



**APPLICATION FOR AGRICULTURAL RATES TARIFF Local Government: Municipal Property
Rates Act, 2004. Section 15**

PROPERTY INFORMATION

Farm Name	
Farm Number	
Portion Number	
Regional District (Caledon or Bredasdorp)	
Registered Owner Name	
Owner's Postal address	
Postal Code	
Contact telephone numbers	
Email Address	
Municipal Account number	

PLEASE ATTACH A CERTIFIED COPY OF YOUR ID

THIS DECLARATION MUST BE SIGNED BY THE OWNER/FARMER

Herewith I declare _____, (Name & Surname)

ID nr: _____ that farm nr _____portion _____ is being

utilised for **bona fide landbou purposes**. I further declare that I will notify the Municipality immediately of any changes to the above information.

Signed: _____ Date::_____

In the case of misrepresentation or false declaration, the Municipality reserves the right to refuse the approval of the tariff, to recover any rebates if already granted and may institute appropriate legal action civil or otherwise, against guilty party(ies).

OUTCOME OF APPLICATION							
PRINCIPLE CLERK RECOMMEND		NOT APPROVED		SIGNATURE		DATE	
ACCOUNTANT APPROVED		NOT APPROVED		SIGNATURE		DATE	
IF NOT APPROVED PROVIDE REASON							