

OBJECTION NO: 

**THE MUNICIPAL MANAGER  
MANGAUNG LOCAL MUNICIPALITY**

**LODGING OF AN OBJECTION AGAINST A MATTER REFLECTED IN OR OMITTED FROM THE 13 TH SUPPLEMENTARY VALUATION  
ROLL FOR THE PERIOD 1 JULY 2022 UNTIL 30 JUNE 2026**

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

(Complete a separate form for each entry objected to)

|                         |                      |                              |                      |
|-------------------------|----------------------|------------------------------|----------------------|
| Erf / Portion / Unit No | <input type="text"/> | Suburb / Farm<br>Scheme Name | <input type="text"/> |
|                         |                      | Farm No                      | Reg Div              |

**SECTION 1: OBJECTOR INFORMATION**

**1.1 OBJECTOR IS THE OWNER**

|                               |                      |                                    |                           |
|-------------------------------|----------------------|------------------------------------|---------------------------|
| Registered Owner of Property: | <input type="text"/> |                                    |                           |
| Identity No:                  | <input type="text"/> | Company or C.C.<br>Registration no | <input type="text"/>      |
| Physical Address of<br>Owner  | <input type="text"/> |                                    | Code <input type="text"/> |
| Postal Address of<br>Owner    | <input type="text"/> |                                    | Code <input type="text"/> |
| Telephone No:<br>Home         | <input type="text"/> | Work                               | <input type="text"/>      |
| Cell No:                      | <input type="text"/> | Fax No:                            | <input type="text"/>      |
| E-mail Address                | <input type="text"/> |                                    |                           |

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

|                               |                      |                                 |                           |
|-------------------------------|----------------------|---------------------------------|---------------------------|
| Name of Objector              | <input type="text"/> |                                 |                           |
| Identity No:                  | <input type="text"/> | Company or C.C.<br>Registration | <input type="text"/>      |
| Postal Address of<br>Objector | <input type="text"/> |                                 | Code <input type="text"/> |
| Telephone No:<br>Home         | <input type="text"/> | Work                            | <input type="text"/>      |
| Cell No:                      | <input type="text"/> | Fax No:                         | <input type="text"/>      |
| E-mail Address                | <input type="text"/> |                                 |                           |

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

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

**1.3 AUTHORIZED REPRESENTATIVE OF THE OBJECTOR**

|                           |                      |         |                           |
|---------------------------|----------------------|---------|---------------------------|
| Name of<br>Representative | <input type="text"/> |         |                           |
| Postal Address            | <input type="text"/> |         | Code <input type="text"/> |
| Telephone No:<br>Home     | <input type="text"/> | Work    | <input type="text"/>      |
| Cell No:                  | <input type="text"/> | Fax No: | <input type="text"/>      |
| E-mail Address            | <input type="text"/> |         |                           |

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

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

**PLEASE COMPLETE THE BOTTOM OF EACH PAGE**

**(FOR SECTIONAL TITLES SEE SECTION 4)**

| Name of Bond Holder | Registered of Bond | Amount | (If applicable) |
|---------------------|--------------------|--------|-----------------|
|                     |                    |        |                 |

|                  |  |               |                |
|------------------|--|---------------|----------------|
|                  |  |               |                |
| Servitude No:    |  | Affected Area | m <sup>2</sup> |
| In Favour Of     |  |               |                |
| For What Purpose |  |               |                |

|                         |     |    |           |
|-------------------------|-----|----|-----------|
| Was Compensation Paid:  | Yes | No |           |
|                         |     |    |           |
| If Yes, Date of Payment |     |    | Amount: R |

**(Information under 3.1 to 3.4 to be supplied by means of Annexure as follows)**

| NAME OF<br>TENANT | SIZE<br>m² | RENTAL<br>(Exc! VAT) | ESCALATION<br>OF RENTAL | OTHER<br>CONTRIBUTION | TERM OF<br>LEASE | START DATE |
|-------------------|------------|----------------------|-------------------------|-----------------------|------------------|------------|
|-------------------|------------|----------------------|-------------------------|-----------------------|------------------|------------|

### 3.4 Building Size – Annexure D

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

|  |                |
|--|----------------|
|  | m <sup>2</sup> |
|--|----------------|

**OTHER FEATURES OF BUILDINGS (Provide Annexure E if necessary) :**

[illegible]

## 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     | M <sup>2</sup> | Other | M <sup>2</sup> |
| Offices   | M <sup>2</sup> | Other | M <sup>2</sup> |
| Factories | M <sup>2</sup> | Other | M <sup>2</sup> |

## TENANT AND RENT INFORMATION – ANNEXURE A

| Name of Tennant              | M <sup>2</sup> | Rental (excl VAT) | Escalation                     | Other Contribution | Term of Lease | Start Date     |
|------------------------------|----------------|-------------------|--------------------------------|--------------------|---------------|----------------|
| Monthly Levy                 | R              |                   | Details of Exclusive use Areas |                    |               |                |
| COMMON PROPERTY CONSISTS OF: |                |                   | Garage                         |                    |               | m <sup>2</sup> |
| Swimming Pool                |                |                   | Carport                        |                    |               | m <sup>2</sup> |
| Tennis Court                 |                |                   | Open Parking                   |                    |               | m <sup>2</sup> |
| Other                        |                |                   | Store Room                     |                    |               | m <sup>2</sup> |
| Other                        |                |                   | Garden                         |                    |               | m <sup>2</sup> |
| Other                        |                |                   | Other                          |                    |               | m <sup>2</sup> |

## SECTION 5: MARKET INFORMATION:

|   |   |
|---|---|
| If your property is currently on the market?<br>What is the asking price?<br>R<br>Offer Received: R | If your property has been on the market in the last 3 years<br>what was the asking price?<br>R<br>Offer 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 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 G CAN BE PROVIDED):

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

PLEASE COMPLETE THE BOTTOM OF EACH PAGE

**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.

SIGNED ON THE \_\_\_\_\_ SIGNATURE: \_\_\_\_\_

**OFFICIAL USE****SECTION 8: DECISION OF THE 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:**


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Name of Municipal Valuer / Assistant

Municipal Valuer\* : \_\_\_\_\_

Date: \_\_\_\_\_

*\*Delete whichever is not Applicable*

SIGNATURE: \_\_\_\_\_

Date: \_\_\_\_\_

**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 BOTTOM OF EACH PAGE