

**FORM C: AGRICULTURAL HOLDINGS OR FARMS  
BEAUFORT WEST MUNICIPALITY**



**THE CHAIRPERSON: VALUATION APPEAL BOARD**

APPEAL NUMBER:

LOGGING AN APPEAL AGAINST THE DECISION OF THE MUNICIPAL VALUER REGARDING A MATTER REFLECTED IN, OR OMITTED FROM, THE GENERAL VALUATION ROLL FOR THE PERIOD 1 JULY 2024 TO 30 JUNE 2029.

**SECTION 1: APPELLANT INFORMATION**

**1.1 APPELLANT IS THE OWNER**

NAME OF REGISTERED OWNER OF PROPERTY \_\_\_\_\_

IDENTITY NO. \_\_\_\_\_ COMPANY OR C.C REGISTRATION NO. \_\_\_\_\_

PHYSICAL ADDRESS OF OWNER \_\_\_\_\_ CODE \_\_\_\_\_

POSTAL ADDRESS OF OWNER \_\_\_\_\_ CODE \_\_\_\_\_

TELEPHONE NO. HOME \_\_\_\_\_ WORK \_\_\_\_\_

CELL \_\_\_\_\_ FAX \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_

**1.2 APPELLANT IS NOT THE OWNER OR MUNICIPALITY IS THE APPELLANT**

NAME OF APPELLANT \_\_\_\_\_

IDENTITY NO. \_\_\_\_\_ COMPANY OR C.C REGISTRATION NO. \_\_\_\_\_

PHYSICAL ADDRESS OF APPELLANT \_\_\_\_\_ CODE \_\_\_\_\_

POSTAL ADDRESS OF APPELLANT \_\_\_\_\_ CODE \_\_\_\_\_

TELEPHONE NO. HOME \_\_\_\_\_ WORK \_\_\_\_\_

CELL \_\_\_\_\_ FAX \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_

**1.3 AUTHORISED REPRESENTATIVE OF THE APPELLANT\***

NAME OF REPRESENTATIVE \_\_\_\_\_

POSTAL ADDRESS \_\_\_\_\_ CODE \_\_\_\_\_

TELEPHONE NO. HOME \_\_\_\_\_ WORK \_\_\_\_\_

CELL \_\_\_\_\_ FAX \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_

**\* IF A REPRESENTATIVE IS APPOINTED, PROOF OF AUTHORISATION MUST BE ATTACHED, TO THIS FORM**

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**SECTION 2: PROPERTY DETAILS (FOR SECTIONAL TITLES SEE SECTION 4)**

PHYSICAL ADDRESS \_\_\_\_\_ CODE \_\_\_\_\_

EXTENT OF PROPERTY (m<sup>2</sup>) \_\_\_\_\_

MUNICIPAL ACCOUNT NO \_\_\_\_\_ (if available)

NAME OF BONDHOLDER \_\_\_\_\_ REGISTERED AMOUNT OF BOND \_\_\_\_\_ (if applicable)

PROVIDE FULL DETAILS OF ALL SERVITUDES, ROAD PROCLAMATIONS OR OTHER ENDORSEMENTS AGAINST THE PROPERTY (if applicable) \_\_\_\_\_

SERVITUDE NO. \_\_\_\_\_ AFFECTED AREA (m<sup>2</sup>) \_\_\_\_\_

IN FAVOUR OF \_\_\_\_\_

FOR WHAT PURPOSE \_\_\_\_\_

WAS COMPENSATION PAID? YES \_\_\_\_\_ NO \_\_\_\_\_ IF YES DATE OF PAYMENT \_\_\_\_\_ AMOUNT R \_\_\_\_\_

**SECTION 3: DESCRIPTION OF RESIDENTIAL DWELLING ( FOR SECTIONAL TITLES SEE SECTION 4 ) ( INDICATE NUMBER OR STATE YES / NO )**

