

APPLICATION FOR REBATE : PENSIONERS

Are you a South African Citizen?_____	Y	N
Are you the owner of this property?_____	y	N
Is this your only property in South Africa?_____	y	N
Do you occupy this property permanently?_____	y	N
Do you let a room or any part of the property?_____	y	N

SUBURB		ERF NR		MUNICIPAL ACCOUNT NR															
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RESIDENTIAL ADDRESS	
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SECTION A: PERSONAL INFORMATION OF OWNER

NAME		SURNAME	
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IDENTITY NUMBER														
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CELL NUMBER														
ALTERNATIVE CONTACT NR														

E-MAIL ADDRESS	
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INFORMATION REGARDING SPOUSE OR ANY OTHER PERSON PRESIDING ON THIS PROPERTY

NAME		SURNAME	
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IDENTITY NUMBER														
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CELL NUMBER														
ALTERNATIVE CONTACT NR														

E-MAIL ADDRESS	
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SECTION B: FINANCIAL INFORMATION (COMPULSORY)

Monthly Income (Proof to be attached)

Full or Part-time Salary
State pension
Private pension
Disability grant
Maintenance
Other

OWNER/APPLICANT	SPOUSE/OTHER
R	R
R	R
R	R
R	R
R	R
R	R

SECTION B: FINANCIAL INFORMATION (COMPULSORY) - CONTINUES**Interest received / Investment Income** (Statements to be attached)

COMPANY	OWNER/APPLICANT	SPOUSE / OTHER
	R	R
	R	R
	R	R
	R	R

Income from other sources (Rent / Boarding) or Family assistance (Bank statements to be attached)

DESCRIPTION	OWNER/APPLICANT	SPOUSE / OTHER
	R	R
	R	R
TOTAL INCOME	R	R

SECTION C: SUPPORTING DOCUMENTS AND DECLARATION

- ☐ Proof of income of the owner and spouse/other and 3 months bank statements of all accounts from all financial institutions
- ☐ **Certified** Copies of ID documents (owner and spouse/other)
- ☐ Salary slips (if applicable)
- ☐ Proof of pension (private or state)
- ☐ Proof of disability (medical certificate)
- ☐ Proof of investments / dividends
- ☐ Proof of usufruct/habitation/executor/administrator or curator
- ☐ Proof of trust document and income of all beneficiaries
- ☐ If property is registered in multiple owners; copy of ID of applicant (person residing) and proof of income for all owners are required
- ☐ If the property is registered in the name of a Close Corporation (CC); copy of ID of applicant (person residing) and proof of income for all other members are required
- ☐ Copy of death certificate or copy of will (if applicable)

Declaration

- I hereby acknowledge that Overstrand has the right to conduct a full credit check on any person applying for rebate in order to assess the application and that they may request any other documents if deems necessary to substantiate the application.
- I further acknowledge that should it transpire that any information was knowingly/unlawfully/incorrectly recorded/supplied by me, Overstrand has the right to withdraw any rebate granted and recover any such rebate. Overstrand will raise interest on such accounts where such rebates were fraudulently obtained, and reserve the right to take further action against any person/s that provided the false information.
- I declare that all the required information I have been provided and all relevant documentation have been attached

Owner Name

Signature

Co-owner Name

Signature

Date

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