

VICTOR KHANYE LOCAL MUNICIPALITY

*“A repositioned municipality for a better and sustainable service
delivery for all”*

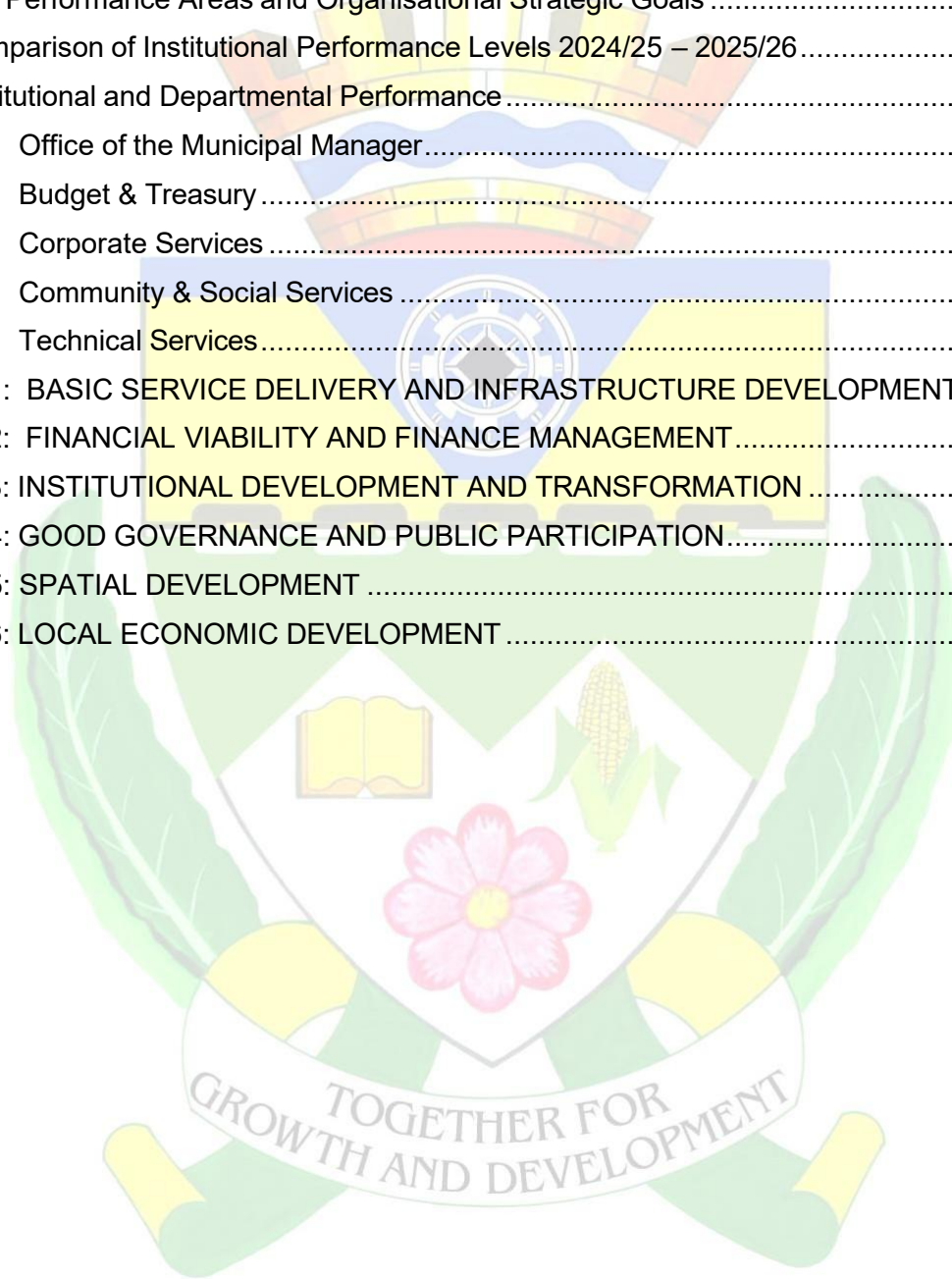


2025/2026

**Institutional (Non-Financial)
Quarter 3 Performance Report**

TABLE OF CONTENTS

1. Purpose	2
2. Executive Summary	3
3. Key Performance Areas and Organisational Strategic Goals	4
4. Comparison of Institutional Performance Levels 2024/25 – 2025/26.....	5
5. Institutional and Departmental Performance.....	6
5.1. Office of the Municipal Manager.....	7
5.2. Budget & Treasury	8
5.3. Corporate Services	8
5.4. Community & Social Services	9
5.5. Technical Services.....	9
KPA 1: BASIC SERVICE DELIVERY AND INFRASTRUCTURE DEVELOPMENT	12
KPA 2: FINANCIAL VIABILITY AND FINANCE MANAGEMENT.....	26
KPA 3: INSTITUTIONAL DEVELOPMENT AND TRANSFORMATION	36
KPA 4: GOOD GOVERNANCE AND PUBLIC PARTICIPATION.....	45
KPA 5: SPATIAL DEVELOPMENT	57
KPA 6: LOCAL ECONOMIC DEVELOPMENT	59

