



**APPLICATION  
FOR  
AGRICULTURAL  
RATES REBATE  
2014/2015**

ACCOUNT NUMBER : \_\_\_\_\_

Registered owner(s) : \_\_\_\_\_

Farm/erf nr \_\_\_\_\_, portion \_\_\_\_\_, known as \_\_\_\_\_ (farm name)

Is property being rented/leased	YES	NO	If yes, provide name of tenant
Are you, the farmer, registered as such with the South African Revenue	YES	NO	
Tick the appropriate block :	Usage		
A Farming			
B Smallholding (Small farming activity)			
C Smallholding (Residential)			

Describe all activities performed on the property :

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**PLEASE NOTE :**

1. SARS should tax the owner/tenant as a farmer and the last tax assessment must be provided as proof.
2. If not taxed as a farmer, the owner/tenant must produce proof that income from farming activities exceeds 40 % of the household income.
3. An application for an agricultural rates rebate must be submitted before 31 May of the relevant financial year.
4. If the rebate is granted the rebate will be valid for four (4) years or up to the next General Valuation whichever comes first after which the owner must re-apply for a rebate.
5. The owner must declare in an affidavit that no contraventions of the zoning schemes are taking place on the property. It is the responsibility of the owner to inform the Municipality of any changes in the status of the property on which a rebate is granted.
6. All applications for rebates etc. will require the applicant's municipal account to be up to date or the conclusion of a suitable arrangement in this regard.

**AFFIDAVIT**

I undertake to notify Beaufort West Municipality immediately should any change occur in the use of the property or the conditions conferring a rates rebate in terms of the Municipal Systems Act of 2000 and the rating policy for 2008/2009 as approved by Council.

I further acknowledge that should it transpire that any information was knowingly/unlawfully/incorrectly recorded/ supplied by me, Beaufort West Municipality has the right to withdraw any rebate granted and recover any such rebate. The Municipality will raise interest on such accounts where such rebates were fraudulently obtained and reserve the right to take further action against any person/s who supplied the false information.

Deponent's Signature \_\_\_\_\_

Tel number \_\_\_\_\_

Date \_\_\_\_\_

I certify that the Deponent has acknowledged that he/she knows and understands the contents of the above declaration, which was sworn, to/truly affirmed before me.

At this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_

\_\_\_\_\_  
Commissioner of Oaths  
(Official stamp & signature)

**OFFICE USE**

Reference number	
Received by	Date
Checked by	Date
Approved by	Date
Processed by	Date