

SENQU

"A Leading Rural Municipality with a viable and modern Economy"

APPLICATION TO PURCHASE MUNICIPAL PROPERTY

1. PROPERTY INFORMATION	
Property description (erf number & town)	
Physical Address	
Size (m ²)	
2. APPLICANT'S INFORMATION	
Name and Surname	
I.D Number	> 1
Physical Address	(I)
	Postal Code
Ward number	Z
(if the applicant is granted the award, this address w	will act as the domicilium c <mark>itandi et</mark> executandi)
Contact number	
Alternative contact number	
If employed, employer details	
Employer's physical address	
	Postal Code
Employer's contact number	1.6
Next of kin not residing with applicant	MA
Physical Address	
	Postal Code
Contact number	
Email Address	

19 Murray Street | Lady Grey | 9755 | 051 603 1301 | info@senqu.gov.za





3. NATURE OF APPLICATION			
PURCHASE			
Purchase offer	R		
LEASE (NOT APPLICABLE)			
Lease amount offer			
Lease term proposed			
(Please note that both purchase and lease offers made do not include any additional costs such as the obtain approvals)	ining of any statutory		
OTHER (NOT APPLICABLE) (elaborate on covering letter)			
If the nature of the application is a purchase/lease in terms of a call for applications, please provide reference number			
Reasons for making application (full details to be provided on the required covering let provided is not sufficient)	ter if the space		
4. MAP, SITE PLANS AND/OR SKETCH PLANS SHOWING THE SUB- OR PORTION THEREOF (NOT APPLICABLE)	JECT PROPERTY		
Attach to the application, a sketch plan that indicates the following details:			
 Clear boundaries of the subject property or portion thereof Estimated size of the subject property or portion thereof with dimensions Surrounding streets Position of existing buildings or structures Position of any municipal infrastructure services found on the subject property North arrow 			
5. SUPPORTING DOCUMENTS			
The following documents should accompany the application:			
	Tick √		
Covering letter			
Sketch plan of subject property.	N/A		
A locality plan indicating adjacent owners.	N/A		
Copy of applicant's identity document, marriage certificate and copy of spouse's			
identity document Certified proof of registration if the applicant is a company, close corporation, registered welfare organization, charitable NGO, non-profit organization or a religious organization	N/A		
Copy of municipal account and municipal account number / Letter of address from your ward Councilor			
Social care organizations to provide proof of registration with the Eastern Cape, Department of Social Services	N/A		
VAT number, if the applicant is VAT registered	N/A		
A valid tax clearance certificate issued by South African Revenue Services (SARS) confirming that the applicant is registered with SARS and in good standing, must be provided.	N/A		
6. DECLARATION			
I hereby wish to confirm that the information contained in this application form accompanying documentation is complete and correct.	n and		
Full name(s):			
Date:			
Applicant's signature:			

FOR OFFICE USE ONLY	
Date received:	Municipal Stamp
Received by:	