**3.1 MAIN DWELLING**

NO OF BEDROOMS \_\_\_\_\_ NO OF BATHROOMS \_\_\_\_\_ KITCHEN \_\_\_\_\_ LOUNGE \_\_\_\_\_ DINING ROOM \_\_\_\_\_

LOUNGE WITH DINING ROOM \_\_\_\_\_ STUDY \_\_\_\_\_ PLAYROOM \_\_\_\_\_ TELEVISION \_\_\_\_\_ LAUNDRY \_\_\_\_\_ SEPARATE TOILET \_\_\_\_\_

OTHER \_\_\_\_\_ OTHER \_\_\_\_\_ OTHER \_\_\_\_\_ OTHER \_\_\_\_\_

**3.2 OTHER BUILDINGS – ATTACH AS ANNEXURE A**

BUILDING NO. \_\_\_\_\_ DESCRIPTION \_\_\_\_\_ SIZE (m<sup>2</sup>) \_\_\_\_\_ CONDITION \_\_\_\_\_ IS THE BUILDING FUNCTIONAL ? \_\_\_\_\_

**3.3 IS ANY PORTION OF THE PROPERTY USED FOR ANY PURPOSE OTHER THAN AGRICULTURAL? (e.g. Business, mining, eco-tourism, trading in or hunting of game)**

Tick YES \_\_\_\_\_ NO \_\_\_\_\_

IF YES: DESCRIBE THE USE(S) \_\_\_\_\_

IF NECESSARY PROVIDE ANNEXURE B

**3.4 LAND ANALYSIS:**

NON-AGRICULTURAL (REFER TO 3.3) (ha) \_\_\_\_\_ GRAZING (ha) \_\_\_\_\_ UNDER IRRIGATION (ha) \_\_\_\_\_

DRY LAND (ha) \_\_\_\_\_ PERMANENT CROPS (ha) \_\_\_\_\_ OTHER (ha) \_\_\_\_\_ OTHER (ha) \_\_\_\_\_ OTHER (ha) \_\_\_\_\_

TOTAL (ha) \_\_\_\_\_ CONDITION OF FENCES: GOOD \_\_\_\_\_ AVERAGE \_\_\_\_\_ POOR \_\_\_\_\_ AREA GAME FENCED (ha) \_\_\_\_\_

No. OF BOREHOLES \_\_\_\_\_ OUTPUT LITRES/HOUR DAMS CAPACITY \_\_\_\_\_

IS THE PROPERTY EXPOSED TO A RIVER? YES \_\_\_\_\_ NO \_\_\_\_\_

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**3.5 OTHER**

IS YOUR PROPERTY AFFECTED BY LAND CLAIM? YES \_\_\_\_\_ NO \_\_\_\_\_ IF YES, DATE OF CLAIM \_\_\_\_\_ GAZETTE NO \_\_\_\_\_

DO YOU HAVE WATER RIGHTS? YES \_\_\_\_\_ NO \_\_\_\_\_

IF YES, GIVE DETAILS: \_\_\_\_\_

HAVE YOU APPLIED FOR A REZONING OR CONSENT USE? YES \_\_\_\_\_ NO \_\_\_\_\_  
(CONSENT USE e.g as guest houses, business, etc.)

IF YES, GIVE DETAILS: \_\_\_\_\_

HAS YOUR AGRICULTURAL HOLDINGS PROPERTY BEEN EXCISED YES \_\_\_\_\_ NO \_\_\_\_\_ IF YES: NEW FARM DESCRIPTION \_\_\_\_\_

HAS THE TOWNSHIP APPLIED FOR OR PROCLAIMED? YES \_\_\_\_\_ NO \_\_\_\_\_

IF YES, GIVE DETAILS: \_\_\_\_\_

**TENANT AND RENT INFORMATION - ANNEXURE C**

NAME OF TENANT \_\_\_\_\_ SIZE \_\_\_\_\_ RENTAL (EXCL VAT) \_\_\_\_\_ ESCALATION \_\_\_\_\_

OTHER CONTRIBUTIONS \_\_\_\_\_ TERM OF LEASE \_\_\_\_\_ START DATE \_\_\_\_\_ USE \_\_\_\_\_

**SECTION 4: MARKET INFORMATION**

IF YOUR PROPERTY IS CURRENTLY ON THE MARKET WHAT IS THE ASKING PRICE?

