

MSUKALIGWA MUNICIPALITY

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

APPEAL NO.

THE CHAIRPERSON: VALUATION APPEAL BOARD
MSUKALIGWA 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 APPEALLED TO)

ERF/UNIT NO. SUBURB/ SCHEME REG. DIV

SECTION 1: APPELLANT INFORMATION

1.1 APPELLANT IS THE OWNER

REGISTERED OWNER OF PROPERTY
IDENTITY NUMBER 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 OBJECTOR 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