

(For office use)

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

APPEAL No.

Direct all enquiries to valuations@kouga.gov.za and please do not contact the valuer/chairperson directly.

RETURN THE COMPLETED FORM VIA MAIL TO:

THE CHAIRPERSON: VALUATION APPEAL BOARD

OR

KOUGA MUNICIPALITY

E-MAIL: valuations@kouga.gov.za

Postal Address:

P.O Box 21
Jeffreys Bay
6330

LOGGING OF AN APPEAL 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 2023 TO 30 JUNE 2027.

DESCRIPTION OF PROPERTY IN RESPECT OF WHICH THE APPEAL IS MADE

(COMPLETE A SEPARATE FORM FOR EACH ENTRY APPEALED TO)

ERF/UNIT NO
NAME

SUBURB / SCHEME

SECTION 1: APPELLANT INFORMATION

1.1 APPELLANT 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 APPELLANT IS NOT THE OWNER OR THE MUNICIPALITY IS THE APPELLANT

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

Complete: Erf/Unit No Area/Scheme Name

PLEASE COMPLETE THE BOTTOM OF EACH PAGE

1.3 AUTHORISED REPRESENTATIVE OF THE APPELLANT

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 NUMBER (If available)

NAME OF BOND HOLDER	REGISTERED AMOUNT OF BOND
<input type="text"/>	<input type="text"/>

(If applicable)

PROVIDE FULL DETAILS OF ALL SERVITUDES, ROADS PROCLAMATIONS OR OTHER ENDORSEMENTS AGAINST THE PROPERTY (IF APPLICABLE)

SERVITUDE NO	AFFECTED AREA	M ²
<input type="text"/>	<input type="text"/>	<input type="text"/>
IN FAVOUR OF	<input type="text"/>	
FOR WHAT PURPOSE	<input type="text"/>	
WAS COMPENSATION PAID	YES	NO
IF YES: DATE OF PAYMENT	<input type="text"/>	AMOUNT R <input type="text"/>

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	<input type="text"/>	NO. OF BATHROOMS	<input type="text"/>	KITCHEN	<input type="text"/>	LOUNGE	<input type="text"/>
DINNING ROOM	<input type="text"/>	LOUNGE WITH DINNING ROOM	<input type="text"/>	STUDY	<input type="text"/>	PLAYROOM	<input type="text"/>
TELEVISION ROOM	<input type="text"/>	LAUNDRY	<input type="text"/>	SEPARATE TOILET	<input type="text"/>		
OTHER	<input type="text"/>			OTHER	<input type="text"/>		
OTHER	<input type="text"/>			OTHER	<input type="text"/>		

OUTBUILDINGS

NO. OF GARAGES	<input type="text"/>
GRANNY FLAT/ROOMS	<input type="text"/>
OTHER	<input type="text"/>

SIZE OF MAIN DWELLING	<input type="text"/>	M ²
SIZE OF OUT BUILDING	<input type="text"/>	M ²
SIZE OF OTHER BUILDINGS	<input type="text"/>	M ²
TOTAL BUILDING SIZE	<input type="text"/>	M ²

Complete: Erf/Unit No Area/Scheme Name

PLEASE COMPLETE THE BOTTOM OF EACH PAGE

OTHER BUILDINGS (ATTACH ANNEXURE)

SWIMMING POOL		TENNIS COURT			
BORE HOLE		GARDEN	GOOD	AVERAGE	POOR
OTHER		OTHER			

FENCING	FRONT	BACK	SIDE 1	SIDE 2
TYPE				
HEIGHT				

DRIVEWAY (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
NAME OF MANAGING AGENT				TEL NO.	()		

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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COMMON PROPERTY CONSISTS OF:

SWIMMING POOL	
TENNIS COURT	
OTHER	
OTHER	
OTHER	

DETAILS OF EXCLUSIVE USE AREAS

GARAGE		M ²
CARPORT		M ²
OPEN PARKING		M ²
STOREROOM		M ²
GARDEN		M ²
OTHER		M ²

Complete: Erf/Unit No Area/Scheme Name

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SECTION 5: 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 THE LAST 3 YEARS

WHAT WAS THE ASKING PRICE?	R
OFFER RECEIVED	R
TEL NO	()

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

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

SECTION 6: APPEAL DETAILS

	PARTICULARS AS REFLECTED IN THE ADVERTISED VALUATION ROLL	CHANGES REQUESTED BY APPELLANT
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 APPEAL (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

Complete: Erf/Unit No Area/Scheme Name

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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

SIGNATURE:

YEAR	MONTH	DAY
DATE		

SECTION 9: NOTIFICATION OF OUTCOME

	SIGNATURE	DATE
VALUATION ROLL ADJUSTED		
APPELLANT NOTIFIED		
OWNER NOTIFIED		

Complete: Erf/Unit No Area/Scheme Name

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