CONFIRMATION OF PERSONAL DETAILS FOR MUNICIPAL ACCOUNT AND AMOUNT OWING

Surname _____

Full Name(s) _____

ID Number: _____

Ward: _____

ERF Number _____

Street: _____

Township _____

Town _____

Telephone Number: _____

Facsimile Number: _____

Amount Owing R _____

This part should only be filled in and singed by the Owner.

é .é é é é é é é é .hereby certify that the information supplied is

Signature: -

Date: _____

DATE STAMP OF THE MUNICIPALITY

FOR OFFICE USE

Name: _____

ID No: _____

Signature: