



BELA BELA LOCAL MUNICIPALITY

- Chris Hani Drive, Bela-Bela
- Private Bag X1609, BELA-BELA, 0480

FORM C: AGRICULTURAL HOLDINGS OR FARMS

Objection No.

GENERAL VALUATION ROLL 2022 - 2027

OBJECTION FORM

FARM NO..... FARM NAME.....

PORTION NO..... REGISTRATION DIVISION.....

Reason for query.....

Registered Owner of Property					
Identity No.		Company or c.c Registration No.			
Physical Address the Owner				Code	
Postal Address of Owner				Code	
Telephone No.	Home		Work		
	Cell		Fax		
E-Mail Address					

PROPERTY DETAILS:

PHYSICAL ADDRESS

CODE:

EXTENT OF PROPERTY

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MUNICIPAL ACCOUNT NO

INDICATE NUMBER OR STATE YES/NO IN APPROPRIATE BOX

No. of Bedrooms		No. of Bathrooms		Kitchen		Lounge	
Dining Room		Lounge/ Dining Room		Study		Playroom	
Television Room		Laundry		Separate Toilet			
Other				Other			
Other				Other			

Swimming Pool		Dwelling	M²
Tennis Court		Garage	M²
Other		Carport	M²
Other		Other	M²

OTHER BUILDINGS – ATTACH AS ANNEXURE A

BUILDING NO.	DESCRIPTION	SIZE M2	CONDITION	IS THE BUILDING FUNCTIONAL
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**IS ANY 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

LAND USE ANALYSIS

CONDITION OF FENCES		
GOOD	AVERAGE	POOR
AREA GAME FENCED		Ha

NON AGRICULTURAL	Ha
GRAZING	Ha
UNDER IRRIGATION	Ha
DRY LAND	Ha
PERMANENT CROPS	Ha
OTHER	Ha
OTHER	Ha
OTHER	Ha
TOTAL	Ha

NUMBER OF BOREHOLES	
OUTPUT LITRES/HOUR	
DAMS	
CAPACITY	

IS THERE PROPERTY EXPOSED TO A RIVER?			
YES		NO	

SALE TRANSACTIONS (OF OTHER PROPERTIES IN THE VICINITY) USED BY THE OBJECTOR IN DETERMINING THE MARKET VALUE OF PROPERTY OBJECTED TO (IF INSUFFICIENT SPACE PROVED ANNEXURE D)

HOLDING/PORCION NO.	AGRICULTURAL HOLDING/FARM	DATE OF SALE	SELLING PRICE

Query Details	Particulars as reflected in the Valuation Roll	Changes Requested
Description of the Property No.		
Extent		
Market Value		
Category		
Name of Owner		

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

I, FULL NAME:

SIGNATURE:

DATE:

HEREBY DECLARE THAT THE INFORMATION AND PARTICULARS SUPPLIED ARE TRUE AND CORRECT TO OUR/ MY KNOWLEDGE

(To be filled by the Municipal Valuer)

Name of a Municipal Valuer

Signature of Valuer

Date