



RATES REBATE APPLICATION FOR OWNERS DEPENDENT ON PENSION OR SOCIAL GRANTS FOR THE NEW GENERAL VALUATION (GV2018) PERIOD: JULY 2019 - JUNE 2022

SECTION A: PERSONAL INFORMATION OF APPLICANT

Title	<input type="text"/>	Name	<input type="text"/>		
Surname	<input type="text"/>		Maiden name	<input type="text"/>	
Identity number	<input type="text"/>		Please attach a copy of ID book/card		
Cell number	<input type="text"/>		Alternative cell number	<input type="text"/>	
Email address	<input type="text"/>				

Spouse/partner's personal information

Title	<input type="text"/>	Name	<input type="text"/>		
Surname	<input type="text"/>		Maiden name	<input type="text"/>	
Identity number	<input type="text"/>		Please attach a copy of ID book/card		
Cell number	<input type="text"/>		What is your relationship to the applicant?	<input type="text"/>	

SECTION B: ADDRESS

Erf number	<input type="text"/>	Municipal account number	<input type="text"/>
Home address	<input type="text"/>		
	<input type="text"/>		
Postal address	<input type="text"/>		

Are you or your spouse/partner a registered property owner in South Africa or abroad? Y N

SECTION C: FINANCIAL INFORMATION (COMPULSORY)

Note: In order to qualify for a rebate the gross monthly household income must not exceed R17 500.

Monthly income (indicate if proof is attached ✓)

	Applicant	Spouse/partner	✓
Full or part-time salary	<input type="text"/>	<input type="text"/>	<input type="text"/>
Monthly pension	<input type="text"/>	<input type="text"/>	<input type="text"/>
State pension	<input type="text"/>	<input type="text"/>	<input type="text"/>
Private pension	<input type="text"/>	<input type="text"/>	<input type="text"/>
Disability grant	<input type="text"/>	<input type="text"/>	<input type="text"/>
Maintenance	<input type="text"/>	<input type="text"/>	<input type="text"/>
Rental / lease agreement	<input type="text"/>	<input type="text"/>	<input type="text"/>

Interest on investments (bank statement to be attached)

Name and type of investment	<input type="text"/>	<input type="text"/>	<input type="text"/>
Name and type of investment	<input type="text"/>	<input type="text"/>	<input type="text"/>
Board and lodging (proof/affidavit)	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other	<input type="text"/>	<input type="text"/>	<input type="text"/>
Total income	<input type="text"/>	<input type="text"/>	

SECTION D: SUPPORTING DOCUMENTS AND DECLARATION

Please indicate which documents have been submitted with this application form:

- ☐ Proof of income for the owner & spouse/partner and 3-months' non-internet bank statement for all banking accounts from all financial institutions.
- ☐ Copies of ID (applicant and spouse/partner).
- ☐ Salary slips (if applicable).
- ☐ Proof of pension (i.e. private or state pension).
- ☐ Proof of disability (i.e. medical certificate or letter from your employer).
- ☐ Proof of investments/dividends.
- ☐ Copies of lease agreement (if you own additional property).
- ☐ 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 the City has the right to conduct a full credit check on any person applying for any rebate in order to assess the application and that the City may request any other documents it deems necessary to substantiate the application.

I further acknowledge that should it transpire that any information was knowingly/unlawfully/incorrectly recorded/supplied by me, the City of Cape Town has the right to withdraw any rebate granted and recover any such rebate. The City 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 have been provided and that all relevant documentation have been attached.

Applicant's name and surname

Date

D	D	M	M	Y	Y	Y	Y
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Signature