



VALUATION SERVICES

valuationenquiries@joburg.org.za

SECTION 78 QUERY FORM

QUERY NO. _____

RESIDENTIAL

City of Johannesburg

LOGGING OF A QUERY AGAINST MATTERS PERTAINING TO A GENERAL / SUPPLEMENTARY VALUATION ON THE PROPERTY DESCRIBED BELOW:

DESCRIPTION OF PROPERTY IN RESPECT OF WHICH THE QUERY IS MADE
(Complete a separate form for each property)

ERF/UNIT NO. _____ SUBURB/SCHEME NAME _____

SECTION 1: OWNER INFORMATION

1.1 OWNER

REGISTERED OWNER OF PROPERTY _____

IDENTITY NO. _____ COMPANY OR C.C REGISTRATION NO. _____

PHYSICAL ADDRESS OF OWNER _____ CODE _____

POSTAL ADDRESS OF OWNER _____ CODE _____

TELEPHONE NO. HOME _____ WORK _____

CELL _____ FAX _____

E-MAIL ADDRESS (*compulsory*) _____

1.2 AUTHORISED REPRESENTATIVE OF THE OWNER*

OWNER DETAILS MUST BE COMPLETED

NAME OF REPRESENTATIVE _____

POSTAL ADDRESS _____ CODE _____

TELEPHONE NO. HOME _____ WORK _____

CELL _____ FAX _____

E-MAIL ADDRESS (*compulsory*) _____

3. SELECT THE REASON FOR THE SUPPLEMENTARY REQUEST WITH AN "X" IN THE LAST COLUMN:

Section 78	Supplementary valuations	
(1)	<i>A municipality must, whenever necessary, cause a supplementary valuation to be made in respect of any rateable property</i>	
a	incorrectly omitted from the valuation roll;	<input type="checkbox"/>
b	included in a municipality after the last general valuation;	<input type="checkbox"/>
c	subdivided or consolidated after the last general valuation;	<input type="checkbox"/>
d	of which the market value has substantially increased or decreased for any reason after the last general valuation;	<input type="checkbox"/>
e	substantially incorrectly valued during the last general valuation;	<input type="checkbox"/>
f	that must be revalued for any other exceptional [S 78(1)(f) am by s 26(a) of Act 29 of 2014.]	<input type="checkbox"/>
g	of which the category has changed; or [S 78(1)(g) am by s 26(b) of Act 29 of 2014.]	<input type="checkbox"/>
h	the value of which was incorrectly recorded in the valuation roll as a result of a clerical or typing error. [S 78(1) subs by s 33(a) of Act 19 of 2008; s 78(1)(h) ins by s 26(c) of Act 29 of 2014.]	<input type="checkbox"/>

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SECTION 4: PROPERTY DETAILS (FOR SECTIONAL TITLES SEE SECTION 4)

PHYSICAL ADDRESS _____ CODE _____

EXTENT OF PROPERTY (m²) _____

MUNICIPAL ACCOUNT NO _____ (if available)

NAME OF BONDHOLDER _____ REGISTERED AMOUNT OF BOND _____ (if applicable)

PROVIDE FULL DETAILS OF ALL SERVITUDES, ROAD PROCLAMATIONS OR OTHER ENDORSEMENTS AGAINST THE PROPERTY (if applicable) _____

SERVITUDE NO. _____ AFFECTED AREA (m²) _____

IN FAVOUR OF _____

FOR WHAT PURPOSE _____

WAS COMPENSATION PAID? YES _____ NO _____ IF YES DATE OF PAYMENT _____ AMOUNT R _____

SECTION 5: DESCRIPTION OF RESIDENTIAL DWELLING (FOR SECTIONAL TITLES SEE SECTION 4) (INDICATE NUMBER OR STATE YES / NO)

MAIN DWELLING

NO OF BEDROOMS _____ NO OF BATHROOMS _____ KITCHEN _____ LOUNGE _____ DINING ROOM _____

LOUNGE WITH DINING ROOM _____ STUDY _____ PLAYROOM _____ TELEVISION _____ LAUNDRY _____ SEPARATE TOILET _____

OTHER _____ OTHER _____ OTHER _____ OTHER _____

OUTBUILDINGS

NO. OF GARAGES _____ GRANNY FLAT/ROOMS _____ OTHER _____

SIZE OF MAIN DWELLING (m²) _____ SIZE OF OUTBUILDING (m²) _____ SIZE OF OTHER BUILDINGS (m²) _____

OTHER (ATTACH ANNEXURE)

