



BELA BELA MUNICIPALITY

FORM C: AGRICULTURAL HOLDINGS OR FARMS

| | |
|----------------|-----|
| ACCOUNT NUMBER | PIN |
|----------------|-----|

THE MUNICIPAL MANAGER
BELA BELA MUNICIPALITY

LODGING OF AN OBJECTION AGAINST THE DECISION OF THE MUNICIPAL VALUER REGARDING MATTERS PERTAINING TO SPECIFIC PROPERTY AS REFLECTED IN OR OMITTED FROM THE VALUATION ROLL/SUPPLEMENTARY VALUATION ROLL FOR THE PERIOD **1 JULY 2012 TO 30 JUNE 2016**

Notes for Completing this Form:

1. Complete a separate form for each property objected to.
2. In the case of Sectional Titles, a form must be completed for each section objected to.
3. Delete whichever is not applicable.
4. All sections shaded in grey are mandatory, and must be completed to be a valid objection form.
5. For market value related objections, Section 5 must be completed in full, and all supporting Annexures provided.

SECTION 1: OBJECTOR INFORMATION

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

| | | | |
|------------------------------|---------------------|-------------------------------------|-----------------------------|
| ERF/ FARM/ SECTION NUMBER | PORTION | TOWNSHIP NAME/SCHEME NAME/FARM NAME | TOWNSHIP EXT / SCHEME NO |
| ERF EXTENT/ UNIT SIZE | FLAT NO/ DOOR NO | PHYSICAL ADDRESS | |
| M ² | | | |

1.1 OBJECTOR DETAILS (Please mark the appropriate box with a X)

| | | | | | | | |
|--|--------------------------|----------------------------|--------------------------|----------------------------------|--------------------------|-------|--------------------------|
| OWNER | <input type="checkbox"/> | REPRESENTATIVE OR AGENT | <input type="checkbox"/> | MUNICIPALITY | <input type="checkbox"/> | OTHER | <input type="checkbox"/> |
| NAME OF OBJECTOR | | | | | | | |
| IDENTITY NO. | | | | COMPANY OR CC REGISTRATION NO | | | |
| POSTAL ADDRESS OF OBJECTOR | | | | | | CODE | |
| TELEPHONE NO | HOME | | | WORK | | | |
| | CELL | | | FAX | | | |
| E-MAIL ADDRESS (if available) | | | | | | | |
| STATUS OF OBJECTOR e.g. Tenant, Pending Purchaser, Municipality, Representative | | | | | | | |

If a representative is appointed, then proof of such authorization from the Owner must be attached.

SECTION 2: OBJECTION DETAILS

At least one of the following must be completed to be a valid objection. In the case of Market Value objections, the objector **MUST** provide the requested change.

| OBJECTION TYPE | PARTICULARS AS REFLECTED IN THE VALUATION ROLL | CHANGES REQUESTED BY OBJECTOR |
|------------------------------------|---|-------------------------------|
| DESCRIPTION OF THE PROPERTY | | |
| CATEGORY | | |
| PHYSICAL ADDRESS/DOOR NO./FLAT NO. | | |
| EXTENT | | |
| MARKET VALUE | | |
| NAME OF OWNER | | |

SECTION 3: 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 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.

Date

Name (Print)

Signature



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SECTION 4: PROPERTY DETAILS

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

(If applicable)

PROVIDE FULL DETAILS OF ALL SERVITUDES, ROADS 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 | AMOUNT | R |
|----------------------------|-----|----|--------|---|
| IF YES: DATE OF PAYMENT | | | | |

SECTION 5: DESCRIPTION OF PROPERTY

(INDICATE NUMBER OR STATE YES/NO IN APPROPRIATE BOX)

5.1 DESCRIPTION OF RESIDENTIAL DWELLING (FOR SECTIONAL TITLE COMPLETE SECTION 4)

| | | | | | | | |
|-----------------|--|--------------------------|--|-----------------|--|----------|--|
| NO. OF BEDROOMS | | NO. OF BATHROOMS | | KITCHEN | | LOUNGE | |
| DINING ROOM | | LOUNGE WITH DINNING ROOM | | STUDY | | PLAYROOM | |
| TELEVISION ROOM | | LAUNDRY | | SEPARATE TOILET | | | |
| OTHER | | | SIZE OF MAIN DWELLING (M ²) | | | | |

