



The completed objection forms must be returned to the following address PO Box 64, Lady brand 9745, or hand delivered to Mantsopa Municipal offices Lady brand, Manyatseng, Hobhouse, Twee spruit, Thabapatchoa and Excelsior Municipal Offices and Mantsopa Libraries.

# **Form A: Single Residential (Full title and sectional title used for residential purposes)**

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

OBJECTION NO.

### **THE MUNICIPAL MANAGER**

Mantsopa Local Municipality

### **LODGING OF AN OBJECTION AGAINST A MATTER REFLECTED IN OR OMITTED FROM THE VALUATION**

ROLL\* FOR THE PERIOD 23 March 2023 to 12 May 2023.

\*Delete whichever is not applicable

(COMPLETE A SEPARATE FORM FOR EACH ENTRY OBJECTED TO)

ERF/UNIT NO.  SUBURB/ SCHEME NAME

### **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 NO.	<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	<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 NO.	<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	<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 AUTHORISED 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	<input type="text"/>	FAX NO.	<input type="text"/>
E-MAIL ADDRESS	<input type="text"/>		

\* IF A REPRESENTATIVE IS APPOINTED, PROOF OF AUTHORISATION MUST BE ATTACHED Complete:

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

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

**PLEASE COMPLETE BOTTOM OF EACH PAGE**

# Form A: Single Residential (Full title and sectional title used for residential purposes)

## SECTION 2: PROPERTY DETAILS

(FOR SECTIONAL TITLE SEE SECTION 4)

PHYSICAL ADDRESS

CODE

EXTENT OF  
PROPERTY

MUNICIPAL ACCOUNT  
NO.

(If available)

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<sup>2</sup>

IN FAVOUR OF

FOR WHAT PURPOSE

WAS COMPENSATION PAID  
IF YES:-

YES NO

DATE OF PAYMENT

AMOUNT

R

## 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

NO. OF GARAGES	
GRANNY FLAT/ROOMS	
OTHER	

SIZE OF MAIN 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>

### OTHER BUILDINGS (ATTACH ANNEXURE)

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)

IS YOUR PROPERTY SITUATED IN  
A BOOMED AREA OR SECURITY

Tick

YES	NO

OTHER FEATURES:

  

GENERAL CONDITION OF PROPERTY:

(Tick )

GOOD		AVERAGE		POOR	
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Complete: Erf/Unit No. ....

Suburb/Scheme Name

**PLEASE COMPLETE BOTTOM OF EACH PAGE**

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## 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	
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COMMON PROPERTY CONSISTS OF:

SWIMMING POOL	
TENNIS COURT	
OTHER	
OTHER	
OTHER	

DETAILS OF EXCLUSIVE USE AREAS

GARAGE	
CARPORT	
OPEN PARKING	
STORE ROOM	
GARDEN	
OTHER	

## SECTION 5: MARKET INFORMATION

IF YOUR PROPERTY IS CURRENTLY ON THE MARKET WHAT IS THE ASKING PRICE?

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

R	
---	--

OFFER RECEIVED

R	
---	--

OFFER RECEIVED

R	
---	--

NAME OF AGENT:

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TEL NO.

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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

	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)

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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 AND ORDER AS TO COSTS IN TERMS OF SECTION 70 OF THE ACT IF THE APPEAL BOARD IS OF THE VIEW THAT THE FAILURE TO DO SO HAVE PROVIDED ANY SUCH DOCUMENT, INFORMATION OR PARTICULARS HAS PLACED AN UNNECESSARY BURDEN ON THE FUNCTIONSOFTHE MUNICIPAL VALUER OR APPEAL BOARD.

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

DATE:

YEAR	MONTH	DAY

SIGNATURE \_\_\_\_\_

## OFFICIAL USE

### 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\*

*\*Delete whichever is not applicable*

SIGNATURE:


DATE

YEAR	MONTH	DAY

### SECTION 9: NOTIFICATION OF OUTCOME

VALUATION ROLL ADJUSTED

OBJECTOR NOTIFIED

OWNER NOTIFIED

SECTION 52(1)(a)  
WHERE APPLICABLE

SIGNATURE	DATE