R \_\_\_\_\_ OFFER RECEIVED R \_\_\_\_\_

IF YOUR PROPERTY HAS BEEN ON THE MARKET IN THE LAST 3 YEARS WHAT WAS THE ASKING PRICE?

R \_\_\_\_\_ OFFER RECEIVED R \_\_\_\_\_

NAME OF AGENT \_\_\_\_\_ TEL NO. \_\_\_\_\_

SALES TRANSACTIONS (OF OTHER PROPERTIES IN THE VICINITY) USED BY APPELLANT IN DETERMINING THE MARKET VALUE OF THE PROPERTY APPEALED TO

ERF/UNIT NO. \_\_\_\_\_ SUBURB/FARM/SCHEME NAME \_\_\_\_\_

DATE OF SALE \_\_\_\_\_ SELLING PRICE \_\_\_\_\_

**SECTION 5: APPEAL DETAILS**

PARTICULARS AS REFLECTED IN VALUATION ROLL CHANGES REQUESTED BY APPELLANT

DESCRIPTION OF THE PROPERTY/UNIT NO. \_\_\_\_\_

PHYSICAL ADDRESS . \_\_\_\_\_

CATEGORY \_\_\_\_\_

EXTENT \_\_\_\_\_

MARKET VALUE \_\_\_\_\_

WITH EFFECT DATE \_\_\_\_\_

NAME OF OWNER \_\_\_\_\_

ADVERSE FEATURES AND/OR FURTHER REASONS IN SUPPORT OF THIS APPEAL (ANNEXURE CAN BE PROVIDED) \_\_\_\_\_

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**SECTION 6: DECLARATION**

ATTENTION IS HEREBY DRAWN TO SECTION 42(2) OF THE ACT WHICH STATES THAT WHERE ANY DOCUMENT, INFORMATION OR PARTICULARS WERE NOT PROVIDED WHEN REQUIRED IN TERMS OF SUBSECTION 42(1) OF THE ACT AND THE OWNER CONCERNED RELIES ON SUCH DOCUMENT, INFORMATION OR PARTICULARS IN AN APPEAL TO AN APPEAL BOARD, THE APPEAL BOARD MAY MAKE AN ORDER AS TO COSTS IN TERMS OF SECTION 70 OF THE ACT IF THE APPEAL BOARD IS OF THE VIEW THAT THE FAILURE TO SO HAVE PROVIDED ANY SUCH DOCUMENT, INFORMATION OR PARTICULARS HAS PLACED AN UNNECESSARY BURDEN ON THE FUNCTIONS OF THE MUNICIPAL VALUER OR THE APPEAL BOARD.

I / WE \_\_\_\_\_ HEREBY DECLARE THAT THE INFORMATION AND PARTICULARS SUPPLIED  
ARE TRUE AND CORRECT  
DATE YEAR \_\_\_\_\_ MONTH \_\_\_\_\_ DAY \_\_\_\_\_ SIGNATURE \_\_\_\_\_

**OFFICIAL USE**

**SECTION 7: DECISION OF THE VALUATION APPEAL BOARD**

DESCRIPTION OF THE PROPERTY/UNIT NO. \_\_\_\_\_ CATEGORY \_\_\_\_\_

PHYSICAL ADDRESS/DOOR NO/FLAT NO. \_\_\_\_\_ EXTENT \_\_\_\_\_

MARKET VALUE \_\_\_\_\_ NAME OF OWNER \_\_\_\_\_

With Effect Date YEAR \_\_\_\_\_ MONTH \_\_\_\_\_ DAY \_\_\_\_\_

REASONS \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name of the Chairperson: Valuation Appeal Board \_\_\_\_\_

DATE: YEAR \_\_\_\_\_ MONTH \_\_\_\_\_ DAY \_\_\_\_\_ SIGNATURE \_\_\_\_\_

**SECTION 8: NOTIFICATION OF OUTCOME**

	SIGNATURE	PRINT NAME	DATE
VALUATION ROLL ADJUSTED	_____	_____	_____
APPELLANT NOTIFIED	_____	_____	_____
OWNER NOTIFIED	_____	_____	_____