## **INCOME DEPARTMENT**



## **INKOMSTE DEPARTEMENT**

(Application for water rebate as approved tariff W2J) refer to policy #6.8

WATER REBATE APPLICATION FORM								
Erf no:	Suburb/Ward:		Vard:			Account #:		
Indicate: √	Residential	Business	Flat	Grou	up Development	Other:		
			•	•				
Full names:								
Surname:	ID Number:							
Postal Address:								
i ostal Address.	Postal Code:							
Physical Address:	Postal Code:							
Home Tel. #:	Work Tel. #:			Mobile #:				
Email Address:								
I, the undersigned, hereby apply for a water rebate for the abovementioned erf in terms of the approved     Municipal Customer Care, Credit Control and Debt Collection Policy:								
2) Water leakage discount will not be considered in the instance of irrigation systems.								
· ·	A customer will qualify for a Water leak Discount upon application on the prescribed form within 60 days after the leak has been repaired and which application will only be regarded as a valid application if complete							
information a	ion and documentation as prescribe is received.							
4) I understand that the application is subject to the following:								
(i). The leak was repaired within 10 working days since its detection;								
(ii). The loss of water resulted from malicious damage to external pipes& fittings and where this act was reported to the South  African Police Service and a case number was allocated;								
(iii). Applied o	only once in a cycle of 30 months							
(iv). Proof of repair and costs or a sworn affidavit from any person who has repaired the leak								
(v). Date of repair								
	of detection							
• Date	of repair							
				Declaration: I hereby declare that all documents and information				
					provided are correct and not false.			
Applicant Signature						aca are correct	and not raise.	
					Applicant Name & Signature			
<del></del>								
Date								
Rebate: Approv	ved Not A	pproved.	Signed by :			Date:		
Correction complet :	ed by Sign	ature:				Date:		