



**uMNGENI MUNICIPALITY  
APPLICATION FOR A (30%) REBATE ON RATES IN RESPECT OF PROPERTY  
OWNED AND OCCUPIED BY PENSIONERS OR PERSONS WITH DISABILITIES IN TERMS  
OF THE RATES POLICY FOR 2024/2025**

**AFFIDAVIT**

I, ..... FULL NAME  
IDENTITY NO. .... PHONE NO. ....

Do solemnly affirm, make, and say:

1. That I am the registered owner and occupier of  
.....  
(Address of rateable property in question) (**Account number**)  
.....  
Lot No. .... (May be obtained on enquiry from the helpdesk at the  
Finance Department)

Email address:.....

2. My annual income is R .....

3. My spouse's annual income is R .....

4. \*\* The total annual income of all persons residing on the property is R .....

The sources of the annual income of myself\* / and my spouse are as follows:

<u>Self</u>	<u>Spouse</u>
.....	.....
.....	.....

5. I was born on.....

6. I apply in terms of Policy (as amended) for a rebate as determined by Council in respect of the general rates on said property.

APPLICANT: .....

Sworn / affirmed at Howick this ... day of ..... 20.. before me, the deponent having acknowledged that he / she knows and understands the contents hereof and considers the prescribed oath / affirmation administered by me to be binding on his / her conscience.

**FULL NAME** ..... **COMMISSIONER OF OATHS**

Ex Officio Address: ..... Signature .....

\*\* In cases where the property is jointly owned the total income of all owners in occupation must be given and / or all persons residing on the property.

**PS: A CERTIFIED COPY OF IDENTITY DOCUMENT & PROOF OF INCOME MUST ACCOMPANY THIS DOCUMENT!!!**