

General Valuation Roll 2025-2029

APPEAL FORM C: AGRICULTURAL HOLDINGS OR FARMS

Appeal No.

**Direct all enquiries to Nontyatyambo Yako nyako@bcrm.gov.za
and please do not contact the valuer directly.**

RETURN THE COMPLETED FORM BY EMAIL
TO

Blue Crane Route MUNICIPALITY

E-MAIL: nyako@bcrm.gov.za

LODGING OF AN APPEAL AGAINST THE DECISION OF THE MUNICIPAL VALUER REGARDING MATTERS PERTAINING TO A SPECIFIC PROPERTY AS REFLECTED IN OR OMITTED FROM THE GENERAL VALUATION ROLL FOR THE PERIOD 1 JULY 2025 TO 30 JUNE 2029

DESCRIPTION OF PROPERTY IN RESPECT OF WHICH THE APPEAL IS MADE (COMPLETE A SEPARATE FORM FOR EACH ENTRY OBJECTED TO)

| | | | |
|------------------------------|----------------------|-----------------|----------------------|
| AGRICULTURAL NO HOLDING / | <input type="text"/> | HOLDING/PORTION | <input type="text"/> |
| FARM DIVISION | <input type="text"/> | FARM NAME | <input type="text"/> |
| | | REGISTRATION | <input type="text"/> |

SECTION 1: APPEALANT INFORMATION

1.1 APPEALANT IS THE OWNER

| | | | |
|------------------------------|-------------------------------|----------------------------------|---------------------------|
| REGISTERED OWNER OF PROPERTY | | | |
| IDENTITY NO. | <input type="text"/> | COMPANY OR CC REGISTRATION NO | <input type="text"/> |
| PHYSICAL ADDRESS OF OWNER | <input type="text"/> | | CODE <input type="text"/> |
| POSTAL ADDRESS OF OWNER | <input type="text"/> | | CODE <input type="text"/> |
| TELEPHONE NO | HOME (<input type="text"/>) | WORK (<input type="text"/>) | |
| | CELL <input type="text"/> | FAX (<input type="text"/>) | |
| E-MAIL ADDRESS | <input type="text"/> | | |

1.2 APPEALANT IS NOT THE OWNER OR THE MUNICIPALITY IS THE APPEALANT

| | | | |
|--|-------------------------------|----------------------------------|---------------------------|
| NAME OF APPEALANT | | | |
| IDENTITY NO. | <input type="text"/> | COMPANY OR CC REGISTRATION NO | <input type="text"/> |
| POSTAL ADDRESS OF APPEALANT | <input type="text"/> | | CODE <input type="text"/> |
| TELEPHONE NO | HOME (<input type="text"/>) | WORK (<input type="text"/>) | |
| | CELL <input type="text"/> | FAX (<input type="text"/>) | |
| E-MAIL ADDRESS | <input type="text"/> | | |
| STATUS OF APPEALANT e.g. Tenant, Pending Purchaser, Municipality <input type="text"/> | | | |

Page 1 of 4

Complete: Portion/Holding No Farms/Holding

PLEASE COMPLETE THE BOTTOM OF EACH PAGE

1.3 AUTHORISED REPRESENTATIVE OF THE APPEALANT

| | | | | |
|----------------------------------|------|----------------------------------|------|------|
| NAME OF REPRESENTATIVE | | | | |
| IDENTITY NO. | | COMPANY OR CC REGISTRATION NO | | |
| POSTAL ADDRESS OF REPRESENTATIVE | | | | CODE |
| TELEPHONE NO | HOME | () | WORK | () |
| | CELL | | FAX | () |
| E-MAIL ADDRESS | | | | |

**IF A REPRESENTATIVE IS APPOINTED, PROOF OF AUTHORISATION MUST BE ATTACHED SECTION 2:
PROPERTY DETAILS**

| | |
|---------------------|---------------------------|
| NAME OF BOND HOLDER | REGISTERED AMOUNT OF BOND |
| | |

| | | |
|-------------------------|--|----------------|
| PHYSICAL ADDRESS | | |
| EXTENT OF PROPERTY | | M ² |
| MUNICIPAL ACCOUNT NO | | |

