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## PROPERTY RATES: APPLICATION FOR REBATE/EXEMPTION/REDUCTION

With reference to the Municipal Property Rates Act (No 6 of 2004) and the Approved Rates Policy of Theewaterskloof Municipality, the Council may grant a rebate/exemption/reduction to certain categories of properties/owners.

**Please complete the entire form and attach all the necessary documentation**

Indicate in the last column the relief measure that is being applied for:

Application for:	Rebate / Exemption / Reduction	Indicate with <input checked="" type="checkbox"/>
<b>Protected Areas:</b> MPRA Sect 17(1)(e)	Exemption	
<b>Open Spaces:</b> Rates Policy 7.9	Exemption	
<b>Heritage Properties:</b> MPRA Sect 15(2A)(b), Rates Policy 7.10	Exemption	
<b>Religious Organisation</b> – place of Worship / official residence: MPRA 17(1)(i), Rates Policy 7.13	Exemption	
<b>Pensioners:</b> Rates Policy 8.2.1(iii)	R60 000 valuation reduction	
<b>Senior Citizens:</b> Rates Policy 8.3	100% / 50% rebate	
<b>Disabled Persons:</b> Rates Policy 8.4	100% / 50% rebate	
<b>Non-Profit Organization:</b> Rates Policy 8.5	100% / 20% rebate	
<b>Rural Areas Rebate:</b> Rates Policy 8.7	75% rebate	

### OWNER INFORMATION:

Full name of person / organisation applying:

Full name of registered property owner (as per deeds office):

Company / Trust registration number (if applicable):

Authorised representative (attach company resolution / proxy):

Telephone Number:  E-mail Address:

### PROPERTY INFORMATION:

Erf number and portion:  Town:

Physical address of property:

Activity for which property is used:

**IF YOU ARE APPLYING FOR THE PENSIONERS REDUCTION, SENIOR CITIZEN / DISABLED REBATE, PLEASE COMPLETE THE TABLE BELOW:**

Do you own more than one property:

Do you live on the property? If not, who lives on the property?:

If not the owner, are you the usufructuary of the property?:

**REQUIRED DOCUMENTATION:**

	Documentation included in application (please indicate with a tick ✓)
<b>Proof of status of property/company</b> – Protected Area / Heritage Property / Open Space / Religious Organisation / Non-Profit Organisation	
<b>ID document</b> – Pensioner / Senior Citizen / Disabled Person	
<b>Proof of gross monthly income</b> from all sources – Senior Citizen	
<b>Proof of income</b> - Non-Profit Organisation	
<b>Company resolution / proxy</b> – where applicable	

**DECLARATION:**

I \_\_\_\_\_ the undersigned, in my capacity as \_\_\_\_\_, do hereby declare that the information supplied is to the best of my knowledge, true and correct. The above-mentioned property is being used for the purposes as stated above and the documentation supplied is true and correct and have not been altered in any way.

Signature \_\_\_\_\_

Date \_\_\_\_\_

**FOR OFFICE USE ONLY:**

Application received by: \_\_\_\_\_

Application verified by: \_\_\_\_\_

Date: \_\_\_\_\_

Date: \_\_\_\_\_

**Application:**  Successful  Unsuccessful  
Reason if unsuccessful: