



**APPLICATION FOR REBATE ON RATES**

**TAKE NOTE:** Applicants must note that the gross income of all occupants on the premises in respect of which application is being made for rebate, must be stated irrespective of the conditions of marriage agreements. In this regard “Income” means all monies derived by occupants from salary, wage, interest, dividends, board, child support and pensions- (Employers, old-age, war veteran and disability). **Proof of gross income must be attached.** Affidavit will be accepted in exceptional cases. Applications are open from 1 January and closes on 15 July each year.

I, the undersigned, hereby apply for a rebate on rates and declare herewith the following information to be true and correct:

- 1. Surname: ..... 2. First Names: .....
- 3. Residential address: ..... 4. Postal address: .....
- .....
- 4. Contact number:.....
- 5. Marital status (mark with x): Married: ..... Unmarried: .....
- 6. Identity Numbers: Husband: ..... Wife: .....
- 7. Pension Number .....

**Location of property in respect of which application is made:**

Erf number: ..... Street name : ..... House number: .....

Municipal Account number: ..... Pre-Paid Meter Number: .....



Income details	Husband	Wife	Children living with parents	<u>For Office Use Only</u>	
a) Salary	R	R	R	Erf no	: .....
b) Social Grant (SASSA)	R	R	R	Amount Raised	: .....
c) Interest	R	R	R	% Qualified	: .....
d) Dividends	R	R	R	Rebate amount	: .....
e) Pension: Employer	R	R	R	Valuation above R150 000?	
War Veteran	R	R	R	Yes	<input type="text"/>
f) Board / Rent	R	R	R	No	<input type="text"/>
g) Other: (Child support)	R	R	R		

I hereby declare that I am the registered owner / usufructuary of the above property and that the said property is inhabited and controlled by me. I further declare that I fully realise that should any of the above information be found to be incorrect or false, I shall be responsible for the repayment of any allocation received plus interest.

**Declared and signed at** ..... on the ..... day of ..... 20.....

.....

**SIGNATURE OF APPLICANT**

Sworn before me this ..... day of ..... 20.....

.....

**COMMISSIONER OF OATHS / PEACE OFFICER**

**STAMP PLEASE**



## CONTROL LIST

1.	Identity Document	
2.	Proof of total gross income of household of account holder, spouse and persons older than 18 years of age, including children residing on the premises.	
3.	Proof of unemployment, if applicable	
4.	Proof of pension / grants	

## IMPORTANT NOTICE

- False information or the withholding of information will disqualify anyone from further participation in the subsidy scheme, with the liability of immediate repayment of all allocations received plus interest and the risk of possible criminal proceedings being instituted;
- Should the gross income of a household increase and thereby exceed the approved limit during the subsidy time (Increases, no longer unemployed), the registered consumer must immediately inform the municipality. Failure to comply could result in the repayment of all allocations plus interest and the risk of possible legal steps being instituted;
- The information contained in this document is not confidential. A list of approved applicants will be handed to councilors for comments.