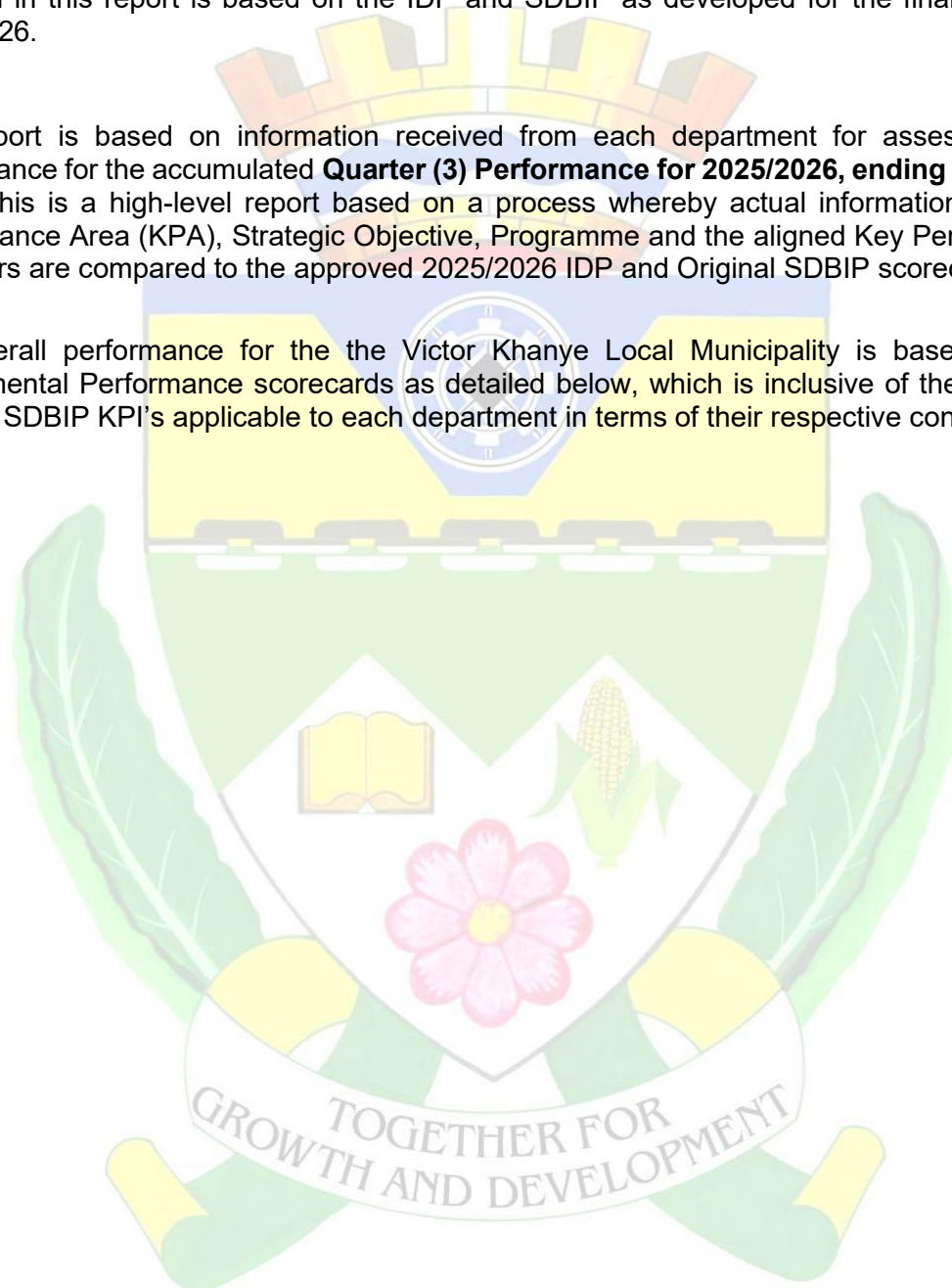


1 Purpose

The purpose of this report is to give feedback regarding the performance of the Victor Khanye Local Municipality as required through The Municipal Systems Act No 32 of 2000, section 41(e) and the Municipal Finance Management Act 56 of 2003, section 52(d). The information included in this report is based on the IDP and SDBIP as developed for the financial year 2025/2026.

This report is based on information received from each department for assessment of performance for the accumulated **Quarter (3) Performance for 2025/2026, ending 31 March 2026**. This is a high-level report based on a process whereby actual information per Key Performance Area (KPA), Strategic Objective, Programme and the aligned Key Performance Indicators are compared to the approved 2025/2026 IDP and Original SDBIP scorecards.

The overall performance for the the Victor Khanye Local Municipality is based on the Departmental Performance scorecards as detailed below, which is inclusive of the IDP and Original SDBIP KPI's applicable to each department in terms of their respective contribution.

