



APPLICATION FOR REBATE

PUBLIC BENEFIT ORGANIZATIONS
2010/2011

TO BE SUBMITTED BY 30 APRIL EACH YEAR
PLEASE COMPLETE IN BLOCK LETTERS

DETAILS:

FULL NAME OF ORGANISATION:	<input type="text"/>																										
NAME OF PRINCIPAL/CHAIRPERSON:	<input type="text"/>																										
IDENTITY NUMBER	<input type="text"/>																										
PUBLIC BENEFIT ORGANISATION NO:	<input type="text"/>																										
PROPERTY / ERF DESCRIPTION:	<input type="text"/>																										
RATE NO:	<input type="text"/>								WATER ACC NO:	<input type="text"/>																	
ELECTRICITY ACC NO:	<input type="text"/>																										
STREET NUMBER	<input type="text"/>				STREET NAME	<input type="text"/>																					
SUBURB	<input type="text"/>																										
CITY / TOWN	<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"/>													OFFICE 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"/>							

IS THE PROPERTY OR ANY PART OF IT LEASED? _____

(if YES please supply copy of lease)

STATE PURPOSE FOR WHICH PROPERTY IS USED: _____

DECLARATION

I, the undersigned, _____, in my capacity as chairperson of the above organization, do hereby declare that the information supplied is to the best of my knowledge, true and correct. The above mentioned property is being used for the purposes as stated above.

SIGNATURE OF PRINCIPAL / CHAIRPERSON _____

DATE _____

ORGANISATION
STAMP

DOCUMENTS TO ACCOMPANY THIS APPLICATION

1. Certified copy of Identity document of applicant
2. One copy each of all municipal accounts i.e. water, electricity, rates (not older than 3 months)
3. Current income tax exemption certificate as issued by SARS
4. Most recent copy of Organisations Audited financial statements
5. Confirmation of Organisations PBO status

QUALIFYING CRITERIA

- a. The applicant must make an annual application;
- b. Applications must be in writing in the prescribed form and must reach the Municipality before 30 April;
- c. The applicant must produce a tax exemption certificate issued by the South African Revenue Services (SARS) as contemplated in Part 1 of the Ninth Schedule of the Income Tax Act, 1962 (Act 58 of 1962);
- d. The Municipal Manager or his/her nominee must approve all applications;
- e. The municipality retains the right to refuse an application if the details supplied in the application form are incomplete, incorrect or false;
- f. The use of any land or buildings, or any part thereof, shall not be for the private pecuniary benefit of any individual, whether as a shareholder in a company or otherwise;
- g. If during the currency of any financial year, any such land or building is used for any purpose other than the purpose for which it was so granted a rebate, the Municipality shall impose rates thereon or on such portion so used, at a rate proportionate to the period of such use.
- h. The Applicant shall not be state owned;
- i. Once the application is granted, the Applicant is required to submit annually, an Affidavit confirming the use of the property.

FOR OFFICE USE ONLY

Date Received by Council: _____ **Name of Receiving Official:** _____

Signature of Receiving Official: _____