

## Application for Pensioner Rebate on Property Rates for ages 70 and above

Period: From 1 July 2024 – 30 June 2027

### CONDITIONS

Pensioners must be 70 years of age or older at the time of application, own the property and personally occupy the property. The market value threshold is R2million (inclusive of the residential threshold value) on all successful applications. Rates will be levied on the market value in excess of R2million. The pensioner will qualify for a 100% rebate on rates, irrespective of income up to a market value of R2million, on successful application. The rebate is applicable to one property only, should the applicant own more than one property.

#### Important

Please attach: a certified copy of Identity Document.

**NB.:** only a signed application form together with a certified copy of your Identity Document will be accepted for further processing. Failure to provide the required documentation will result in the application not being approved.

**Note:** The rebate will be applied from date of application

Rates Account Number:

### Personal Details of the property owner and his/her spouse

Indicate with a cross:

male	female	married	single	widow	widower
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Surname: \_\_\_\_\_

First names: \_\_\_\_\_

Date of birth:     /   /

Identity number:

#### Spouse

Surname: \_\_\_\_\_

First names: \_\_\_\_\_

Date of Birth:     /   /

Identity number:

#### Addresses

Street address: \_\_\_\_\_  
\_\_\_\_\_

City/Suburb: \_\_\_\_\_ Postal code: \_\_\_\_\_

Postal address: \_\_\_\_\_  
\_\_\_\_\_

City/Suburb: \_\_\_\_\_ Postal code: \_\_\_\_\_

#### Contact details

Home Tel: \_\_\_\_\_ Cell No: \_\_\_\_\_

Work Tel: \_\_\_\_\_ Fax No: \_\_\_\_\_

Email: \_\_\_\_\_

Indicate with a cross whether you occupy the above mentioned property:  Yes  No

How many houses/ living units are there on the above mentioned property?



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**Freehold Title ownership**

Stand number: \_\_\_\_\_ Portion number: \_\_\_\_\_

Suburb: \_\_\_\_\_

Indicate with a cross whether you occupy the above-mentioned property:

How many houses/ living units are there on the above-mentioned property?

**Sectional Title ownership**

Name of Body Corporate: \_\_\_\_\_

Unit number: \_\_\_\_\_ Door number: \_\_\_\_\_

Indicate with a cross whether you occupy the above-mentioned property:

**Declaration**

Thus signed and sworn to, before me at \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_

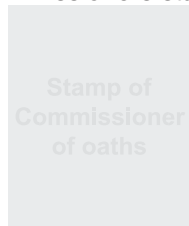
\_\_\_\_\_

\_\_\_\_\_

Signature of Applicant

Commissioner of Oaths

Commissioners stamp



**This form must be submitted to your closest City of Joburg Customer Service Centre and a reference number must be provided by the official taking in the application.**

**NO E-MAIL APPLICATIONS WILL BE ACCEPTED.**

For office use: **Ref nr:** \_\_\_\_\_ **Date of submission** \_\_\_\_\_

**Check - Please attach (tick):**

Certified ID copies not older than 3 months	
Applicant(s) occupies the property	
Commissioner of oaths stamp (not older than three (3) months)	