

FORM C: AGRICULTURAL HOLDINGS OR FARMS



UMZUMBE MUNICIPALITY

Enquiries: The Debtors Department

Tel : 039 972 0005

Office of the Chief Financial Officer

THE MUNICIPAL MANAGER

OBJECTION NO. _____

UMZUMBE MUNICIPALITY : LODGING OF AN OBJECTION AGAINST A MATTER REFLECTED IN OR OMITTED FROM THE VALUATION ROLL FOR THE PERIOD 1 JULY 2018 TO 30 JUNE 2023

DESCRIPTION OF PROPERTY IN RESPECT OF WHICH THE OBJECTION IS MADE
(COMPLETE A SEPARATE FORM FOR EACH ENTRY OBJECTED TO)

PORTION NO. _____ FARM NAME _____ FARM NO. _____ REG DIV. _____

SECTION 1: OBJECTOR INFORMATION

1.1. OBJECTOR IS THE OWNER

REGISTERED OWNER OF PROPERTY : _____

IDENTITY NO. _____ COMPANY OR C.C. REGISTRATION NO. _____

PHYSICAL ADDRESS OF OWNER _____ CODE _____

POSTAL ADDRESS OF OWNER _____ CODE _____

TELEPHONE NO. HOME : (____) _____ WORK : (____) _____

CELL NO. _____ FAX NO : (____) _____

E-MAIL ADDRESS: _____

1.2. OBJECTOR IS NOT THE OWNER OR MUNICIPALITY IS THE OBJECTOR

NAME OF OBJECTOR _____

IDENTITY NO. _____ COMPANY OR C.C. REGISTRATION NO. _____

PHYSICAL ADDRESS OF OBJECTOR _____ CODE _____

POSTAL ADDRESS OF OBJECTOR _____ CODE _____

TELEPHONE NO. HOME : (____) _____ WORK : (____) _____

CELL NO. _____ FAX NO : (____) _____

E-MAIL ADDRESS: _____

STATUS OF OBJECTOR (e.g. Tenant, Pending Purchaser, Municipality etc. : _____

1.3. AUTHORISED REPRESENTATIVE OF THE OBJECTOR

NAME OF REPRESENTATIVE _____

POSTAL ADDRESS _____ CODE _____

TELEPHONE NO. HOME : (____) _____ WORK : (____) _____

CELL NO. _____ FAX NO : (____) _____

E-MAIL ADDRESS: _____

- IF A REPRESENTATIVE IS APPOINTED, PROOF OF AUTHORISATION MUST BE ATTACHED.

Portion/Holding No. _____ Farm/Holding No. _____

PLEASE COMPLETE THE BOTTOM OF EACH PAGE

FORM C: AGRICULTURAL HOLDINGS OR FARMS

SECTION 2: PROPERTY DETAILS

PHYSICAL ADDRESS: _____ CODE: _____

(IF AVAILABLE)

EXTENT OF PROPERTY: _____ m²

MUNICIPAL ACCOUNT NO. : _____ (If available)

NAME OF BOND HOLDER : _____ (If applicable)

REGISTERED AMOUNT OF BOND : R _____

PROVIDE FULL DETAILS OF ALL SERVITUDES, ROAD PROCLAMATIONS OR OTHER ENDORSEMENTS AGAINST THE PROPERTY (If applicable)

SERVITUDE NO. : _____ , _____ , _____ , _____ AFFECTED AREA : _____ m²

IN FAVOUR OF _____

FOR WHAT PURPOSE : _____

WAS COMPENSATION PAID? Tick (✓) YES NO

IF YES:

DATE OF PAYMENT _____ AMOUNT R _____

SECTION 3: DESCRIPTION OF BUILDINGS AND LAND USE

3.1. MAIN DWELLING ON FARM (INDICATE NUMBER OF 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 _____

OUTBUILDINGS : _____ SIZE OF MAIN DWELLING : _____ m²

NO. OF GARAGES _____ NO. OF CARPORTS : _____

GRANNY FLAT _____ SIZE : _____ m²

SERVANT QUARTERS _____ SIZE : _____ m²

OTHER (RESIDENTIAL) _____ SIZE : _____ m²

3.2. OTHER BUILDINGS – ATTACH AS ANNEXURE A

BUILDING NO.	DESCRIPTION	SIZE m ²	IS THE BUILDING FUNCTIONAL / CONDITION
--------------	-------------	---------------------	--

