

**ETHEKWINI REVENUE MANAGEMENT UNIT**

Florence Mkhize Building,  
251 Anton Lembede Street,  
Durban, 4001

Tel: 031 324 5000, Fax: 031 328 1002

Email: [Raterebates@durban.gov.za](mailto:Raterebates@durban.gov.za)

Website: <http://www.durban.gov.za>

Queries: <http://correspondence.durban.gov.za:200/>

**APPLICATION FOR RATES DEFERMENT (RESIDENTIAL PROPERTIES ONLY)**

<b>PLEASE COMPLETE IN BLOCK LETTERS</b> <i>(COMPLETE ONLY PAGE 1 TO 3)</i>	
<b>1. DETAILS OF APPLICANT</b>	
First name(s)	
Surname	
ID Number	
Physical address	
Telephone number (landline)	
Cell phone number	
Email address	
If applicant different from property owner, state the relationship	
<b>2. DETAILS OF PROPERTY OWNER (S)</b>	
First name(s)	
Surname	
ID Number	
Telephone number (land line)	
Cell phone number	
Email address	
<b>3. PARTICULARS OF PROPERTY</b>	
Property address	
Postal code	
Rate account number	
Consolidated account number	

### 3. DETAILS OF EMPLOYMENT

Type of employment	(tick) <b>Formal</b> <input type="checkbox"/> <b>Informal</b> <input type="checkbox"/>
Name of Employer	
Employer address	
Postal code	
Contact number(s)	
Date of employment termination	
Reason for termination	
UIF reference number	
Trading licence number	

#### FOR INFORMAL EMPLOYMENT

Trading permit / licence	
Place of trade	
Have you attached affidavit confirming your employment status?	(tick) Yes <input type="checkbox"/> No <input type="checkbox"/>

### 4. DECLARATION: PROPERTY OWNER

I, the undersigned, in my capacity as a registered owner of the above property:

(Name of the applicant and ID number) .....

1. Declare that the above property **is / is not** \* my primary property on which I reside permanently, and all of the information supplied is to the best of my knowledge, true and correct. (\**delete, where not applicable*).
2. I understand that my rates deferment period shall not exceed the period of six (6) months from the date of approval of this application.
3. I acknowledge that the Municipality reserves the right to institute legal actions against anyone who wilfully provides false information with the intention to benefit unlawfully from the rates deferment granted.

4. I agree and am aware that incorrect information would affect the consideration of my application for rates deferment and that the Municipality has a right to cancel this deferment at any stage.
5. I further acknowledge that deferment of rebates granted in error will be reversed immediately from date of its inception.
6. I undertake to furnish the Municipality with updated information as soon as circumstances relating to my employment status change.
7. I undertake to furnish additional documentary proof, as and when requested by the CFO or his/her delegated official.
8. I consent to the processing of the Information, for all purposes associated with the Application hereby made and/or any other purpose compatible with the purpose for which it was initially provided and/or necessary for the legitimate and justifiable interests of the Municipality.

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**APPLICANT'S SIGNATURE**

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**DATE**

**FOR OFFICE USE ONLY**

**Received by (Name & Service No):** \_\_\_\_\_

**Date received:** \_\_\_\_\_

**Captured by (Name & Service No):** \_\_\_\_\_

**Application met all requirements: YES / NO**

**Signature of capturing official:** \_\_\_\_\_

## 6. DOCUMENTS TO ACCOMPANY THIS APPLICATION

- ✦ Certified copy of applicant's ID or Smart Card (both sides of the card).
- ✦ Letter confirming unemployment status or/and copy of Unemployment Insurance Fund (UIF) card by the Department of Employment and Labour. Unemployment date must not exceed period of three (3) months at the time of this application.
- ✦ If applicant is not the property owner, provide documentary proof of authority to apply on behalf of the property owner e.g. Power of attorney, Proxy, etc.

### **In case of informal trader applicant**

- ✦ Certified copy of applicant's ID or Smart Card (both sides of the card).
- ✦ Trading permit issued by Municipality's Business Support Unit.
- ✦ Affidavit confirming unemployment status.

## 7. QUALIFYING CRITERIA

- ✦ Must be the owner of and reside permanently in the residential property listed in this application.
- ✦ Must be unemployed for the period not exceeding 3 months as at the date of this application.
- ✦ Municipal account must be up to date at the time of application.
- ✦ Deferment of rates period shall not exceed the period of six (6) months.
- ✦ No application will be processed without accompanying documents.

## 8. SUBMISSION OF APPLICATION

Applications may be submitted electronically to Email: [Raterebates@durban.gov.za](mailto:Raterebates@durban.gov.za).

Hand delivered applications may be sent to Sizakala Centres or any Revenue Customer Service Centres.

For further queries, contact Tel: 031 324 5000 or email queries to : <http://correspondence.durban.gov.za:200/>.

**Kindly note that in order to comply with the COVID 19 Lockdown Regulations and Municipal Health and Safety Risk Reduction Guidelines, all applicants are encouraged to submit their application forms via email provided above, where possible.**