



RESIDENTIAL

FORM A

(FULL TITLE AND SECTIONAL TITLE USED FOR RESIDENTIAL PURPOSES)

OBJECTION NO: _____

The Municipal Manager
Dr Nkosazana Dlamini Zuma Municipality

LODGING OF AN OBJECTION AGAINST A MATTER REFLECTED IN OR OMITTED FROM THE 4TH GENERAL VALUATION ROLL FOR THE PERIOD 1 JULY 2022 TO 30 JUNE 2027

(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/C.C. Registration No: _____

Physical Address of Owner: _____ Code: _____

Postal Address of Owner: _____ Code: _____

Telephone No: Home () _____ Work: () _____

Cellular No: _____ Fax No: () _____

E-mail Address: _____

1.2 OBJECTOR IS NOT THE OWNER OR MUNICIPALITY IS THE OBJECTOR

Name of Objector: _____

Identity No: _____ Company/C.C. Registration No: _____

Physical Address of Objector: _____ Code: _____

Postal Address of Objector: _____ Code: _____

Telephone No: Home () _____ Work: () _____

Cellular No: _____ Fax No: () _____

E-mail Address: _____

Status of Objector (e.g. Tenant, Pending Purchaser, Municipality, etc.)

RESIDENTIAL

(FULL TITLE AND SECTIONAL TITLE USED FOR RESIDENTIAL PURPOSES)

1.3 AUTHORISED REPRESENTATIVE OF THE OBJECTOR

Name of Representative: _____

Postal Address: _____ Code: _____

Telephone No: Home () _____ Work: () _____

Cellular No: _____ Fax No: () _____

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: _____ 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_____

RESIDENTIAL

(FULL TITLE AND SECTIONAL TITLE USED FOR RESIDENTIAL PURPOSES)

SECTION 3: DESCRIPTION OF RESIDENTIAL DWELLING *(For Sectional Titles see Section 4)*

Indicate Quantity and Complete Description of "Other" if applicable

MAIN DWELLING:

Bedrooms _____	Bathrooms _____	Kitchen _____	Lounge _____
Dinning Room _____	Lounge with Dinning Room _____	Study _____	Playroom _____
Television Room _____	Laundry _____	Separate Toilet _____	
Other _____		Other _____	
Other _____		Other _____	

OUTBUILDINGS:

Garages _____	Size of Main Dwelling _____ m ²
Granny Flat/ Rooms _____	Size of Outbuildings _____ m ²
Other _____	Size of Other Buildings _____ m ²
Describe Other _____	

OTHER BUILDINGS: (Attach Annexure)

Swimming Pool _____	Tennis Court _____	☐ Good ☐ Average ☐ Poor
Borehole _____	Garden _____	
Other _____		

FENCING:

	FRONT	BACK	SIDE 1	SIDE 2
Type				
Height				

DRIVE WAY:

Description: _____ (e.g. Bricks, Pavers, Tar, etc.)	☐ Yes ☐ No Is your property situated in a Boomed or Gated (Security) area
--	---

Other Features: _____

General Condition of Property: ☐ Good ☐ Average ☐ Poor

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 _____ m²

NAME OF MANAGING AGENT: _____ TEL NO: () _____

Indicate Quantity and Complete Description of "Other" if applicable

Bedrooms _____	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 _____
<i>Describe Other</i>

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 _____	If your property has been on the market in the last 3 years, what was the Asking Price? R _____
Offers Received: R _____	Offers Received: R _____
Name of Agent: _____	

Sale Transactions (of Other Property 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:
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

RESIDENTIAL

(FULL TITLE AND SECTIONAL TITLE USED FOR RESIDENTIAL PURPOSES)

SECTION 6: OBJECTION DETAILS

	PARTICULARS AS REFLECTED IN THE 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 (Annexures can be provided).

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 failure to have provided any such document, information or particulars has placed an unnecessary burden on the functions of the Municipal Valuer of the Appeal Board.

I / We _____ hereby declare that the
(FULL NAME)
information and particulars supplied are true and correct.

Signed at _____ on the

Date: 20 / /
YYYY MM DD

SIGNATURE

RESIDENTIAL

(FULL TITLE AND SECTIONAL TITLE USED FOR RESIDENTIAL PURPOSES)

OFFICIAL USE

SECTION 8: DECISION OF MUNICIPAL VALUER

Description of Property/Unit No.:	_____
Category:	_____
Physical Address/Door No./Flat No.:	_____
Extent:	_____
Market Value:	_____
Name of Owner:	_____

Reasons of the Municipal Valuer:

_____	_____	_____ / _____ / _____
*Name of Municipal/Assistant Municipal Valuer	Signature	YYYY MM DD

**Delete whichever is not applicable*

SECTION 9: DECISION OF MUNICIPAL VALUER

	SIGNATURE	DATE
Valuation Roll Adjusted	_____	_____
Objector Notified	_____	_____
Owner Notified	_____	_____
Section 52(1)(a) <i>Where applicable</i>	_____	_____