

Musina

Local

Municipality

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**MUSINA LOCAL MUNICIPALITY
DEPARTMENT OF ECONOMIC DEVELOPMENT AND PLANNING
TOWN PLANNING UNIT**

APPLICATION FORM FOR CONSOLIDATION IN TERMS OF PROVISION OF SECTION 48 (1)(b) OF MUSINA LOCAL MUNICIPALITY SPATIAL PLANNING AND LAND USE MANAGEMENT BY-LAWS,2016 READ TOGETHER WITH REG 14 OF THE SPATIAL PLANNING AND LAND USE MANAGEMENT REGULATION: LAND USE MANAGEMENT AND GENERAL MATTERS, 2015 UNDER (ACT 16 OF 2013).

This application form should be completed in full. If any information is incomplete this might result in a rejection of the application.

1. Applicant details (Provision of Section 45, Act No. 16 of 2013)

1.1 Company: _____

1.2 Surname: _____

1.3 Full names: _____

1.4 Initials: _____

1.5 E-mail address: _____

1.6 Telephone number: _____

1.7 Cellular Phone number: _____

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1.8 Fax number: _____

1.9 Physical Address: _____

_____ Postal Code _____

1.10. Postal Address: _____

_____ Postal Code _____

2. Registered Owner according to Title Deed (only required if different to the applicant's details)

2.1. Company name: _____

2.2. Title: _____

2.3. Surname: _____

2.4. Full names: _____

2.5. Initials: _____

2.6. Email: _____

2.7. Telephone number: _____

2.8. Cellular number: _____

2.9. Fax: _____

2.10. Physical Address: _____

_____ Postal Code _____

2.11. Postal Address: _____

_____ Postal Code _____

3. Property Information

3.1. Township: _____

3.2. Erf number: _____

3.3 .Street Address: _____

3.4 .Property Size (in m²): _____

3.5 .Current Land Use: _____

3.6 .Current Zoning (Scheme): _____

3.7. Title Deed No.: _____

3.8 .Bond (Yes/No): _____

3.9. If Yes in 3.8 specify Bond Account No.: _____

3.10. Bondholder's name: _____

3.11. Restrictive Title Deed Condition paragraph No.: _____

3.12. Size of the proposed consolidation:

Portion No:	Panhandle Area:	Total Area:
		m ²
		m ²
		m ²
		m ²
Total Area:		m ²

4. Required documents

Please Mark with an X		Please Mark with an X	
Covering letter		Bondholder's consent	
Motivational memorandum		Locality plan	
Power of attorney		Zoning map	
Company resolution		Consolidation Sketch plan	
Title deed			

5. Application fees (for Office use only)

5.1. Receipt number (for office use): _____

Signature of Applicant:

Date:
