

**FINANCE CLUSTER****REVENUE MANAGEMENT UNIT**

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

Toll Free Number: 080 311 1111

Website: [http://: www.durban.gov.za](http://www.durban.gov.za)

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

LETTER OF AUTHORITY**AGENT/PROXY FORM**

PLEASE COMPLETE IN BLOCK LETTERS

1. DETAILS OF AGENT/PROXY

Municipal Account Number	
First name(s)	
Surname	
ID Number	
Telephone number (landline)	
Cell phone number	
Email address	
Relationship with property owner	

2. DETAILS OF PROPERTY OWNER

First name(s)	
Surname	
ID Number	
Telephone number (land line)	
Cell phone number	
Email address	

3. PARTICULARS OF PROPERTY

Property description:	
Postal code	

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)
.....

Do hereby appoint

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

To act in my place and stead as my agent for the purposes of the following:

(Tick applicable box)

Opening of Municipal Account

Settlement of arrears (incl. Arrangements to pay) *(attach special power of attorney)*

Termination of Municipal Account

If other, furnish detail.....

APPLICANT'S SIGNATURE

DATE

<u>FOR OFFICE USE ONLY</u>	
Received by (Name & Service No):	_____
Date received:	_____
Captured by (Name & Service No):	_____
Application met all requirements:	YES / NO
Signature of capturing official:	_____