5.2 OTHER BUILDINGS – ATTACH AS ANNEXURE A

| BUILDING NO. | DESCRIPTION | SIZE M2 | CONDITION | IS THE BUILDING FUNCTIONAL |
|--------------|-------------|---------|-----------|----------------------------|
| | | | | |

5.3 IS ANY PORTION OF THE PROPERTY USED FOR ANY PURPOSE OTHER THAN AGRICULTURE? (E.G. Business, mining, eco-tourism, trading in or hunting game)

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

IF YES – DESCRIBE THE USE(S) _____

IF NECESSARY PROVIDE ANNEXURE B _____

5.4 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 |

| CONDITION OF FENCES | | |
|---------------------|---------|------|
| GOOD | AVERAGE | POOR |
| | | |
| AREA GAME FENCED | Ha | |

| | |
|---------------------|--|
| NUMBER OF BOREHOLES | |
| OUTPUT LITRES/HOUR | |
| DAMS | |
| CAPACITY | |

| IS THE PROPERTY EXPOSED TO A RIVER? | | | |
|-------------------------------------|--|----|--|
| YES | | NO | |
| | | | |



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5.5 OTHER

| | | | | |
|--|-----|--|----|--|
| IS YOUR PROPERTY AFFECTED BY A LAND CLAIM? | YES | | NO | |
|--|-----|--|----|--|

| | | |
|----------|---------------|--|
| IF YES:- | DATE OF CLAIM | |
| | GAZETTE NO. | |

| | | | | |
|----------------------------|-----|--|----|--|
| DO YOU HAVE WATER RIGHTS ? | YES | | NO | |
|----------------------------|-----|--|----|--|

IF YES:- PROVIDE DETAILS _____

| | | | | |
|--|-----|--|----|--|
| HAVE YOU APPLIED FOR REZONING OR CONSENT USE? CONSENT USE e.g. guest houses, business etc. | YES | | NO | |
|--|-----|--|----|--|

IF YES:- PROVIDE 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:- NEW FARM DESCRIPTION _____

TENANT AND RENT INFORMATION – ANNEXURE C

| NAME OF TENANT | SIZE | RENTAL EXCL VAT) | ESCALATION | OTHER CONTRIBUTIONS | TERM OF LEASE | START DATE | USE |
|----------------|------|------------------|------------|---------------------|---------------|------------|-----|
|----------------|------|------------------|------------|---------------------|---------------|------------|-----|

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

SECTION 6: MARKET INFORMATION

IF YOUR PROPERTY IS CURRENTLY ON THE MARKET

| | |
|---------------------------|---|
| WHAT IS THE ASKING PRICE? | R |
| OFFER RECEIVED | R |
| NAME OF AGENT | |

IF YOUR PROPERTY HAS BEEN ON THE MARKET THE LAST 3 YEARS

| | |
|----------------------------|---|
| WHAT WAS THE ASKING PRICE? | R |
| OFFER RECEIVED | R |
| TEL NO | |

SALE TRANSACTIONS (OF OTHER PROPERTIES IN THE VICINITY) USED BY THE OBJECTOR IN DETERMINING THE MARKET VALUE OF PROPERTY OBJECTED TO

NB – For Market Value Objections, at least one Comparable Sale must be provided as EVIDENCE

| ERF/UNIT NO | SUBURB/SCHEME NAME | DATE OF SALE | SELLING PRICE |
|-------------|--------------------|--------------|---------------|
| | | | |
| | | | |
| | | | |
| | | | |



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SECTION 7: DECISION OF THE MUNICIPAL VALUER (FOR OFFICIAL USE ONLY)

| | |
|--------------------------------------|--|
| 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 THE MUNICIPAL VALUER / ASSISTANT MUNICIPAL VALUER | |
| SIGNATURE | |

SECTION 9: NOTIFICATION OF OUTCOME

| | SIGNATURE | DATE |
|------------------------------------|-----------|------|
| VALUATION ROLL ADJUSTED | | |
| OBJECTOR NOTIFIED | | |
| OWNER NOTIFIED | | |
| SECTION 52 (1)(a) WHERE APPLICABLE | | |

DATE

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