

APPLICATION FOR REBATE ON RATES

<u>TAKE NOTE</u>: Applicants must note that the gross income of all occupants on the premises in respect of which application is being made for rebate, must be stated irrespective of the conditions of marriage agreements. In this regard "Income" means all monies derived by occupants from salary, wage, interest, dividends, board, child support and pensions- (Employers, old-age, war veteran and disability). **Proof of gross income must be attached.** Affidavit will be accepted in exceptional cases. Applications are open from **1 May and must be submitted before 30 June**.

I, the undersigned, hereby apply for a rebate on rates and declare herewith the following information to be true and correct:

| 1. | Surname: | | 2. | First Names: | |
|------|----------------------|----------|-----|--------------------------------|--|
| 3. | Residential address: | | 4. | Postal address: | |
| | | | | | |
| 5. (| Contact number: | | 6. | Email Address: | |
| 7. I | Marital status: | Married: | Unn | narried: (Mark with X) | |
| 8. I | dentity Numbers: | Husband: | | Wife: | |

Location of property in respect of which application is made:

Account no:

| Income details | Husband | Wife | Children living with parents | For Office Use Only Erf no : |
|---------------------------|---------|------|------------------------------------|---------------------------------|
| a) Salary | R | R | R | Amount Raised : |
| b) Social Grant (SASSA) | R | R | R | % Qualified : |
| c) Interest | R | R | R | Rebate amount : |
| d) Dividends | R | R | R | Valuation above R230 000? |
| e) Pension: Employer | R | R | R | |
| War Veteran | R | R | R | Yes |
| f) Board / Rent | R | R | R | No |
| g) Other: (Child support) | R | R | R | |
| | | | | |

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I, hereby declare that I am the registered owner / usufructuary of the above property and that the said property is inhabited and controlled by me. I further declare that I fully realize that should any of the above information be found to be incorrect or false, I shall be responsible for the repayment of any allocation received plus interest.

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SIGNATURE OF APPLICANT

CONTROL LIST

| 1. | Identity Document | |
|----|---|--|
| 2. | Proof of total gross income (copy of latest payslips, 3 months stamped bank statements, interest, dividends and annuity income) of household of account holder, spouse and persons older than 18 years of age, including children residing on the premises. | |
| 3. | Proof of unemployment, if applicable from accredited service provider/s or affidavit by applicant | |
| 4. | Proof of pension / Social grants (SASSA) | |

IMPORTANT NOTICE

- False information or the withholding of information will disqualify the applicant, with the liability of immediate repayment of all allocations received plus interest and the risk of possible criminal proceedings being instituted.
- To qualify for the 40% rebate the collective gross monthly income of the applicant should not exceed R10 000 per month (refer tariff list 2023/24),
- To qualify for the 20% rebate the collective gross monthly income of the applicant should not exceed R11 500 per month (refer tariff list 2023/24),
- To qualify for the 15% rebate the collective gross income should not exceed R276 000 per annum for persons older than 65 years of age (refer tariff list 2023/24),
- Should the gross income of a household increase and thereby exceed the approved limit during the **rebate period** (Increases, no longer unemployed), the registered consumer must immediately inform the municipality. Failure to comply could result in the repayment of all allocations plus interest and the risk of possible legal steps being instituted.
- The information contained in this document is not confidential. A list of approved applicants will be handed to councilors for comments.