(If available)

PROVIDE FULL DETAILS OF ALL SERVITUDES, ROADS PROCLAMATIONS OR OTHER ENDORSEMENTS AGAINST THE PROPERTY (IF APPLICABLE)

| | | | |
|-------------------------|-----|---------------|----------------|
| | | | |
| SERVITUDE NO | | AFFECTED AREA | M ² |
| IN FAVOUR OF | | | |
| FOR WHAT PURPOSE | | | |
| WAS COMPENSATION PAID | YES | NO | |
| IF YES: DATE OF PAYMENT | | AMOUNT | R |

SECTION 3: DESCRIPTION OF RESIDENTIAL DWELLING (FOR SECTIONAL TITLE COMPLETE SECTION 4) (INDICATE NUMBER OR STATE YES/NO IN APPROPRIATE BOX)

| | | | | | | | |
|-----------------|--|-------------------------|--|--|--|----------|--|
| NO. OF BEDROOMS | | NO. OF BATHROOMS | | KITCHEN | | LOUNGE | |
| DINING ROOM | | LOUNGE WITH DINING ROOM | | STUDY | | PLAYROOM | |
| TELEVISION ROOM | | LAUNDRY | | SEPARATE TOILET | | | |
| OTHER | | | | SIZE OF MAIN DWELLING (M ²) | | | |

3.2 OTHER BUILDINGS – ATTACH AS ANNEXURE A

| | | | | |
|--------------|-------------|---------|-----------|----------------------------|
| BUILDING NO. | DESCRIPTION | SIZE M2 | CONDITION | IS THE BUILDING FUNCTIONAL |
| | | | | |

Complete: Portion/Holding No Farms/Holding

PLEASE COMPLETE THE BOTTOM OF EACH PAGE

3.3 IS ANY PORTION OF THE PROPERTY USED FOR ANY PURPOSE OTHER THAN AGRICULTURE?
(e.g. Business, mining, eco-tourism, trading in or hunting game)

| TICK | | IF YES – DESCRIBE THE USE(S) _____ _____ IF NECESSARY PROVIDE ANNEXURE B |
|------|----|--|
| YES | NO | |
| | | |

3.4 LAND USE ANALYSIS

| CONDITION OF FENCES | | |
|---------------------|---------|------|
| GOOD | AVERAGE | POOR |
| | | |
| AREA GAME FENCED | | Ha |

| | |
|---------------------------------|--|
| NON AGRICULTURAL (REFER TO 3.3) | |
| GRAZING | |
| UNDER IRRIGATION | |
| DRY LAND | |
| PERMANENT CROPS | |
| OTHER | |
| OTHER | |
| TOTAL | |

| | |
|---------------------|--|
| NUMBER OF BOREHOLES | |
| OUTPUT LITRES/HOUR | |
| DAMS | |
| CAPACITY | |

| IS THE PROPERTY EXPOSED TO A RIVER? | | | |
|-------------------------------------|--|----|--|
| YES | | NO | |

Page 2 of 4

3.5 OTHER:

| | | | | |
|--|-----|--|----|--|
| IS YOUR PROPERTY AFFECTED BY A LAND CLAIM? | YES | | NO | |
|--|-----|--|----|--|

| | | |
|----------|---------------|--|
| IF YES:- | DATE OF CLAIM | |
| | GAZETTE NO. | |

| | | | | |
|---------------------------|-----|--|----|--|
| DO YOU HAVE WATER RIGHTS? | YES | | NO | |
|---------------------------|-----|--|----|--|

IF YES:- PROVIDE DETAILS _____

| | | | | |
|--|-----|--|----|--|
| HAVE YOU APPLIED FOR REZONING OR CONSENT USE? CONSENT USE e.g. guest houses, business etc. | YES | | NO | |
|--|-----|--|----|--|

