

**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/>**MEETING RESOLUTION OF BUSINESS****PLEASE COMPLETE IN BLOCK LETTERS**

SELECT APPLICABLE BOX (tick)

ACCOUNT REGISTRATION  SETTLEMENT OF DEBT

CREDIT AGREEMENT  ACCOUNT TERMINATION

**1. PARTICULARS OF APPLICANT**

Municipal Account number (s)	
Name of the entity	
CIPC registration number	
Property address	
Postal code	
Contact telephone numbers	
Email address	

*If more than one account or properties, please provide more information on additional page*

**2. RESOLUTION OF MEETING**

Resolution of a meeting held at \_\_\_\_\_(place) on \_\_\_\_\_(date), of the members/directors/trustees and it was resolved that:

The following person/s are authorised to sign all documents as may be necessary/required by the eThekweni Municipality in relating to the entity’s Municipal account are as listed below:

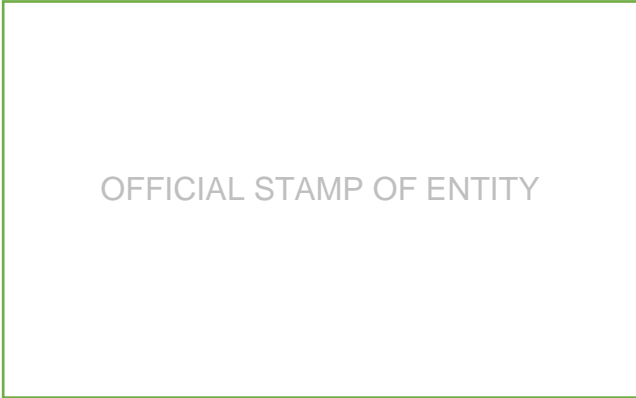
NAME	ID NUMBER	DESIGNATION	SIGNATURE

*(Provide particulars of authorised representative/s and attach certified ID copies)*

\_\_\_\_\_  
**SIGNATURE: CHAIRPERSON**

\_\_\_\_\_  
**FULL NAMES**

\_\_\_\_\_  
**DATE (dd/mm/yy)**



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

## SUBMISSION OF APPLICATION

Applications may be submitted electronically to <http://correspondence.durban.gov.za:200/>.

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

For further queries, contact Tel: 080 311 1111.

**All applicants are encouraged to submit their application forms via email provided above, where possible.**