



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

THE MUNICIPAL MANAGER  
LESEDI LOCAL MUNICIPALITY

OBJECTION NO.

**LOGGING OF AN OBJECTION AGAINST A MATTER REFLECTED IN OR OMITTED FROM THE SUPPLEMENTARY VALUATION ROLL FOR THE PERIOD 1 JULY 2012 TO 30 JUNE 2013**

DESCRIPTION OF PROPERTY IN RESPECT OF WHICH THE OBJECTION IS MADE  
(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 .....

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**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>
IN FAVOUR OF	<input type="text"/>	<input type="text"/>
FOR WHAT PURPOSE	<input type="text"/>	<input type="text"/>

WAS COMPENSATION PAID IF YES:-

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

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

**OUTBUILDINGS**

NO. OF GARAGES	<input type="text"/>
GRANNY FLAT/ROOMS	<input type="text"/>
OTHER	<input type="text"/>

SIZE OF MAIN DWELLING	<input type="text"/>	m <sup>2</sup>
SIZE OF OUTBUILDING	<input type="text"/>	m <sup>2</sup>
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**

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

**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

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

Tick [✓]

OTHER FEATURES: \_\_\_\_\_

**GENERAL CONDITION OF PROPERTY:**

(Tick [✓])

GOOD	<input type="text"/>	AVERAGE	<input type="text"/>	POOR	<input type="text"/>
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Complete: Erf/Unit No ..... Area/Scheme Name .....

PLEASE COMPLETE THE BOTTOM OF EACH PAGE

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**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 OBJECTOR IN DETERMINING THE MARKET VALUE OF PROPERTY OBJECTED TO**

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

**SECTION 6: OBJECTION DETAILS**

	PARTICULARS AS REFLECTED IN THE VALUATION ROLL	CHANGES REQUESTED BY OBJECTOR
DESCRIPTION OF THE 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)**

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

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**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.

	YEAR	MONTH	DAY
DATE:			

\_\_\_\_\_  
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 .....

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