



# NAME CHANGE FORM – JURISTIC PERSON & TRUSTS

PLEASE COMPLETE IN BLOCK LETTERS

SURNAME & FULL NAME OF AUTHORIZED REPRESENTATIVE

TITLE  INITIALS  DATE OF BIRTH

IDENTITY NUMBER  GENDER  MALE  FEMALE

**PARTICULARS OF REGISTERED OWNER\*/ACCOUNT HOLDER\***

FULL NAME OF COMPANY/CC/TRUST

COMPANY / C.C. OR TRUST REGISTRATION NUMBER

NAMES AND SURNAME OF TRUSTEES/MEMBERS/DIRECTORS

(provide separate addendum if the space is not adequate)

RATE NUMBER  WATER ACC NO

ELECTRICITY ACC NO

ERF DESCRIPTION

STREET NUMBER  STREET NAME

SUBURB

CITY / TOWN  POSTAL CODE

POSTAL ADDRESS

POSTAL CODE

CELL NUMBER (Preferred)  WORK NO/ LANDLINE

CONTACT PERSON

E-MAIL ADDRESS

**CHANGED NAME TO:**

FULL REGISTRATION NAME OF COMPANY/CC/TRUST (new)



## **NAME CHANGE FORM – JURISTIC PERSON & TRUSTS**

### **DECLARATION BY AUTHORISED REPRESENTATIVE ON BEHALF OF REGISTERED OWNER\*/ACCOUNT HOLDER\***

I, the undersigned, \_\_\_\_\_, do hereby declare that:

1. I am the duly authorized representative of the registered owner of the above mentioned property\* /account holder\*.
2. All the information supplied on this Form is true and correct. All other information on the Municipality's records remains unchanged or will be updated concurrently with this Form.
3. This change of name, if granted, will not release the registered owner\* /account holder\* from any obligations incurred under the existing account/s or action in any previous name and shall not be deemed to constitute the opening of a new account with the municipality.
4. I acknowledge and understand that all the terms and conditions in the existing Municipal Services Agreement concluded between the registered owner\* /account holder\* and the Municipality shall remain in full force and effect, except to the extent where variations have been mutually agreed to, in writing.
5. The particulars of Directors\*/Members\*/ Trustees\* have not changed. I am aware that should any changes occur, I am obliged to notify the Municipality and furnish the Municipality with appropriate supporting documents.

**\*delete if not applicable**

\_\_\_\_\_  
**SIGNATURE OF AUTHORISED REPRESENTATIVE**

\_\_\_\_\_  
**PRINT NAME**

\_\_\_\_\_  
**DATE**

### **DOCUMENTS TO ACCOMPANY THIS APPLICATION**

1. Certified copy of the Juristic Person's resolution to change its name and appointing a representative to act on its behalf and to sign all documents.
2. CIPC name change documents.
3. Certified copies of Registration Documents /Constitution.
4. Letters of authority of Trustees.
5. Confirmation of name change by the Master's office /Amended Notarial Deed of Trust.
6. Certified copy of ID's of the Trustees and proof of their residence.