



"A world class city where all communities enjoy a high quality of life"

Complete: Portion/Holding No. _____ Area/Scheme Name _____

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FORM C: AGRICULTURAL HOLDINGS OR FARMS

THE MUNICIPAL MANAGER
Rustenburg Local Municipality

OBJECTION NO. _____

LOGGING OF AN OBJECTION AGAINST THE DECISION OF THE MUNICIPAL VALUER REGARDING MATTERS PERTAINING TO PROPERTY AS REFLECTED IN OR OMITTED FROM THE VALUATION ROLL/SUPPLEMENTARY VALUATION ROLL* FOR THE PERIOD

1 JULY _____ TO 30 JUNE _____ *Delete whichever is not applicable

DESCRIPTION OF PROPERTY IN RESPECT OF WHICH THE OBJECTION IS MADE

(COMPLETE A SEPERATE FORM FOR EACH ENTRY OBJECTED TO)

ERF/PORITION/UNIT NO. _____ SUBURB/ FARM/ SCHEME _____

FARM NO. _____ REG. DEV _____

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 _____ FAX _____

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 _____

POSTAL ADDRESS OF OBJECTOR _____ CODE _____

TELEPHONE NO HOME _____ WORK _____

CELL _____ FAX _____

E-MAIL ADDRESS _____

STATUS OF OBJECTOR (eg. Tenant, Pending Purchaser, Municipality, etc) _____

1.3 AUTHORISED REPRESENTATIVE OF THE OBJECTOR*

NAME OF REPRESENTATIVE _____

POSTAL ADDRESS _____ CODE _____

TELEPHONE NO. HOME _____ WORK _____

CELL _____ FAX _____

E-MAIL ADDRESS _____

* IF A REPRESENTATIVE IS APPOINTED, PROOF OF AUTHORISATION MUST BE ATTACHED, TO THIS FORM



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

PHYSICAL ADDRESS _____ CODE _____
EXTENT OF PROPERTY (m2) _____
MUNCIPAL ACCOUNT NO _____ (if available)
NAME OF BONDHOLDER _____ REGISTERED AMOUNT OF BOND _____ (if available)
PROVIDE FULL DETAILS OF ALL SERVITUDES, ROAD PROCLAMATIONS OR OTHER ENDORSEMENTS AGAINST THE PROPERTY (if applicable) _____
SERVITUDENO. _____ AFFECTED AREA (m2) _____
IN FAVOUR OF _____
FOR WHAT PURPOSE _____
WAS COMPENSATION PAID YES _____ NO _____ IF YES DATE OF PAYMENT _____
AMOUNT R _____

SECTION 3: DESCRIPTION OF BUILDINGS (INFORMATION UNDER 3.1 TO 3.4 TO BE SUPPLIED BY MEANS OF ANNEXURES AS FOLLOWS)

3.1 MAIN DWELLING ON FARM/HOLDING (INDICATE NUMBER OR STATE YES/NO)

NO OF BEDROOMS _____ NO OF BATHROOMS _____ KITCHEN _____ LOUNGE _____ DINING ROOM _____
LOUNGE WITH DINING ROOM _____ STUDY _____ PLAYROOM _____ TELEVISION _____ LAUNDRY _____
SEPARATE TOILET _____ OTHER _____ SIZE OF MAIN DWELLING (m2) _____

3.2 OTHER BUILDINGS – ATTACH AS ANNEXURE A

BUILDING NO. _____ DESCRIPTION _____ SIZE (m2) _____ CONDITION _____ IS THE BUILDING FUNCTIONAL? _____

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

3.4 LAND ANALYSIS:

NON-AGRICULTURAL (REFER TO 3.3) (ha) _____ GRAZING _____ 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) _____ No. OF BOREHOLES _____ OUTPUT LITRES/HOUR _____
DAMS _____ CAPACITY _____
IS THE PROPERTY EXPOSED TO A RIVER? YES _____ NO _____



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3.5 OTHER

IS YOUR PROPERTY AFFECTED BY LAND CLAIM? YES _____ NO _____
 IF YES DATE OF CLAIM _____ GAZETTE NO. _____
 DO YOU HAVE WATER RIGHTS? YES _____ NO _____
 IF YES: DETAILS _____
 HAVE YOU APPLIED FOR A REZONING OR CONSENT USE? YES _____ NO _____
 CONSENT USE e.g. as guest houses, business, etc.
 IF YES: DETAILS _____
 HAS YOUR AGRICULTURAL HOLDINGS PROPERTY BEEN EXCISED YES _____ NO _____
 IF YES: NEW FARM DESCRIPTION _____
 HAS THE TOWNSHIP APPLIED FOR OR PROCLAIMED? YES _____ NO _____
 IF YES: GIVE 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 _____
 IF YOUR PROPERTY HAS BEEN ON THE MARKET IN THE LAST 3 YEARS WHAT WAS THE ASKING PRICE?
 R _____ OFFER RECEIVED R _____
 NAME OF AGENT _____ TEL NO. _____
SALES TRANSACTIONS (OTHER PROPERTIES IN THE VICINITY) USED BY OBJECTOR IN DETERMINING THE MARKET VALUE OF THE PROPERTY OBJECTED TO
 ERF/UNIT NO. _____ SUBURB/FARM/SCHEME NAME _____
 DATE OF SALE _____ SELLING PRICE _____

SECTION 5: OBJECTION DETAILS

PARTICULARS AS REFLECTED IN 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 (ANNEXURE CAN BE PROVIDED)	



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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 _____

OFFICIAL USE

SECTION 7: 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 VALUATION BOARD _____

NAME OF MUNICIPAL VALUER/*
ASSISTANT MUNICIPAL VALUER _____ DATE YEAR _____ MONTH _____ DAY _____

*delete whichever is not applicable

SIGNATURE _____

SECTION 8: NOTIFICATION OF OUTCOME

	SIGNATURE	PRINT NAME	DATE
VALUATION ROLL ADJUSTED	_____	_____	_____
OBJECTOR NOTIFIED	_____	_____	_____
OWNER NOTIFIED	_____	_____	_____

OBJECTION NO. _____
SIGNATURE OF PERSON WHO RECEIVED THE OBJECTION _____
NAME OF OWNER _____ DATE _____
NAME OF OBJECTOR IF NOT THE SAME _____
ERF NUMBER _____
TOWNSHIP NAME _____