SWIMMING POOL _____ BORE HOLE _____ TENNIS COURT _____ GARDEN : GOOD _____ AVERAGE _____ POOR _____

OTHER _____ OTHER _____

FENCING : FRONT _____ BACK _____ SIDE 1 _____ SIDE 2 _____

TYPE _____ HEIGHT _____

DRIVEWAY (e.g. Bricks, pavers) _____ IS YOUR PROPERTY SITUATED IN A BOOMED AREA OR SECURITY YES _____ NO _____

OTHER FEATURES: _____

GENERAL CONDITION OF PROPERTY: GOOD _____ AVERAGE _____ POOR _____

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SECTION 6: SECTIONAL TITLE UNITS

SCHEME NO. _____ NAME OF SCHEME _____ FLAT NO./DOOR NO. _____

UNIT SIZE (m²) _____

NAME OF MANAGING AGENT _____ TEL NO. _____

INDICATE NUMBER OR STATE YES/NO

NO OF BEDROOMS _____ NO OF BATHROOMS _____ KITCHEN _____ LOUNGE _____ DINING ROOM _____

LOUNGE WITH DINING ROOM _____ STUDY _____ PLAYROOM _____ TELEVISION _____ LAUNDRY _____ SEPERATE TOILET _____

OTHER _____ OTHER _____ OTHER _____ OTHER _____

COMMON PROPERTY CONSISTS OF: DETAILS OF EXCLUSIVE AREAS

SWIIMMING POOL (m²) _____ GARAGE (m²) _____

TENNIS COURT (m²) _____ CARPORT (m²) _____

OTHER (m²) _____ OPEN PARKING (m²) _____

OTHER (m²) _____ STORE ROOM (m²) _____

OTHER (m²) _____ GARDEN (m²) _____

OTHER (m²) _____

SECTION 7: MARKET INFORMATION

IF YOUR PROPERTY IS CURRENTLY ON THE MARKET WHAT IS THE ASKING PRICE?

R _____ OFFER RECEIVED R _____

IF YOUR PROPERTY HAS BEEN ON THE MARKET IN THE LAST 3 YEARS WHAT WAS THE ASKING PRICE?

R _____ OFFER RECEIVED R _____

NAME OF AGENT _____ TEL NO. _____

SALES TRANSACTIONS (OF OTHER PROPERTIES IN THE VICINITY) USED BY OWNER IN DETERMINING THE MARKET VALUE OF THE PROPERTY

ERF/UNIT NO. _____ SUBURB/FARM/SCHEME NAME _____

DATE OF SALE _____ SELLING PRICE _____

SECTION 8: REVIEW DETAILS

PARTICULARS TO BE REFLECTED IN VALUATION ROLL CHANGES REQUESTED BY OWNER

DESCRIPTION OF THE PROPERTY/UNIT NO. _____

CATEGORY _____

PHYSICAL ADDRESS/DOOR NO./FLAT NO. _____

EXTENT _____

MARKET VALUE _____

With Effect Date _____

NAME OF OWNER _____

ADVERSE FEATURES AND/OR FURTHER REASONS IN SUPPORT OF THIS REVIEW (ANNEXURE CAN BE PROVIDED)

SECTION 9: DECLARATION

ATTENTION IS HEREBY DRAWN TO SECTION 42(2) OF THE ACT WHICH STATES THAT WHERE ANY DOCUMENT, INFORMATION OR PARTICULARS WERE NOT PROVIDED WHEN REQUIRED IN TERMS OF SUBSECTION 42(1) OF THE ACT AND THE OWNER CONCERNED RELIES ON SUCH DOCUMENT, INFORMATION OR PARTICULARS IN AN APPEAL TO AN APPEAL BOARD, THE APPEAL BOARD MAY MAKE AN ORDER AS TO COSTS IN TERMS OF SECTION 70 OF THE ACT IF THE APPEAL BOARD IS OF THE VIEW THAT THE FAILURE TO SO HAVE PROVIDED ANY SUCH DOCUMENT, INFORMATION OR PARTICULARS HAS PLACED AN UNNECESSARY BURDEN ON THE FUNCTIONS OF THE MUNICIPAL VALUER OR THE APPEAL BOARD.

I / WE _____ HEREBY DECLARE THAT THE INFORMATION AND PARTICULARS SUPPLIED ARE TRUE AND
CORRECT
YEAR _____ MONTH _____ DAY _____ SIGNATURE _____

Property Description:

ADMINISTRATION OFFICER RECEIVED SECTION 78 QUERY: (Compulsory)

NAME AND SURNAME:

SIGNATURE:

DATE: _____

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