

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 TO 30 JUNE 2026**

DESCRIPTION OF PROPERTY IN RESPECT OF WHICH THE OBJECTION IS MADE:
(Complete a separate form for each entry objected to)

Holding / Portion No	<input type="text"/>	Agricultural Holding / Farm	<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. Registration	<input type="text"/>
Physical Address of Owner	<input type="text"/>	Code	<input type="text"/>
Postal Address of Owner	<input type="text"/>	Code	<input type="text"/>
Telephone No: 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. Registration	<input type="text"/>
Postal Address of Objector	<input type="text"/>	Code	<input type="text"/>
Telephone No: 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.)

1.3 AUTHORIZED REPRESENTATIVE OF THE OBJECTOR

Name of Representative	<input type="text"/>		
Postal Address	<input type="text"/>	Code	<input type="text"/>
Telephone No: 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: Portion/Holding No Farm / Holding
PLEASE COMPLETE THE BOTTOM OF EACH PAGE

SECTION 2: PROPERTY DETAILS

(FOR SECTIONAL TITLES SEE SECTION 4)

Physical Address (if available) Code Extent of Property m²Municipal Account Number Name of Bond Holder Registered Amount of Bond (If applicable)

PROVIDE FULL DETAILS OF ALL SERVITUDES, ROAD PROCLAMATIONS OR OTHER ENDORSEMENTS AGAINST THE PROPERTY (If applicable)

Servitude No:		Affected Area	m ²
In Favour Of			
For What Purpose			

Was Compensation Paid:	Yes	No
	<input type="text"/>	<input type="text"/>

If Yes, Date of Payment Amount: R

SECTION 3: DESCRIPTION OF BUILDINGS

3.1 MAIN DWELLING ON FARM / HOLDING
(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	Size of main dwelling M ²		
Other				Other			

3.2 OTHER BUILDINGS

BUILDING NO	DESCRIPTION	SIZE m ²	CONDITION	IS THE BUILDING FUNCTIONAL
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3.3 IS ANY PORTION OF THE PROPERTY USED FOR ANY PURPOSE OTHER THAN AGRICULTURAL?
(e.g. business, mining, eco-tourism, trading in or hunting of game)

Tick

Yes	No	If Yes, describe the use(s)	
<input type="text"/>	<input type="text"/>	If necessary provide Annexure B	

3.4 LAND USE ANALYSIS:

Non Agricultural (Refer to 3.3)	ha
Grazing	ha
Under Irrigation	ha
Dry Land	ha
Permanent Crops	ha
Other	ha
Other	ha
Other	ha
TOTAL	ha

Conditions of Fences	Good	Average	Poor
	<input type="text"/>	<input type="text"/>	<input type="text"/>
Area Game Fenced	ha		
No of Borehole(s)	<input type="text"/>	Output Liters / hour	<input type="text"/>
No of Dam(s)	<input type="text"/>	Capacity	<input type="text"/>
Is the Property exposed to a river?			
Yes	<input type="text"/>	No	<input type="text"/>
	<input type="text"/>		<input type="text"/>
	<input type="text"/>		<input type="text"/>

Complete: Portion / Holding No Farm / Holding
PLEASE COMPLETE THE BOTTOM OF EACH PAGE

3.5 OTHER:

Is your Property affected by a land claim?

YES

NO

If yes:

Date of Claim

Gazette Number

Do you have water rights?

Yes

No

If Yes, Details:

Have you applied for a rezoning or consent use? (e.g. Guest House, business etc)

Yes

No

If Yes, Details:

Has your agricultural holdings property been excised?

Yes

No

If Yes, Full Details:

Has the township been applied for or Proclaimed?

Yes

No

If Yes, Full Details:

TENANT AND RENT INFORMATION – Annexure C

Name of Tenant	Size	Rental (Excl VAT)	Escalation	Other Contributions	Term of Lease	Start date	Use
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SECTION 4: MARKET INFORMATION:

If your property is currently on the market what is the asking price?
R
Offer Received:
R

If your property has been on the market in the last 3 years what was the asking price?
R
Offer Received:

Name of Agent:	
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Tel No:	
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Sale Transactions used by the objector in determining the market value of property objected to (If insufficient space provide Annexure D)

Holding/Portion No	Agricultural holding / farm	Date of Sale	Selling Price

SECTION 5: OBJECTION DETAILS

	Particulars As Reflected In The Valuation Roll	Changes Requested By Objector
Description of the Property / Unit No		
Category		
Physical Address		
Extent		
Market Value		
Name of Owner		

ADVERSE FEATURES AND / OR FURTHER REASONS IN SUPPORT OF THIS OBJECTION (ANNEXURE E CAN BE PROVIDED):

Complete: Portion / Holding No Farm / Holding

PLEASE COMPLETE THE BOTTOM OF EACH PAGE

SECTION 6: 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 FUNCTION 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 7: DECISION OF THE MUNICIPAL MANAGER

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*

Date: _____

SIGNATURE: _____

Date: _____

SECTION 8: NOTIFICATION OF OUTCOME:

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

Complete: Portion / Holding No Farm / Holding

PLEASE COMPLETE THE BOTTOM OF EACH PAGE