IF YES:- PROVIDE DETAILS _____

| | | | | |
|---|-----|--|----|--|
| HAS YOUR AGRICULTURAL HOLDINGS PROPERTY BEEN EXCISED? | YES | | NO | |
|---|-----|--|----|--|

IF YES:- FULL DETAILS _____

| | | | | |
|--|-----|--|----|--|
| HAS THE TOWNSHIP BEEN APPLIED FOR OR PROCLAIMED? | YES | | NO | |
|--|-----|--|----|--|

IF YES:- NEW FARM
DESCRIPTION: FULL DETAILS _____

Complete: Portion/Holding No Farms/Holding

PLEASE COMPLETE THE BOTTOM OF EACH PAGE

TENANT AND RENT INFORMATION – ANNEXURE C

| NAME OF TENANT | SIZE | RENTAL EXCL VAT) | ESCALATION | OTHER CONTRIBUTIONS | TERM OF LEASE | START DATE | USE |
|----------------|------|------------------|------------|---------------------|---------------|------------|-----|
|----------------|------|------------------|------------|---------------------|---------------|------------|-----|

SECTION 4: MARKET INFORMATION

IF YOUR PROPERTY IS CURRENTLY ON THE MARKET

IF YOUR PROPERTY HAS BEEN ON THE MARKET THE LAST 3 YEARS

| | | | |
|---------------------------|---|----------------------------|-----|
| WHAT IS THE ASKING PRICE? | R | WHAT WAS THE ASKING PRICE? | R |
| OFFER RECEIVED | R | OFFER RECEIVED | R |
| NAME OF AGENT | | TEL NO | () |

SALE TRANSACTIONS (OF OTHER PROPERTIES IN THE VICINITY) USED BY THE APPEALANT IN DETERMINING THE MARKET VALUE OF PROPERTY OBJECTED TO (IF INCUFFICIENT SPACE PROVED ANNEXURE D)

| HOLDING/PORTION NO. | AGRICULTURAL HOLDING/FARM | DATE OF SALE | SELLING PRICE |
|---------------------|---------------------------|--------------|---------------|
| | | | |
| | | | |
| | | | |
| | | | |

SECTION 5: APPEAL DETAILS

| | PARTICULARS AS REFLECTED IN THE VALUATION ROLL | CHANGES REQUESTED BY APPEALANT |
|---------------------------------------|--|--------------------------------|
| DESCRIPTION OF THE PROPERTY/ UNIT NO. | | |
| CATEGORY | | |
| PHYSICAL ADDRESS/DOOR NO / FLAT NO. | | |
| EXTENT | | |
| MARKET VALUE | | |
| NAME OF OWNER | | |

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

Page 3 of 4

SECTION 6: 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 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

Complete: Portion/Holding No Farms/Holding

PLEASE COMPLETE THE BOTTOM OF EACH PAGE

OFFICIAL USE**SECTION 8: DECISION OF MUNICIPAL VALUER**

| | |
|--------------------------------------|--|
| DESCRIPTION OF THE PROPERTY/UNIT NO. | |
| CATEGORY | |
| PHYSICAL ADDRESS/DOOR NO./FLAT NO. | |
| EXTENT | |
| MARKET VALUE | |
| NAME OF OWNER | |

REASONS FOR THE MUNICIPAL VALUER

NAME OF MUNICIPAL
VALUER/ASSISTANT MUNICIPAL
VALUER

SIGNATURE

| |
|--|
| |
| |

DATE

| | | |
|------|-------|-----|
| YEAR | MONTH | DAY |
| | | |
| | | |

**SECTION 9: NOTIFICATION OF
OUTCOME**

| | | |
|-----------------------------------|-----------|------|
| | SIGNATURE | DATE |
| VALUATION ROLL ADJUSTED | | |
| APPEALANT NOTIFIED | | |
| OWNER NOTIFIED | | |
| SECTION 52(1)(a) WHERE APPLICABLE | | |

Page 4 of 4

Complete: Portion/Holding No Farms/Holding

PLEASE COMPLETE THE BOTTOM OF EACH PAGE