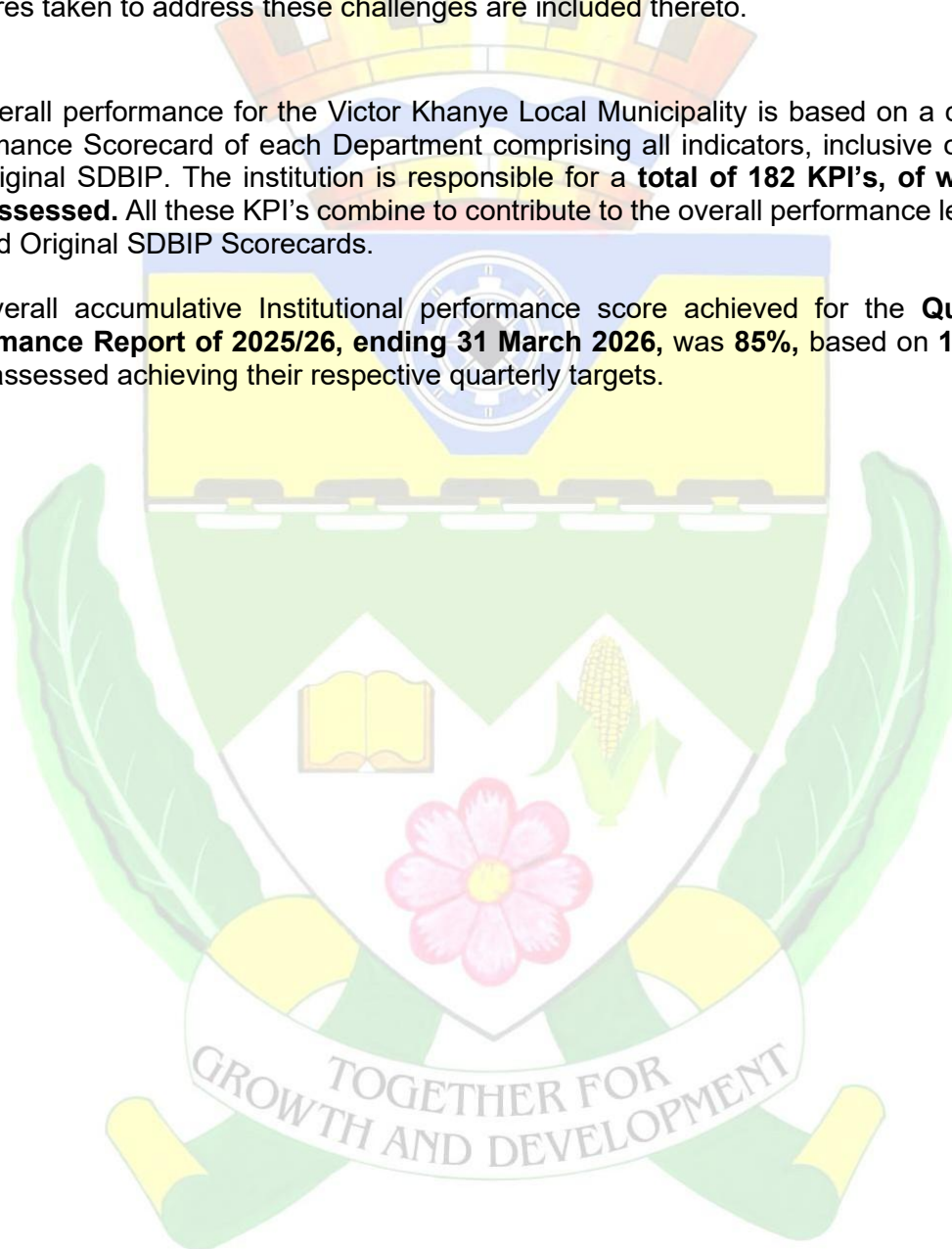


2 Executive Summary

This report serves as the **Quarter three (3) Institutional Performance Report** for the **2025/26** financial year **ending 30 June 2026**. It provides effective and informative feedback on the performance level achieved (cumulative reporting) against the targets as laid out in the IDP and Original SDBIP Scorecards. In the case of under-performance, the respective concerns or mitigating reasons are highlighted, and details pertaining to the relevant measures taken to address these challenges are included thereto.

The overall performance for the Victor Khanye Local Municipality is based on a composite Performance Scorecard of each Department comprising all indicators, inclusive of the IDP and Original SDBIP. The institution is responsible for a **total of 182 KPI's, of which 132 were assessed**. All these KPI's combine to contribute to the overall performance level of the IDP and Original SDBIP Scorecards.

The overall accumulative Institutional performance score achieved for the **Quarter (3) Performance Report of 2025/26, ending 31 March 2026**, was **85%**, based on **112 of 132 KPI's** assessed achieving their respective quarterly targets.



3 Key Performance Areas and Organisational Strategic Goals

The following Strategic Goals and Key Performance Areas have been adopted by the municipality for the purpose of reporting on the attainment of the Institutional performance indicators and targets

KPA 1: Infrastructure and Basic Service Delivery

- Goal 1: Improved provision of basic services to the residents of VKLM
