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

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APPEAL NO:

THE CHAIRPERSON: VALUATION APPEAL BOARD MANGAUNG LOCAL MUNICIPALITY

LODGING OF AN APPEAL AGAINST THE DECISION OF THE MUNICIPAL VALUER REGARDING MATTERS PERTAINING TO	3 SPECIFIC
PROPERTY AS REFLECTED IN OR OMITTED FROM THE 13 TH SUPPLEMENTARY VALUATION ROLL FOR THE PERIOD 1	JULY 2022
TO 30 JUNE 2026	

	PTION OF PROPERTY II te a separate form for eac		CH THE APPEAL IS M				
Erf / Por	ion / Unit No			Suburb / Fa Scheme Na			
SECTIO	N 1: APPELANT INFORM	IATION					
1.1	APPELANT IS THE OW	/NER	Γ				
	Registered Owner of F	Property:					
	Identity No:			Company or C.C. Registration			
	Physical Address of					Code	
	Owner Postal Address of					Code	
	Owner					Code	
	Telephone No: Home	()		Work	()		
	Cell No:			Fax No:	()		
	E-mail Address						
1.2	APPELANT IS NOT TH	E OWNER OR MUNI	CIPALITY IS THE OBJ	ECTOR			
	Name of Objector			Company or C.C.			
	Identity No:			Registration			
	Postal Address of					Code	
	Owner					Couc	
	Telephone No: Home	()		Work	()		
	Cell No:			Fax No:	()		
	E-mail Address						
	STATUS OF APPELAN	T (e.g. Tenant, Pendir	ng Purchaser, Municipa	ality, etc.)			
			-				
1.3	AUTHORIZED REPRES	SENTATIVE OF THE	APPELANT				
	Name of						
	Representative						
	Postal Address of Owner					Code	
	Telephone No: Home	()				1 1	
	Cell No:						
	E-mail Address						
*IF A RE	PRESENTATIVE IS APP	POINTED, PROOF OF		JST 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)

Physical Addre	DETAILS				(FOR SECTIONA	L TITLES SEE S	ECTION 4)
Owner	ss of					Code	
Extent of Prope	erty		m²				
Municipal A Number	Account				(If applicable)		
Name of Bond Holder			Regist of Bor	tered Amoun [.] Id	t	(If	applicable)
PROVIDE FULL PROPERTY (If a		OF ALL S	ERVITUDES, ROAI	D PROCLAM	ATIONS OR OTHER E	ENDORSEMENT	S AGAINST THE
Comitude Nev							
Servitude No:					Affected Are	ea	m²
In Favour Of For What Purpo	ose						
Was Compe Paid:	nsation Ye	es No					
lf Yes, Da Payment	te of				Amount:	R	
SECTION 3: DESCRIPTIO							
		-	oplied by means of	Annexure as	follows)		
3.1 Tenan NAME OF	t And Rent SIZE	REN		LATION	OTHER	TERM OF	START DATE
TENANT	m²	(Exc	IVAT) OF	RENT	CONTRIBUTION	LEASE	START DATE
3.2 Sched	lule of Expe	enses Inclue	ding: Municipal, Ad	ministration,	Insurances, Security e	tc, - Annexure E	3
	3.3 Statement of Income and Expenditure for Previous Financial Year – Annexure C						
3.3 Staten	nent of Inco	ome and Ex	penditure for Previo	ous Financiai	Year – Annexure C		
3.4 Buildi	ng Size – A		penditure for Previo				
3.4 Buildi			penditure for Previo	DI	Year – Annexure C ESCRIPTION as a shop, office etc)	CON	IDITION
3.4 Buildin BUI 3.5 If the	ng Size – A LDING NO	nnexure D	SIZE m ²	Di (e.g. used	ESCRIPTION		_
3.4 Buildin BUI 3.5 If the	ng Size – A LDING NO property ha	nnexure D	SIZE m ²	Di (e.g. used	ESCRIPTION as a shop, office etc)		_
3.4 Buildin BUI 3.5 If the furthe	ng Size – A LDING NO property ha r developm	nnexure D as not been ent.	SIZE m ² developed to its h	Di (e.g. used	ESCRIPTION as a shop, office etc) st use. Indicated the e		at is available for
3.4 Buildin BUI 3.5 If the furthe	ng Size – A LDING NO property ha r developm	nnexure D as not been ent.	SIZE m ²	Di (e.g. used	ESCRIPTION as a shop, office etc) st use. Indicated the e		at is available for
3.4 Buildin BUI 3.5 If the furthe	ng Size – A LDING NO property ha r developm	nnexure D as not been ent.	SIZE m ² developed to its h	Di (e.g. used	ESCRIPTION as a shop, office etc) st use. Indicated the e		at is available for
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SECTION	4: SECTIONAL TITLE	E UNITS:						
	Scheme No:	Name of Scheme			Flat No / Door No	Ur	nit Size	m²
	Name of Managing Agent				Tel No			
Indicate N	umber of State Yes/No	o in Appropriate Box	1					
	No of Bedrooms	No of Bathroom	-	Kitchen		Lounge		
	Dining Room	Lounge with Dir Room	ning	Study		Playroom		
	Television Room	Laundry		Separate Toilet				
	Other			Other				
	Other			Other				
	Monthly Levy	R				Detail of Exclusive Areas	use	
	COMMON PROPER	TY CONSISTS OF:			c	Sarage		m²
	Swimming Pool					Carport		m²
	Tennis Court					Dpen Parking		m²
	Other					Store Room		m²
	Other				C	Garden		m²
	Other				0	Other		m²

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SECTION 5: MARKET INFORMATION:

If your property is currently on the market what is the asking price?	If your property has been on the market in the last 3 years what was the asking price?
R	R
Offer Received:	Offer Received;
R	
Name of Agent:	Tel No:

ale Transactions or 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: APPEAL 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 (ANNEXURE 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 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 OF THE MUNICIPAL VALUER OR THE APPEAL BOARD.

I / WE ______ HEREBY DECLARE THAT THE INFORMATION AND

PARTICULARS SUPPLIED ARE TRUE AND CORRECT.

SIGNED ON THE ____

___. 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:

Name of Municipal Valuer / Assista Municipal Valuer* *Delete whichever is not Applicable	nt :	Date:
SIGNATURE:		Date:

SECTION 9: NOTIFICATION OF OUTCOME:

	SIGNATURE	DATE
VALUATION ROLL ADJUSTED		
APPELANT NOTIFIED		
OWNER NOTIFIED		
SECTION 52 (1) (a) / (Where applicable)		

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