



**PLAASLIKE MUNISIPALITEIT**

**MERAFONG CITY**

**LOCAL MUNICIPALITY**

**AANSOEK OM KWYTSKELDING VAN EIENDOMSBELASTING AAN PENSIOENTREKKERS INGEVOLGE  
DIE BEPALINGS VAN ARTIKEL 15 VAN DIE MUNISIPALE ERFBELASTING WET NO. 6 VAN 2004.  
APPLICATION FOR THE REMISSION OF ASSESSMENT RATES TO PENSIONERS IN TERMS  
OF SECTION 15 OF THE MUNICIPAL PROPERTY RATES ACT NO. 6 OF 2004**

Geliewe hierdie vraelys te voltooi deur alle vrae noukeurig te beantwoord en so gou moontlik terug te stuur aan:-  
Kindly complete this questionnaire by carefully answering all questions and return as soon as possible to:-

**Die Munisipale Bestuurder / The Municipal Manager  
Posbus / P. O. Box 3 Carletonville 2500**

**MOET DEUR DIE GEREGISTREERDE EIENAAR VOLTOOI WORD / MUST BE COMPLETED BY THE REGISTERED  
OWNER**

1. Naam en Van (Mnr / Me)  
Name and Surname (Mr / Ms).....
2. Identifikasie Nr. ..... Telefoon Nr. ....  
Identification No. .... Telephone No. ....
3. Erf Nr. .... Dorpsgebied .....  
Stand No. .... Township. ....
4. Straatadres van woning ..... Poskode .....  
Street address of home. .... Postal Code. ....
5. Bruto jaarlikse inkomste (man en vrou) vir die tydperk **1 Julie 2022 tot 30 Junie 2023**. (pensioen, rente en ander inkomste ingesluit) / Gross annual income (husband / wife) for the period **1 July 2022 to 30 June 2023**. (Pension, interest and other income)  
Maandelikse bruto inkomste: ..... Jaarlikse bruto inkomste: .....  
Monthly gross income: R..... Yearly gross income: R .....
6. Ouderdom op **1 Julie 2023** ..... Geboortedatum .....  
Age on **1 July 2023** ..... Date of birth .....
7. Word die eiendom voltyds deur **U** bewoon? Ja  Nee  (Merk met X)  
Is the property permanently occupied by **yourself**? Yes  No  (Mark with X)
8. Aantal mense wat in huis woon .....  
Number of people living in the house .....
9. Tydperk waarvoor aansoek gedoen word : **1 Julie 2023 tot 30 Junie 2024**  
Period for which application is made : **1 July 2023 to 30 June 2024**
10. U moet maandeliks die eiendomsbelastingrekening betaal, of u aansoek gedoen het vir kwytstelling aldan nie.  
You must pay the assessment rates account monthly whether you applied for remission or not.
11. U moet elke jaar aansoek doen vir kwytstelling. / You must apply for remission every year.
12. Hierdie vorm moet by die Munisipale Kantore ingehandig word. **(Effektief op maand van indiening) na 31 Julie 2023** / This form must be handed in at the Municipal Offices. **(Effective from month of submission) after 31 July 2023**

**SIEN AGTER VIR BEËDIGDE VERKLARING. / SEE OVERLEAF FOR SWORN STATEMENT**

**NEEM ASSEBLIEF KENNIS / PLEASE NOTE!!!**

**\* BAIE BELANGRIK / VERY IMPORTANT : Afskrif van ID / Copy of ID**

**\* BAIE BELANGRIK / VERY IMPORTANT : Bewys van inkomste(3 Maande bankstate) / Proof of income(3 Month bankstatements)**

**\* ONDER 60jr / UNDER 60jrs: Mediese sertifikaat / Medical Certificate**

**VIR KANTOOR GEBRUIK / FOR OFFICE USE**

<b><u>Received by:</u></b>	<b><u>Date:</u></b>	<b><u>Signature:</u></b>
<b><u>Verified by:</u></b>	<b><u>Date:</u></b>	<b><u>Signature:</u></b>
<b><u>Captured by:</u></b>	<b><u>Date:</u></b>	<b><u>Signature:</u></b>

1. Ekertifiseer dat voordat ek die voorgeskrewe eed / bevestiging afgeneem het, ek die volgende vrae aan die verklaarder gestel en sy / haar antwoorde in sy / haar teenwoordigheid neergeskryf het:

(1) Is u vertrouwd met die inhoud van bostaande verklaring en begryp u dit?

Antwoord: .....

(2) Het u enige beswaar teen die afle van die voorgeskrewe eed?

Antwoord: .....

(3) Beskou u die voorgeskrewe eed as bindend vir u gewete?

Antwoord: .....

(4) Is u inkomste in die aansoek vermeld korrek?

Antwoord: .....

1. I certify that before administering the oath / affirmation I asked the deponent the following questions and wrote down his / her answers in his / her presence:

(1) Do you know and understand the contents of the declaration?

Answer: .....

(2) Do you have any objection to taking the prescribed oath?

Answer: .....

(3) Do you consider the prescribed oath to be binding to your conscience?

Answer: .....

(4) Is your income mentioned in the application correct?

Answer: .....

2. Ekertifiseer dat die verklaarder erken dat hy / sy vertrouwd is met die inhoud van die verklaring en dit begryp. Hierdie verklaring is beëdig/bevestig voor my en verklaarder se handtekening/duimafdruk is in my teenwoordigheid daarop aangebring.

2. I certify that the deponent has acknowledged that he / she knows and understands the contents of this declaration which was sworn to / affirmed before me and the deponent's signature/thumb print/mark was placed thereon in my presence.

**VOLLE NAAM / FULL NAME** .....

**BESIGHEIDSADRES / BUSINESS ADDRESS** .....

**AMP (RANG) / DESIGNATION (RANK)** ..... **REPUBLIEK VAN SUID-AFRIKA / EX OFFICIO REPUBLIC OF SOUTH AFRICA**

**DATUM / DATE** ..... **PLEK / PLACE** .....

.....  
**KOMMISSARIS VAN EDE / COMMISSIONER OF OATHS  
LANDDROS / MAGISTRATE : OBERHOLZER**

Ek, die ondergetekende (Volle naam)  
I, the undersigned (Full name and surname) .....

Verklaar onder eed dat die besonderhede volkome korrek en juis is en onderneem om u van enige wysigings in kennis te stel.

Declare on oath that the details are true and correct and undertake to notify you of any change thereof.

.....  
**HANDTEKENING VAN APPLIKANT/  
SIGNATURE OF APPLICANT**

**DATUM / DATE:** .....