- Goal 2: Improved social protection and education outcomes

KPA 2: Financial viability and Finance Management

- Goal 3: Improved Compliance to MFMA and VKLM Policy Framework

KPA 3: Institutional Development and Transformation

- Goal 4: Improved efficiency and effective of the Municipal Administration

KPA 4: Good Governance and Public Participation

- Goal 5: Improve community confidence in the system of local government

KPA 5: Spatial Rationale

- Goal 6: Increase regularization of built environment

KPA 6: Local Economic Development

- Goal 7: Increased economic activity and job creation

The traffic light system used in the report of performance is as follows:

GREEN	ACHIEVED
RED	NOT ACHIEVED
YELLOW	NOT REPORTED

4 Comparison of Institutional Performance Levels 2024/25 – 2025/26

Table 1: Quarter Three (3) Performance Comparison

Key Performance Areas	2024/25			2025/26		
	Total KPI's Assessed	Targets Achieved	% Targets Achieved	Total KPI's Assessed	Targets Achieved	% Targets Achieved
KPA 1: Basic Service Delivery and Infrastructure	27	24	89%	29	24	83%
KPA 2: Financial viability and Finance Management	29	22	76%	39	33	85%
KPA 3: Institutional Development and Transformation	15	13	87%	17	14	86%
KPA 4: Good Governance and Public Participation	37	32	86%	37	32	81%
KPA 5: Spatial Rationale	7	6	86%	7	6	86%
KPA 6: Local Economic Development	3	3	100%	3	3	100%
Overall	118	100	85%	132	112	85%

5 Institutional and Departmental Performance

Below is a summary of the overall combined KPI and Project performance level achieved by each Department, depicting both the individual departmental performance and the achievement per KPA.

