FORM C: AGRICULTURAL HOLDINGS OR FARMS

UMZUMBE MUNICIPALITY

Enquiries: The Revenue 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 2024 TO 30 JUNE 2029

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. _____

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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 _____
LOUNGE
DINING ROOM _____ 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 m²	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. _____

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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 _____

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
WHAT IS THE ASKING PRICE? R _____

OFFER RECEIVED R _____

NAME OF AGENT _____

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

OFFER RECEIVED R _____

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. _____

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IN THE VALUATION ROLL

DESCRIPTION OF THE PROPERTY _____ _____

CATEGORY _____ _____

EXTENT _____ _____

MARKET VALUE _____ _____

NAME OF OWNER _____ _____

ADVERSE FEATURES AND/OR FURTHER REASONS N 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. _____

PLEASE COMPLETE THE BOTTOM OF EACH PAGE