

MARULENG MUNICIPALITY

65 SPRINGBOK STREET P.O. BOX 627 HOEDSPRUIT 1380 TEL: (015) 793 2409 TEL: (015) 793 2237 FAX: (015) 793 2341

MOPANI DISTRICT MUNIC DEPARTMENT OF SPATIA	_	ING AND ECONOMIC I	DEVELOPMENT			
FORM C: AGRICULTU 1ST SUPPLEMENTARY			Objection	No.		
OBJECTION FORM						
FARM NO	•••••	. FARM NAME		•••••	••	
PORTION NO Reason for query					••••	
Registered Owner of Property						
Identity No.			Company or c.c Registration No.			
Physical Address the Owner			J	Code		
Postal Address of Owner				Code		
Telephone No.	Home		Work			
	Cell		Fax			
E-Mail Address						
PROPERTY DETAILS:						
PHYSICAL ADDRESS				CO	DE:	
EXTENT OF PROPERTY	,		M ²			
MUNICIPAL ACCOUNT	NO					

INDICATE NUMBER OR STATE YES/NO IN APPROPRIATE BOX

No. of Bedrooms	No. of Bathrooms	Kitchen	Lounge
Dining Room	Lounge/ Dining Room	Study	Playroom
Television Room	Laundry	Separate Toilet	'
Other		Other	
Other		Other	

Swimming Pool	Dwelling	\mathbf{M}^2
Tennis Court	Garage	M ²
Other	Carport	M ²
Other	Other	M^2

OTHER BUILDINGS – ATTACH AS ANNEXURE A

BUILDING NO.	DESCRIPTION	SIZE M2	CONDITION	IS THE BUILDING
				FUNCTIONAL

IS ANY OF THE PROPERTY USED FOR ANY PURPOSE OTHER THAN AGRICULTURE? (E.g Business, mining, eco-tourism, trading in or hunting game)

TICK			
YES	NO	IF YES – DESCRIBE THE USE(S)	

IF NECESSARY PROVIDE ANNEXURE B

LAND USE ANALYSIS

CONDITION OF FENCES			
GOOD	AVERAGE POOR		
AREA GAME FENCED		На	

NON AGRICULTURAL (REFER TO 3.3)	Ha
GRAZING	На
UNDER IRRIGATION	На
DRY LAND	На
PERMANENT CROPS	На
OTHER	На
OTHER	На
OTHER	На
TOTAL	На

NUMBER OF BOREHOLES	
OUTPUT LITRES/HOUR	
DAMS	
CAPACITY	

IS THERE PROPERTY EXPOSED TO			
A RIVER?			
YES		NO	



SALE TRANSACTIONS (OF OTHER PROPERTIES IN THE VICINITY) USED BY THE OBJECTOR IN DETERMING THE MARKET VALUE OF PROPERTY OBJECTED TO (IF INSUFFICIENT SPACE PROVED ANNEXURE D)

HOLDING/PORTION NO.	AGRICULTURAL HOLDING/FARM	DATE OF SALE	SELLING PRICE

Query Details	Particulars as reflected in the	Changes Requested
	Valuation Roll	
Description of the Property No.		
Extent		
Market Value		
Category		
Name of Owner		

ADVERSE FEATURES AND/OR FURTHER REASONS IN SUPPOR CAN BE PROVIDED)	T OF THIS QUERY (ANNEXURES
I, FULL NAME:	
SIGNATURE:	DATE:
HEREBY DECLARE THAT THE INFORMATION AND	

(To be filled by the Municipal Valuer)		
Name of a Municipal Valuer		
 Signature of Valuer	Date	

