATURE</th><th>DATE</th></tr><tr><td style="height: 20px;"></td><td></td></tr></table>	SIGNATURE	DATE			
SIGNATURE	DATE					
OBJECTOR NOTIFIED	<table border="1" style="width: 100%;"><tr><td style="height: 20px;"></td><td></td></tr></table>					
OWNER NOTIFIED	<table border="1" style="width: 100%;"><tr><td style="height: 20px;"></td><td></td></tr></table>					
SECTION 52(1)(a) WHERE APPLICABLE	<table border="1" style="width: 100%;"><tr><td style="height: 20px;"></td><td></td></tr></table>					

Complete: Portion/Holding No. .... Farm/Holding .....

PLEASE COMPLETE THE BOTOM OF EACH PAGE