Comparison of Institutional KPI's per KPA Versus Departments - 2025/26 Quarter Three (3)

Table 1: KPI's Attaining Target

KPA	KPA 1: Basic Service Delivery and Infrastructure	KPA 2: Financial viability and Finance Management	KPA 3: Institutional Development and Transformation	KPA 4: Good Governance and Public Participation	KPA 5: Spatial Rationale	KPA 6: Local Economic Development	Total	Dept. %
Financial Services	0/1	19/23	0	1/3	0	0	20/27	74%
	100%	73%	N/A	8%	N/A	N/A		
Technical Services	6/8	2/4	1/1	1/1	0	0	10/14	71%
	42%	50%	100%	100%	N/A	0%		
Community and Social Services	15/17	5/5	0	4/4	0	0	24/26	92%
	88%	100%	N/A	100%	N/A	N/A		
Corporate Services	0	4/4	11/11	6/7	0	0	21/22	95%
	N/A	100%	100%	86%	N/A	N/A		
Office of the Municipal Manager	3/3	3/3	2/5	20/22	6/7	3/3	37/43	86%
	100%	100%	40%	91%	86%	100%		
Total Achieved	24	33	14	32	6	3	112	
Total Assessed	29	39	17	37	7	3	132	
Percentage %	83%	85%	82%	86%	86%	100%	85%	

Initial



The following section contains a comprehensive breakdown of the **individual Departmental performance**. The results highlight the progress with respect to performance not only at a departmental level, but also represents the **progress made within each Key Performance Area (KPA)**.

The individual performance of each KPI per KPA is highlighted in the following departmental scorecard.

5.1. Office of the Municipal Manager

The Office of the Municipal Manager is responsible for a total of **57 KPI's**, of which **43** were eligible for assessment in the period under review and combine to contribute to the overall performance level for the IDP and Adjustment SDBIP Scorecards. The statistics for the Department are as follows

Table 2: Office of the Municipal Manager Statistics

Type	Total KPI's Assessed	Targets Achieved	% Target Achieved	Under Target	% Under Target
Total	43	37	86%	6	14%

5.2. Budget & Treasury

The Budget and Treasury Department is responsible for a total of **35 KPI's**, of which **27** were eligible for assessment in the period under review and combine to contribute to the overall performance level for the IDP and Adjustment SDBIP Scorecards. The statistics for the Department are as follows.

Table 3: Budget & Treasury Statistics

Type	Total KPI's Assessed	Targets Achieved	% Target Achieved	Under Target	% Under Target
Total	27	20	74%	7	26%

5.3. Corporate Services

The Corporate Services Department is responsible for a total of **36 KPI's**, of which **22** were eligible for assessment in the period under review and combine to contribute to the overall performance level for the IDP and Adjustment SDBIP Scorecards. The statistics for the Department are as follows.

Table 4: Corporate Services Statistics

Type	Total KPI's Assessed	Targets Achieved	% Target Achieved	Under Target	% Under Target
Total	22	21	95%	1	5%

5.4. Community & Social Services

The Community and Social Services Department is responsible for a total of **31 KPI's**, of which **26** were eligible for assessment in the period under review and combine to contribute to the overall performance level for the IDP and Adjustment SDBIP Scorecards. The statistics for the Department are as follows.

Table 5: Community and Social Services Statistics

Type	Total KPI's Assessed	Targets Achieved	% Target Achieved	Under Target	% Under Target
Total	26	24	92%	2	8%

5.5. Technical Services

The Technical Services Department is responsible for a total of **23 KPI's**, of which **14** were eligible for assessment in the period under review and combine to contribute to the overall performance level for the IDP and Adjustment SDBIP Scorecards. The statistics for the Department are as follows.

