#### OBJECTION NO.

**THE MUNICIPAL MANAGER**

**PRINCE ALBERT MUNICIPALITY**

**LODGING OF AN OBJECTION AGAINST A MATTER REFLECTED IN OR OMITTED FROM THE GENERAL VALUATION ROLL FOR THE PERIOD 1 JULY 2017 TO 30 JUNE 2021**

**(COMPLETE A SEPARATE FORM FOR EACH ENTRY OBJECTED TO)**

**SUBURB/**

**ERF/UNIT NO. SCHEME NAME**

**SECTION 1: OBJECTOR INFORMATION**

* 1. **OBJECTOR IS THE OWNER**

REGISTERED OWNER OF PROPERTY IDENTITY NO.

COMPANY OR C.C. REGISTRATION NO.

PHYSICAL ADDRESS OF OWNER

POSTAL ADDRESS OF OWNER

( )

CODE

CODE

( )

TELEPHONE NO.:

HOME

WORK

CELL FAX NO.

( )

E-MAIL ADDRESS

#### 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)

#### 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……………………………………………..**

#### PLEASE COMPLETE THE BOTTOM OF EACH PAGE

PHYSICAL ADDRESS CODE

EXTENT OF

PROPERTY m²

MUNICIPAL ACCOUNT NO.

(If available)

( If applicable)

|  |  |
| --- | --- |
| NAME OF BOND HOLDER | REGISTERED AMOUNT OF BOND |
|  |  |

PROVIDE FULL DETAILS OF ALL SERVITUDES, ROAD PROCLAMATIONS OR OTHER ENDORSEMENTS

AGAINST THE PROPERTY (If applicable)

AFFECTED AREA

m2

SERVITUDE NO. IN FAVOUR OF

FOR WHAT PURPOSE

WAS COMPENSATION PAID

**YES**

**NO**

R

#### IF YES:-

DATE OF PAYMENT AMOUNT

**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 |  | NO. OF BATHROOMS |  | KITCHEN |  | LOUNGE |  |
| DINING ROOM |  | LOUNGE WITH DINING ROOM |  | STUDY |  |  |  |
| PLAYROOM |
| TELEVISION ROOM |  | LAUNDRY |  | SEPARATE TOILET |  |
| OTHER |  | OTHER |  |
| OTHER |  | OTHER |  |

**OUTBUILDINGS**

m2

|  |  |
| --- | --- |
| NO. OF GARAGES |  |
| GRANNY FLAT/ROOMS |  |
| OTHER |  |

|  |  |
| --- | --- |
| SIZE OF MAIN DWELLING |  |
| SIZE OF OUTBUILDING |  |
| SIZE OF OTHER BUILDINGS |  |
| **TOTAL BUILDING SIZE** |  |

m2

m2

#### OTHER BUILDINGS (ATTACH ANNEXURE) m2

OTHER:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| SWIMMING POOL |  | TENNIS COURT |  |  |
| BORE HOLE |  | GARDEN | GOOD | AVERAGE | POOR |
|  |  |  |
| OTHER |  | OTHER |  |  |

FENCING:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | FRONT | BACK | SIDE 1 | SIDE 2 |
| TYPE |  |  |  |  |
| HEIGHT |  |  |  |  |

DRIVE WAY: (e.g. Bricks, pavers) Tick ❒

|  |  |
| --- | --- |
| YES | NO |
|  |  |

A BOOMED AREA OR SECURITY VILLAGE?

OTHER FEATURES:

GENERAL CONDITION OF PROPERTY: (Tick ❒ )

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| GOOD |  | AVERAGE |  | POOR |  |

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

#### PLEASE COMPLETE THE BOTTOM OF EACH PAGE

**SECTION 4: SECTIONAL TITLE UNITS**

SCHEME

NO.

NAME OF SCHEME

FLAT NO./

DOOR NO. UNIT SIZE

m2

NAME OF MANAGING AGENT

#### INDICATE NUMBER OR STATE YES/NO IN APPROPRITE BOX

TEL NO.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 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 |  |

DETAILS OF EXCLUSIVE USE AREAS

R

MONTHLY LEVY

#### COMMON PROPERTY CONSISTS OF: m²

|  |  |
| --- | --- |
| GARAGE |  |
| CARPORT |  |
| OPEN PARKING |  |
| STORE ROOM |  |
| GARDEN |  |
| OTHER |  |

m²

|  |  |
| --- | --- |
| SWIMMING POOL |  |
| TENNIS COURT |  |
| OTHER |  |
| OTHER |  |
| OTHER |  |

m²

m²

m²

m²

**SECTION 5: MARKET INFORMATION**

IF YOUR PROPERTY IS CURRENTLY ON THE MARKET IF YOUR PROPERTY HAS BEEN ON THE MARKET IN WHAT IS THE ASKING PRICE? THE LAST 3 YEARS WHAT WAS THE ASKING PRICE?

R

R

OFFER RECEIVED

R

OFFER RECEIVED

NAME OF AGENT: TEL NO.

R

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……………………………………………..

#### 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 ODER 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 APPEAL BOARD.

I / WE HEREBY DECLARE THAT THE INFORMATION AND PARTICULARS SUPPLIED ARE TRUE AND CORRECT.

DATE: SIGNATURE

**OFFICIAL USE**

|  |  |  |
| --- | --- | --- |
| YEAR | MONTH | DAY |
|  |  |  |

**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\*

|  |  |  |
| --- | --- | --- |
| YEAR | MONTH | DAY |
|  |  |  |

***\*Delete whichever is not applicable*** DATE

SIGNATURE:

### 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 BOTOM OF EACH PAGE