

Application for Pensioner Rebate on Property Rates

From 1 July 2021 to 30 June 2022

CONDITIONS

Pensioners must be 60 years of age or older, own property and personally occupy the property. The property value must not exceed R2 500 000. Pensioners dependent on a National Security Grant qualify for a 100% rebate on successful applications.

Pensioners who are not on National Security Grant, but whose gross monthly income falls below R10 545 qualify for 100% rebate on successful application. Pensioners who are not on National Security Grant, but whose gross monthly income is above R10 545 but less than R18 073 qualify for 50% rebate on successful application. In case of dual ownership, at least one of the owners must be 60 years of age or older. The rebate is applicable to one property only should the applicant own more than one property. In the case of dual ownership, at least one of the owners must be at least 60 years of age.

Important

Please attach the following certified documents: Copy of Identity Document, Proof of Monthly Income AND previous income tax year final assessment from SARS. It is important to note that only a signed form together with all the relevant documentation (as mentioned in the sections below) will be accepted for further processing. Failure to provide the required documentation will result in the application not being approved. If your financial position changes please let us know.

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:

y	y	y	y	/	m	m	/	d	d
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Identity number:

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Spouse

Surname:

First names:

Date of Birth:

y	y	y	y	/	m	m	/	d	d
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Identity number:

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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:

Yes

No

Financial Details

Name of Body Corporate: _____

Unit number _____
Door number: _____

Door number: _____

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

Yes

No

Financial Information

Monthly Income (Please attach proof of monthly income)

Monthly Income	Applicant	Spouse
Salary/Wages (attach a copy of your pay slip)	R	R
Name of Employer:		
Start date of employment:		
Interest on investments (attach bank statement)		
Name and type of investment:	R	R
Name and type of investment:		
Others:		
Monthly Pension (attach copy of pension card)		
Pension fund Name):		
Pension fund number):		
State disability allowance (supply documents)		
Reference number:		
Other income (supply documents)		
Name of institution:		
Total income		

This form may be posted to: Director Rates and Taxes, P.O. Box 1450, JHB, 2000 or dropped off at any of the City's Customer Service Centers for submission to Rates and Taxes.

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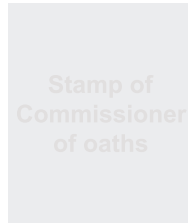
Declaration

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

Signature of Applicant

Commissioner of Oaths

Commissioner's stamp



For office use only

Checklist:

- | | |
|--|--------------------------|
| ID copy (Certified) | <input type="checkbox"/> |
| SASSA Card copy certified(back & front) | <input type="checkbox"/> |
| 3 Month bank statement | <input type="checkbox"/> |
| SARS income tax certificate | <input type="checkbox"/> |