

OBJECTION NO:

THE MUNICIPAL MANAGER  
MOGALE CITY LOCAL MUNICIPALITY

LODGING OF A QUERY AGAINST A MATTER REFLECTED IN OR OMITTED FROM THE SUPPLEMENTAARY VALUATION ROLL 7 FOR THE PERIOD 1 JULY 2024 TO 30 JUNE 2025

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

(Complete a separate form for each entry objected to)

Erf / Unit No Scheme Name  Suburb /

**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 Fax No:	<input type="text"/>
Cell No:	<input type="text"/>		<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 Fax No:	<input type="text"/>
Cell No:	<input type="text"/>		<input type="text"/>
E-mail Address	<input type="text"/>		
STATUS OF OBJECTOR (e.g. Tenant, Pending)	<input type="text"/>		

<input type="text"/>	Code	<input type="text"/>
<input type="text"/>	Work	<input type="text"/>
<input type="text"/>	Fax No:	<input type="text"/>
<input type="text"/>		

Purchaser, Municipality, etc.) 1.3

**AUTHORIZED REPRESENTATIVE OF THE OBJECTOR**

Name of Representative

Postal Address of Owner  
Telephone No: Home

Cell No:

E-mail Address

**\*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**

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

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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 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)

Was Compensation Paid:	Yes	No
	<input style="width: 30px; height: 20px;" type="text"/>	<input style="width: 30px; height: 20px;" type="text"/>
If Yes, Date of Payment	<input style="width: 180px; height: 20px;" type="text"/>	

R <input style="width: 100px; height: 20px;" type="text"/>		
Servitude No:	<input style="width: 250px; height: 20px;" type="text"/>	Affected Area <input style="width: 100px; height: 20px;" type="text"/> m <sup>2</sup>
In Favour Of	<input style="width: 580px; height: 20px;" type="text"/>	
For What Purpose	<input style="width: 580px; height: 20px;" type="text"/>	

Amount:

**SECTION 3: DESCRIPTION OF RESIDENTIAL DWELLING (FOR SECTIONAL TITLES SEE SECTION 4)**  
(Indicate number or state Yes/No in appropriate box) Main Dwelling

Size of Dwelling	m <sup>2</sup>
Size of Outbuilding	m <sup>2</sup>
Size of Other Buildings	m <sup>2</sup>
Total Building Size	m <sup>2</sup>

No of Garages			
Granny Flat/Rooms			
Other			
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**

**OTHER OUTBUILDINGS (ATTACH ANNEXURE)**

OTHER	Swimming Pool		Tennis Courts			
				Good	Average	Poor
FENCING	Bore Hole		Garden			
	Other		Other			
		Front	Back	Side 1	Side 2	
	Type					
	Height					

DRIVE WAY (e.g. Bricks, Pavers etc)

(Tick)

		Yes	No
Is your property situated in a boomed or security area			

OTHER FEATURES:  
GENERAL CONDITION OF PROPERTY

(Tick)

GOOD	AVERAGE	POOR
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Complete: Erf/Unit No ..... Area/Scheme Name .....

**PLEASE COMPLETE THE BOTTOM OF EACH PAGE**

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

**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 <input style="width: 100px;" type="text"/>		Detail of Exclusive use Areas
COMMON PROPERTY CONSISTS OF:			
Swimming Pool			Garage
Tennis Court			Carport
Other			Open Parking
Other			Store Room
Other			Garden
Other			Other

**SECTION 5: MARKET INFORMATION:**

<p>If your property is currently on the market what is the asking price?</p> <p>R <input style="width: 100px;" type="text"/></p> <p>Offer Received:</p> <p>R <input style="width: 100px;" type="text"/></p> <p>Name of Agent: <input style="width: 150px;" type="text"/></p>	<p>If your property has been on the market in the last 3 years what was the asking price?</p> <p>R <input style="width: 100px;" type="text"/></p> <p>Offer Received:</p> <p>R <input style="width: 100px;" type="text"/></p> <p>Tel No: <input style="width: 100px;" type="text"/></p>
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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**

Description of the Property / Unit No	Particulars As Reflected In The Valuation Roll	Changes Requested By Objector
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):

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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.

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	

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
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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**