

EPHRAIM MOGALE LOCAL MUNICIPALITY

APPLICATION FORM: REZONING IN TERMS OF EPHRAIM MOGALE LOCAL MUNICIPALITY, 2017, READ WITH SECTION 2(2) AND THE RELEVANT PROVISIONS OF THE SPATIAL PLANNING AND LAND USE MANAGEMENT ACT, 2013.

Please ensure that all the information is completed on the form. If any information is missing/incomplete this might result in a rejection of the application. This application can be submitted to the Municipal Manager:

Ephraim Mogale Local Municipality

Physical address: 13 Ficus street, Marble Hall, 0450

Postal address: Box 111, Marble Hall, 0450

Contacts: 013 261 8400					
APPLICANT DETAILS					
Please indicate Type of Applicant	Individual –ID Number				
Legal – Registration Number					
Applicant	Details: Individual				
Title					
Initial					
Full name					
Surname					
Preferred name					
ID number					
Gender					
Applicant Deta	ails: Legal Entity / Other				
Name					
Registration Number					
Representative Name					
Applicant Phys	sical Details of Applicant				
Physical Address (Work)					
Street number					
Street name					
Township					
City	Postal Code				
Physical Address (Home)					
Street number					
Street name					
Township					
City	Postal Code				
Applicant Postal Address Details					

Postal Type	Po Box	Physical Address
		(Home)
	Private Bag	Physical Address
		(Work)
Postal Number		
Township		Postal Code
Specify City		
Applica	nt Communication	on Details
E-Mail Address		
Cell Phone		
Home Phone		
Work Phone		
Home Fax		
Work Fax		
Preferred Communication Type:	E-Mail	SMS
,		
	OWNERS DETAI	
	ndicate the type o	
Individual		Legal
Owi	 ner Details: indiv	Entity/other
Title	lei Betans. man	vidual .
Initial		
Full name		
Surname		
Preferred name		
ID number		
Gender		
Owner L	Details: Legal En	ntity/Other
Name		
Registration number		
Representative name		
•	Address Details	s of Owner
Physical Address (Work)		
Address line 1 (Street no)		
Address line 2 (Street name)		
Township		Postal Code
Specify City		
Physical Address (Home)		
Address line 1 (Street no)		
Address line 2 (Street name)		
Township		Postal Code
Specify City		
	r Postal Address	s Details
Postal type		
Postal Number		
Township		Postal Code
City		
Communication Details		

E-Mail Address							
Cell Phone							
Iome Phone							
lome fax							
Vork fax							
Preferred Communication	Type	F-	Mail			SMS	
Petails of Owner's/Marital			Not App	licable	Married in	Community	Married
ctano di Owner anviantar	Olalao		ποιπρρ	поаьто		roperty	out of
PROPERTY INFORMATION for each property) Township/ Agricultural Holding/ Farm Erf/Plot/Farm No Property size (in m²) Ward Street Name Street Number Bond Restrictive Title Deed	YES If YES, plea		Port	ion (eg /R1		separate copy	
REZONING DETAILS	Existing/Pre	esent					
Town Planning Scheme							
Zoning							
Land Use							
Property Size (m2)				Title Deed	Number		
Height (Scheme)						,	
Density (Scheme)							
Coverage (Scheme)							
Annexure				Amendmer	nt Scheme N	o	
Land Value				Present FA	IR		
Development							
Parking							
Building Line(s)							
Restrictive Title Deed Co paragraph No	ondition						_
	Proposed						
Proposed Zoning	- 1						
Proposed Primary Right use right	or land						
Proposed number of uni	ts						
Proposed Density							
Proposed height							
i ropodda riolgin							
Proposed Coverage (%)							

Building Line(s)				
Estimate project value				
Applicant responsible for request outside comments	Yes	No	N/A	

REQUIRED DOCUMENTS

Please mark with an x					
Application fee receipt	Site Development Plan	Proof of Marital Status			
Covering Letter	Zoning Plan/map	Power of Attorney			
Application Form	Zoning Certificate	Registered Title Deed			
Copy of Identity document	Copy of company registration	Mineral Rights Holder's consent (if applicable)			
Copy of SACPLAN registration	Proof of Members of Company/close Corporation	Consent in terms of Section 2(1)			
Motivating Memorandum	Company/Close Corporation	Bondholders Consent (if registered against the property)			
Land Use Plan	Proof of Newspaper advert (2 consecutive weeks)	Proof of Provincial Government Gazette (2 consecutive weeks)			
Locality Plan	Proof of site notices/ placards photos with the date	Sworn affidavit regarding site notices			

information is correct and that the required documents are attached.	
APPLICANT'S SIGNATURE	DATE

being the Registered Owner / Authorised Agent of the property/ties declare that the above

FOR OFFICIAL USE		
Receipt Amount		
Receipt Number		
Payment Date		
Application Form Date		

The above mentioned documentation will be submitted to:

Municipal Manager:

Ephraim Mogale Local Municipality Physical address: 13 Ficus street, Marble Hall, 0450

Or

Ephraim Mogale Local Municipality Postal address: Box 111, Marble Hall, 0450

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