



UMHLALBUYALINGANA MUNICIPALITY

Postal: Private Bag X901, Kwa-Ngwanase, 3973
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APPLICATION FOR MPRA REBATE

APPLICANT DETAILS

TITLE	<input type="text"/>	INITIALS	<input type="text"/>	DATE OF BIRTH	<input type="text"/>	<input type="text"/>	<input type="text"/>	
FULL NAME & SURNAME (Owner)	<input type="text"/>							
IDENTITY NUMBER	<input type="text"/>			GENDER	<input type="checkbox"/>	MALE	<input type="checkbox"/>	FEMALE
NAME OF ESTABLISHMENT	<input type="text"/>							
COMPANY / C.C. OR TRUST NUMBER	<input type="text"/>							
RATE NUMBER	<input type="text"/>	WASTE ACC NO	<input type="text"/>					
ELECTRICITY ACC NO	<input type="text"/>							
ERF DESCRIPTION	<input type="text"/>							
TOWN	<input type="text"/>							
	<input type="text"/>			POSTAL CODE	<input type="text"/>			
POSTAL ADDRESS	<input type="text"/>							
	<input type="text"/>			POSTAL CODE	<input type="text"/>			
CELLULAR PHONE NUMBER (Preferred)	<input type="text"/>			WORK NO	<input type="text"/>	<input type="text"/>		
E-MAIL ADDRESS	<input type="text"/>							
DOMICILIUM CITANDI ET EXECUTANDI (Service address for legal process)	<input type="text"/>							
	<input type="text"/>			POSTAL CODE	<input type="text"/>			

DECLARATION

I, the undersigned, _____, do hereby declare that the above property is my primary property on which I reside permanently and all of the information supplied is to the best of my knowledge, true and correct.

SIGNATURE

DATE

Establishment	Total size of developed area	Total no of bedrooms	Conference	FACILITY OR DEVELOPMENT OFFER ON GUEST		
				Restaurant	Spar	Other
Bed and Breakfast						
Guesthouse						
Other						

DOCUMENTS TO ACCOMPANY THIS APPLICATION

1. Copy of Identity Document of applicant
2. Certified copy of business license (if available)
3. Certified copy of registration with member association
4. Certified copy of Special Consent approval from the Municipal Town Planning Department
5. Certified copy of Constitution of establishment

QUALIFYING CRITERIA

- a) The owner of the property must permanently reside on the property. In the case of a Company, Close Corporation or Trust being the registered owner, at least one member / director thereof must reside permanently on the property, subject to any of the members of such Companies, Close Corporation and Trusts not being a member of another Company, Close Corporation or Trust that owns a Bed & Breakfast establishment or a Guest House;
- b) The Bed & Breakfast / Guesthouse must be registered with a properly constituted organization/s as may be approved by the Municipality from time to time;
- c) The Bed & Breakfast / Guesthouse must offer accommodation and dining facilities only to registered guests.
The applicant must provide details of the establishment in respect of total size of developed property, total number of rooms, and facilities available to guests.
- d) An annual application must be made by 30 April preceding the start of the new financial year for which relief is sought;

NOTE: All documents must be addressed to; The Municipal Manager using the postal address above. Enquiries; ziphom@mhlbuyalingana.gov.za

FOR OFFICE USE ONLY

Received by (Name and Surname): _____ Signature: _____

Date: _____ Date capture in the system: _____

Checked for by: _____ Signature: _____