

EPHRAIM MOGALE LOCAL MUNICIPALITY

REMOVAL/AMENDMENT OF TITLE DEED CONDITIONS AND THE SIMULTANEOUS AMENDMENT OF THE MARBLE HALL TOWN PLANNING SCHEME, 2001, IN TERMS OF THE EPHRAIM MOGALE LOCAL MUNICIPALITY SPATIAL PLANNING AND LAND USE MANGEMENT BY-LAW, 2017, READ WITH REMOVAL OF RESTRICTIONS ACT 1996 (3 of 1996) AND READ IN CONJUCTION 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

Oomadis. 013 201 0400		
A	PPLICANT DETAILS	
Please indicate Type of Applicant	Individual –ID Number	
	Legal – Registration Number	
Appli	icant Details: Individual	
Title		
Initial		
Full name		
Surname		
Preferred name		
ID number		
Gender		
Applicant	t Details: Legal Entity / Other	
Name		
Registration Number		
Representative Name		
Applicant	Physical Details of Applicant	
Physical Address (Work)		
Street number		
Street name		
Township		
City	Postal Code	
Physical Address (Home)		
Street number		
Street name		
Township		

City			Post	al Code		
Арр	licant Postal	Address Details	;			
Postal Type	Po Box			Physical A	ddress (Home)	
,	Private Ba	a		-	ddress (Work)	
Postal Number	1	9		,	(11011)	
Township			Post	al Code		
Specify City						
	licant Commu	ınication Details	•			
E-Mail Address	Tourit Gorinia	mount Dotain				
Cell Phone						
Home Phone						
Work Phone						
Home Fax						
Work Fax						
	E-Mail			SMS		
Preferred Communication Type.	L-IVIAII			SIVIO		
	OWNERS	DETAILS				
Pleas		type of applican	t:			
individual				Legal		
marvidaa			En	tity/other		
	Owner Details	s: individual	l .		<u>I</u>	
Title						
Initial						
Full name						
Surname						
Preferred name						
ID number						
Gender						
Own	er Details: Le	egal Entity/Othe	7			
Name		•				
Registration number						
Representative name						
•	ical Address	Details of Owne	er			
Physical Address (Work)		2014110 07 011110	<u></u>			
Address line 1 (Street no)						
Address line 2 (Street name)						
Township			Post	al Code		
Specify City						
Physical Address (Home)						
Address line 1 (Street no)						
Address line 2 (Street name)						
Township			Pos	tal Code		
Specify City						
Owner Postal Address Details						
Postal type						
Postal Number						
Township						
City						
Communication Details						

E-Mail Address				
Cell Phone				
Home Phone				
Home fax				
Work fax				
Preferred Communication Type	E-Mail		SA	1S
Details of Owner's/Marital Status	Not Ap	plicable	Married in Communit	Married out of
			of Property	Community of
PROPERTY INFORMATION Please comporoperty)	plete this section for			by for each
Township/ Agricultural Holding/ Farm		Portion ((eg /R1)	
Erf/Plot/Farm No				
Ward				
Street Name				
Street Number				
REZONING DETAILS	ISTING/PRESENT			
Town Planning Scheme				
zoning				
Property Size (m ²)		-	Title Deed Number	
Bond (Yes/No)			Yes	No
If yes specify Bond Account No			700	740
Bondholder's Name				
Existing Development				
Restrictive Title Deed Condition				
paragraph No				
	ROPOSED			
use Zone				
Primary Right				
number of units				
Density				
Height Units				
Proposed Coverage (%)				
Proposed FAR				
Estimate project value				
Applicant responsible for request outside comments	Yes		No	N/A
REMO	OVAL OF RESTRICT	TIONS IN TI	TLE DEED	
Removal of conditions (According to the Title Deed)				

Amendment of condition/s					
Reason for Amendment or Removal of Conditition/s					
Indicate whether the property/ties is/are single included in a register of pro	tuated in a conservation area or has/have operties worthy of conservation	e been	Yes	No	
Does the property have any endangered	plant or animal species, which will be Sp	ecify	Yes	No	
REQUIRED DOCUMENTS		·			
Application fee	Site Plan	Proof of	Marital Stat	tus	
Covering Letter	Zoning Plan		of Attorney		
Application Form	Zoning Certificate	Registered Title Deed			
Motivating Memorandum	Company/Close Corporation	Bondholders Consent (if applicable)			
Land Use Plan	Proof of Members of	Consent in terms of		:	
Locality Plan	Company/close Corporation		Section 2(1)		
Affidavit	Proof of Placard Photos or site notices	Proof of Advertisements consecutive weeks)			
Proof of Provincial Government gazette (2 consecutive weeks)	Company resolution(if applicable)				
,					
being the Registered Owner / Authorisinformation is correct and that the req	sed Agent of the property/ties declare tha uired documents are attached.	t the above			
SIGNATURE	DA	TE			
	FOR OFFICIAL LISE				
Pagaint Amount	FOR OFFICIAL USE				
Receipt Amount Receipt Number					
•					
Payment Date					
Application Form Date					

The abovementioned documentation will be submitted to:

Municipal Manager:

Ephraim Mogale Local Municipality

Physical address: 13 Ficus street, Marble Hall, 0450

Or

Ephraim Mogale Local Municipality

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