3.3. IS ANY PORTION OF THE PROPERTY USED FOR ANY PURPOSE OTHER THAN AGRICULTURAL?

(e.g. Business, mining, eco-tourism, trading in or hunting of game)

Tick (✓) YES NO IF YES – DESCRIBE THE USE(S) _____

IF NECESSARY PROVIDE ANNEXURE B

Portion/Holding No. _____

Farm/Holding No. _____

PLEASE COMPLETE THE BOTTOM OF EACH PAGE

FORM C: AGRICULTURAL HOLDINGS OR FARMS

LAND USE ANALYSIS:

NON AGRICULTURAL (REFER TO 3.3.)	_____ ha	CONDITION OF FENCES GOOD AVERAGE POOR
GRAZING	_____ ha	AREA GAME FENCED _____ ha
UNDER IRRIGATION	_____ ha	NUMBER OF BOREHOLES _____
DRY LAND	_____ ha	OUTPUT _____ LITRES/HOUR
PERMANENT CROPS	_____ ha	
OTHER	_____ ha	DAMS _____
OTHER	_____ ha	CAPACITY _____
OTHER	_____ ha	IS THE PROPERTY EXPOSED TO A RIVER?
TOTAL	_____ ha	YES _____ NO _____

3.4. OTHER INFORMATION

IS YOUR PROPERTY AFFECTED BY A LAND CLAIM? Tick (✓) YES NO IF YES – DATE OF CLAIM _____
GAZETTE NO. _____

DO YOU HAVE WATER RIGHTS? Tick (✓) YES NO IF YES: DETAILS _____

HAVE YOU APPLIED FOR A REZONING OR CONSENT USE? e.g. as guest house, business etc. Tick (✓) YES NO

IF YES: DETAILS _____

HAS YOUR AGRICULTURAL HOLDINGS PROPERTY BEEN EXCISED? Tick (✓) YES NO

IF YES: NEW FARM DESCRIPTION _____

HAS A TOWNSHIP BEEN APPLIED FOR OR PROCLAIMED? Tick (✓) YES NO IF YES: DETAILS _____

TENANT AND RENT INFORMATION – ANNEXURE C

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

SECTION 4: MARKET INFORMATION

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

OFFER RECEIVED R _____ OFFER RECEIVED R _____

NAME OF AGENT _____ TEL. NO. (_____) _____

SALE TRANSACTIONS USED BY THE OBJECTOR IN DETERMINING THE MARKET VALUE OF THE PROPERTY OBJECTED TO
(IF INSUFFICIENT SPACE - PROVIDE ANNEXURE D)

PORTION NO.	ERF/ UNIT NO.	TOWNSHIP/ FARM NO/ SCHEME NAME	DATE OF SALE	YEAR/MONTH/DAY	SELLING PRICE
_____	_____	_____	____/____/____	____/____/____	_____
_____	_____	_____	____/____/____	____/____/____	_____
_____	_____	_____	____/____/____	____/____/____	_____

SECTION 5: OBJECTION DETAILS

PARTICULARS AS REFLECTED

CHANGES REQUESTED BY OBJECTOR

Portion/Holding No. _____

Farm/Holding No. _____

PLEASE COMPLETE THE BOTTOM OF EACH PAGE

FORM C: AGRICULTURAL HOLDINGS OR FARMS

IN THE VALUATION ROLL

DESCRIPTION OF THE PROPERTY _____

CATEGORY _____

EXTENT _____

MARKET VALUE _____

NAME OF OWNER _____

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

SECTION 6: 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.

DATE YEAR MONTH DAY SIGNATURE _____

DATE YEAR MONTH DAY SIGNATURE _____

OFFICIAL USE

SECTION 7: DECISION OF MUNICIPAL VALUER 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 8: NOTIFICATION OF OUTCOME

SIGNATURE _____ DATE _____

VALUATION ROLL ADJUSTED _____

OBJECTOR NOTIFIED _____

OWNER NOTIFIED _____ ITO SECTION 52(1)(a) WHERE APPLICABLE

Portion/Holding No. _____ Farm/Holding No. _____