FORM	A: RESIDENTIAL (FU	LL TITLE AND SE	CTIONAL TITLE U	SED FOR R		POSES)							
THE C	HAIRPERSON: VALU		DARD		APPEAL NO.								
LODGI	NG OF AN APPEAL A CIFIC PROPERTY AS	REFLECTED IN C	R OMITTED FROM	I THE VALU	ALUER REGARDIN JATION ROLL/SUP 30 JUNE	PLEMENTAR	PERTAINING TO Y VALUATION						
	* Delete whichever is not applicable DESCRIPTION OF PROPERTY IN RESPECT OF WHICH THE APPEAL IS MADE (COMPLETE A SEPARATE FORM FOR EACH ENTRY APPEALLED TO)												
	ERF/UNIT NO.	ALE FORM FOR EA			SCHEME NAME								
SECTIO	ON 1: APPELLANT INFORMATION												
1.1	APPELLANT IS THE OWNER												
	REGISTERED OWNER O	F 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 NO.	( )							
1.2	E-MAIL ADDRESS	OWNER OR MUNICIF	PALITY IS THE APPEL	LANT									
	NAME OF APPELLANT:												
	IDENTITY NO.				COMPANY OR C.C. REGISTRATION NO.								
	POSTAL ADDRESS OF APPELLANT						CODE						
	TELEPHONE NO.:	HOME	)		WORK	( )							
	CELT				FAX NO.	()							
	E-MAIL ADDRESS												
	STATUS OF APPELLANT	(e.g. Tenant, Pending	Purchaser, Municipality	y etc)		]							
1.3	AUTHORISED REPRESENTATIVE OF THE APPELLANT												
	NAME OF REPRESENTA	TIVE:											
	POSTAL ADDRESS						CODE						
	TELEPHONE NO.:	HOME	)		WORK	( )							
	CELL				FAX NO.	( )							
	E-MAIL ADDRESS												
•	IF A REPRESENTA	TIVE IS APPOIN	TED, PROOF OF	AUTHORI	SATION MUST B	E ATTACHED	)						
	Complete: Erf/Unit f				OTOM OF EACH I	PAGE							

	PERTY DET	<u> </u>	,		SEE SECTION 4					
PHYSICAL	ADDRESS	L						CODE		
PROPERT				m,						
MUNICIPA NO.	L ACCOUNT				(If available)					
NAME OF	BOND HOLD	ER	REGISTE	RED AMOUNT OF B	OND	]				
						( If applicable)				
PROVIDE	FULL DETAIL THE PROPER	S OF ALL SERVITUDES, ROAD PROCLAMATIONS OR OTHER ENDORSEMENTS DY (If applicable)								
		Т								
SERVITUD	E NO.				AFFE	CTED AREA		m²		
IN FAVOU	ROF									
FOR WHA	T PURPOSE									
	PENSATION	PAID	YES	NO						
IF YES:-	DATE OF F	PAYMENT		<u></u>	AMOUNT	R				
N 3: DESC (INDICATE MAIN DWE	NUMBER C	F RESIDENTIAL OR STATE YES/NO	DWELLING	( FOR SECTIONARIATE BOX)	AL TITLES SEE S	ECTION 4)	a a			
NO. OF BE	DROOMS	,		BATHROOMS	KITCHEN		LOUNGE			
DINING RO	ОМ		LOUNGE ROOM	WITH DINING	STUDY		PLAYROOM			
TELEVISIO	N ROOM		LAUNDR	Υ	SEPARATE TOILET					
OTHER					OTHER					
OTHER					OTHER					
OUTBUILD	INGS				10.7.2.1					
NO. OF GARAGES					SIZE OF MA	IN				
	LAT/ROOMS									
000004	DAIMOONO				SIZE OF OT	SIZE OF OUTBUILDING SIZE OF OTHER BUILDINGS				
	OTHER OTHER BUILDINGS (ATTACH ANNEXU)		E)		TOTAL BUIL	DING SIZE				
OTHER:	SWIMMING	POOL		TENNIS COURT		I				
	BORE HOL	E		GARDEN	GOOD	AVERAGE	POOR			
	OTHER			OTHER						
FENCING:		FRC	NT	BACK	SID	E 1	SIDE	2		
	TYPE			850						
	HEIGHT			<u></u>						
ORIVE WAY	Y: (e.g. Bricks	, pavers)					Tick Ø			
		IS YOUR PROPERTY SITUATED IN YES NO A BOOMED AREA OR SECURITY								
OTHER FE	ATURES:						L			
_ /										
SENERAL (	CONDITION	OF PROPERTY:		(Tick ☑ )						
300D		AVERAGE		POOR						
				_··						

