

2021 GENERAL VALUATION

**OBJECTION FORM A:
RESIDENTIAL (FULL TITLE AND SECTIONAL
TITLE USED FOR RESIDENTIAL PURPOSES)**

Objection No.

*The Valuation Office will mail an acknowledgement of receipt letter within three weeks receipt of an objection. Should you not receive such a notification kindly contact the **CUSTOMER CARE CENTRE ON 041 506 5555***

RETURN THE COMPLETED FORM TO:

**THE CITY MANAGER
NELSON MANDELA BAY MUNICIPALITY**

Postal Address:
P.O. BOX 834
Port Elizabeth
6000

E-MAIL: objections@mandelametro.gov.za

LOGGING OF AN OBJECTION AGAINST THE DECISION OF THE MUNICIPAL VALUER REGARDING MATTERS PERTAINING TO SPECIFIC PROPERTY AS REFLECTED IN OR OMITTED FROM THE GENERAL VALUATION ROLL FOR THE PERIOD 1 JULY 2021 TO 30 JUNE 2025

*Delete whichever is not applicable

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

ERF/UNIT NO SUBURB / SCHEME NAME

SECTION 1: OBJECTOR INFORMATION

1.1 OBJECTOR IS THE OWNER

REGISTERED OWNER OF PROPERTY				
IDENTITY NO.			COMPANY OR CC REGISTRATION NO	
PHYSICAL ADDRESS OF OWNER				CODE
POSTAL ADDRESS OF OWNER				CODE
TELEPHONE NO	HOME	()	WORK	()
	CELL		FAX	()
E-MAIL ADDRESS				

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

NAME OF OBJECTOR				
IDENTITY NO.			COMPANY OR CC REGISTRATION NO	
POSTAL ADDRESS OF OBJECTOR				CODE
TELEPHONE NO	HOME	()	WORK	()
	CELL		FAX	()
E-MAIL ADDRESS				
STATUS OF OBJECTOR e.g. Tenant, Pending Purchaser, Municipality				

Complete: Erf/Unit No **Area/Scheme Name**

PLEASE COMPLETE THE BOTTOM OF EACH PAGE

1.3 AUTHORISED REPRESENTATIVE OF THE OBJECTOR

NAME OF REPRESENTATIVE				
IDENTITY NO.		COMPANY OR CC REGISTRATION NO		
POSTAL ADDRESS OF REPRESENTATIVE			CODE	
TELEPHONE NO	HOME	()	WORK	()
	CELL		FAX	()
E-MAIL ADDRESS				

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

**SECTION 2: PROPERTY DETAILS
(FOR SECTIONAL TITLES SEE SECTION 4)**

PHYSICAL ADDRESS CODE

EXTENT OF PROPERTY M²

MUNICIPAL ACCOUNT NO (If available)

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		
IF YES: DATE OF PAYMENT			AMOUNT	R

**SECTION 3: DESCRIPTION OF RESIDENTIAL DWELLING (FOR SECTIONAL TITLES SEE SECTION 4)
(INDICATE NUMBER OR STATE YES/NO IN APPROPRIATE BOX)**

MAIN DWELLING

NO.OF BEDROOMS		NO. OF BATHROOMS		KITCHEN		LOUNGE	
DINNING ROOM		LOUNGE WITH DINNING ROOM		STUDY		PLAYROOM	
TELEVISION ROOM		LAUNDRY		SEPARATE TOILET			
OTHER				OTHER			
OTHER				OTHER			

OUTBUILDINGS

NO.OF GARAGES	
GRANNY FLAT/ROOMS	
OTHER	

SIZE OF MAIN DWELLING		M ²
SIZE OF OUT BUILDING		M ²
SIZE OF OTHER BUILDINGS		M ²
TOTAL BUILDING SIZE		M ²

OTHER BUILDINGS (ATTACH ANNEXURE)

SWIMMING POOL		TENNIS COURT			
BORE HOLE		GARDEN	GOOD	AVERAGE	POOR

Complete: Erf/Unit No Area/Scheme Name

PLEASE COMPLETE THE BOTTOM OF EACH PAGE

OTHER		OTHER	
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FENCING	FRONT	BACK	SIDE 1	SIDE 2
TYPE				
HEIGHT				

DRIVE WAY (E.G. Bricks, pavers)		IS YOUR PROPERTY SITUATED IN A BOOMED AREA OR SECURITY	YES	NO

OTHER FEATURES

GENERAL CONDITION OF PROPERTY (TICK APPROPRIATE BOX)

GOOD		AVERAGE		POOR	
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SECTION 4: SECTIONAL TITLES UNITS

SCHEME NO		NAME OF SCHEME		FLAT NO/ DOOR NO		UNIT SIZE	M ²
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NAME OF MANAGING AGENT		TEL NO.	()
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INDICATE NUMBER OR STATE YES/NO IN APPROPRIATE BOX

NO.OF BEDROOMS		NO. OF BATHROOMS		KITCHEN		LOUNGE	
DINNING ROOM		LOUNGE WITH DINING ROOM		STUDY		PLAYROOM	
TELEVISION ROOM		LAUNDRY		SEPARATE TOILET			
OTHER				OTHER			
OTHER				OTHER			

MONTHLY LEVY	R
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DETAILS OF EXCLUSIVE USE AREAS

GARAGE		M ²
CARPORT		M ²
OPEN PARKING		M ²
STORE ROOM		M ²
GARDEN		M ²
OTHER		M ²

COMMON PROPERTY CONSISTS OF:

SWIMMING POOL	
TENNIS COURT	
OTHER	
OTHER	
OTHER	

SECTION 5: MARKET INFORMATION

IF YOUR PROPERTY IS CURRENTLY ON THE MARKET

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

WHAT IS THE ASKING PRICE?	R	WHAT WAS THE ASKING PRICE?	R
OFFER RECEIVED	R	OFFER RECEIVED	R
NAME OF AGENT		TEL NO	()

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

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

SECTION 6: OBJECTION DETAILS

Complete: Erf/Unit No Area/Scheme Name

PLEASE COMPLETE THE BOTTOM OF EACH PAGE

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

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

SECTION 7: 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.

YEAR	MONTH	DAY

SIGNATURE

OFFICIAL USE

SECTION 8: DECISION OF MUNICIPAL VALUER

DESCRIPTION OF THE PROPERTY/UNIT NO.	
CATEGORY	
PHYSICAL ADDRESS/DOOR NO./FLAT NO.	
EXTENT	
MARKET VALUE	
NAME OF OWNER	

REASONS FOR THE MUNICIPAL VALUER

NAME OF MUNICIPAL VALUER/ASSISTANT MUNICIPAL VALUER*
Delete whichever if not applicable

SIGNATURE:

DATE

YEAR	MONTH	DAY

SECTION 9: NOTIFICATION OF OUTCOME

Complete: Erf/Unit No Area/Scheme Name

PLEASE COMPLETE THE BOTTOM OF EACH PAGE

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

Complete: Erf/Unit No Area/Scheme Name

PLEASE COMPLETE THE BOTTOM OF EACH PAGE