## FORM A: RESIDENTIAL (FULL TITLE AND SECTIONAL TITLE USED FOR RESIDENTIAL PURPOSES) SECTION 4: SECTIONAL TITLE UNITS

	NAME OF SCHEME			FLAT NO./ DOOR NO.		UNIT SIZE
NAME OF MANAGING AGENT INDICATE NUMBER OR	STATE VESSIO	APPROPRIES			TEL NO.	
INDICATE NUMBER OF	STATE YES/NO IN	APPROPRITE BOX				
NO. OF BEDROOMS		NO. OF BATHROOMS	KITCHEN		LOUNGE	
DINING ROOM		ROOM	STUDY		PLAYROOM	
TELEVISION ROOM	-	LAUNDRY	SEPARATE TOILET			
OTHER			OTHER			
OTHER			OTHER			
MONTHLY LEVY	R		DETAILS OF	EXCLUSIVE	USE AREAS	
COMMON PROPERTY CO	ONSISTS OF:		GARAGE			m²
SWIMMING POOL			CARPORT			m²
TENNIS COURT			OPEN PARKING			m²
OTHER	4 - 10 - 14 - 14 11 - 15 11 14 14 - 16 15 15 16 16 16 16 16 16 16 16 16 16 16 16 16		STORE ROOM			m²
OTHER			GARDEN			m²
OTHER			OTHER			mz
5: MARKET INFORM	ATION					
F YOUR PROPERTY IS C		HE MARKET	IF YOUR PRO	OPERTY HAS	S BEEN ON T	HE MARKE
WHAT IS THE ASKING PE	RICE?		THE LAST 3	YEARS WH	AT WAS THE	ASKING PE
OFFER T			OFFER I			
RECEIVED R			RECEIVED	R		
NAME OF AGENT:			TEL NO.			
SALE TRANSACTIONS (O	F OTHER PROPER	RTIES IN THE VICINITY) USED		T IN DETER	AINING	
HE MARKET VALUE OF	PROPERTY APPE	ALED TO				
ERFIGITI NO.	SUB	URB/SCHEME NAME	DATE OF	SALE	SELLING	PRICE
6: APPEAL DETAILS						
		PARTICULARS AS REFLECTI IN THE VALUATION ROLL	ED CHANGES RE	EQUESTED	BY APPELLAN	IT.
DESCRIPTION OF THE F NO.	PROPERTY/UNIT					
CATEGOR	RY					
PHYSICAL ADDRESS/DO	OR NO./FLAT NO.					
EXTENT						
	LUE					AND THE RESERVE OF THE PARTY OF
EXTENT						
EXTENT MARKET VA NAME OF OW	/NER	EASONS IN SUPPORT OF THI	S APPEAL (ANNEXI	JRES CAN E	E PROVIDED	)
EXTENT MARKET VA NAME OF OW	/NER	EASONS IN SUPPORT OF THI	S APPEAL (ANNEXI	JRES CAN E	E PROVIDED	)
EXTENT MARKET VA NAME OF OW	/NER	EASONS IN SUPPORT OF THI	S APPEAL (ANNEXI	JRES CAN E	E PROVIDED	)

PLEASE COMPLETE THE BOTOM OF EACH PAGE

## FORM A: RESIDENTIAL (FULL TITLE AND SECTIONAL TITLE USED FOR RESIDENTIAL PURPOSES) 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 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_ SUPPLIED A	I/WESUPPLIED ARE TRUE AND CORRECT.			HEREBY DECLARE THAT THE INFORMATION AND PARTICULARS						
DATE:	YEAR MONTH	DAY		<u> </u>	SIGNATURE			-		
OFFICIAL USE										
SECTION 8: DECIS	ION OF THE VALUATION AF	PEAL BOARD								
DESCRIPT	TON OF THE PROPERTY/UNIT NO.			1						
	CATEGORY	<del> </del>		1						
PHYSICAL A	ADDRESS/DOOR NO./FLAT NO.			1						
	EXTENT			1						
	MARKET VALUE			1						
	NAME OF OWNER			1						
REASONS O	F THE VALUATION APPEAL B	OARD		•						
		<del></del>								
<del></del>										
NAME OF TH	E CHAIRPERSON OF THE APPEAL BOARD				Y	EAR	MONTH	DAY		
\$	SIGNATURE:				DATE					
SECTION 9: NOTIFIC	CATION OF OUTCOME									
VALUATION F	ROLL ADJUSTED	SIGNATURE	DA	ME						
APPELLANT N	NOTIFIED		-							
OWNER NOT	IFIED									
Complete: Erf/	Unit No Area/Sche	me Name PLEASE COMPLETI	E THE BOTOM O	F EACH PAGE						