Table 6: Technical Services Statistics

Type	Total KPI's Assessed	Targets Achieved	% Target Achieved	Under Target	% Under Target
Total	14	10	71%	4	29%

KEY PERFORMANCE AREA 1: Infrastructure and Basic Service Delivery

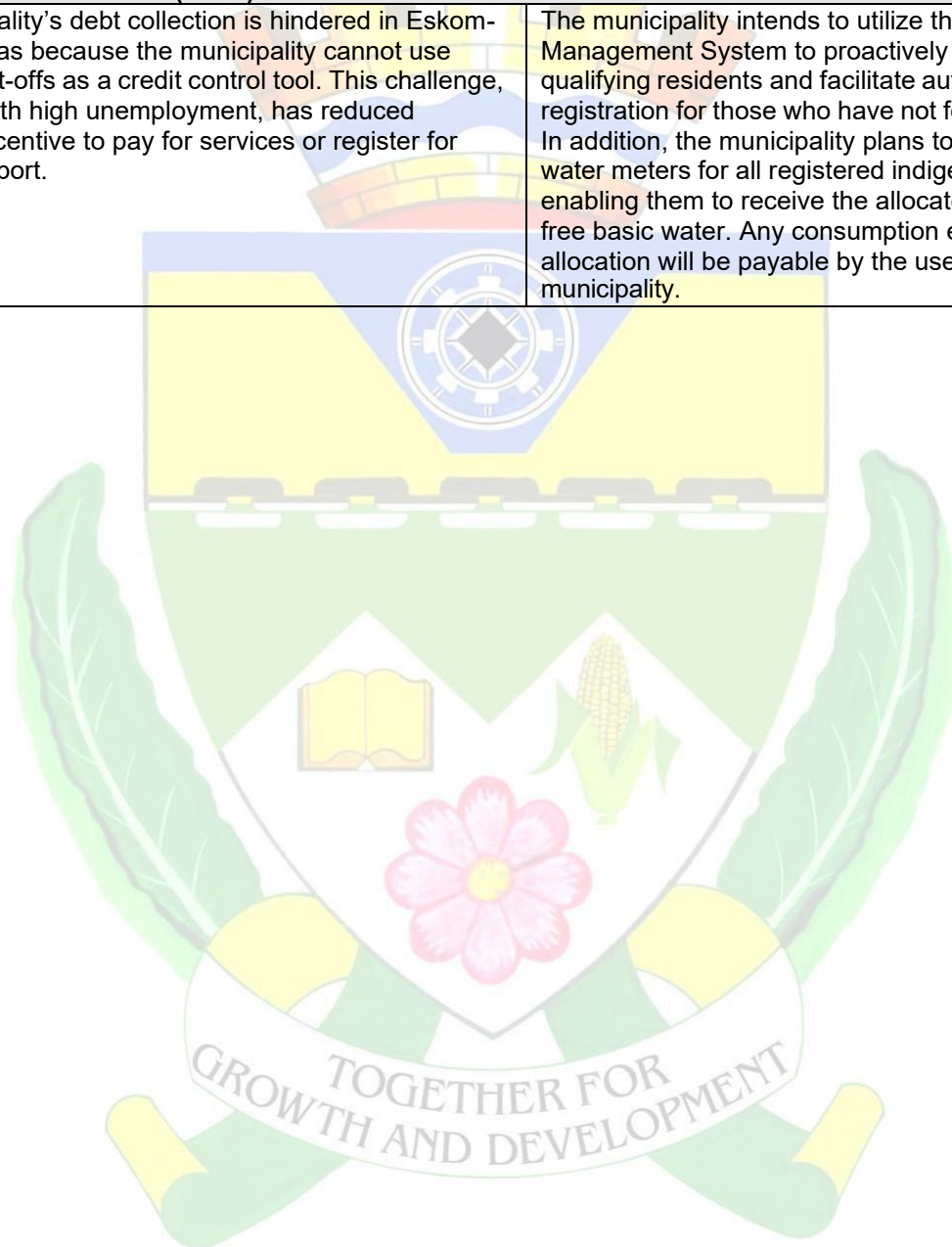
The overall score for this KPA is **83%** for the quarter under review.

KPI Status	KPA 1: Basic Service Delivery and Infrastructure
Target Met (as planned and exceeded)	24
Target Not Met (below planned)	5
Total	29
% Targets met	83%
% Targets not met	17%

Performance Highlights for 2025/26 Quarter (3)

Challenges	Measures taken to improve performance
Percentage of water samples compliant with SANS 241 drinking water quality standards	
Non-compliance of water samples in the reticulation network.	Dosing HTH at the Reservoirs to eliminate after growth in the reticulation network.
% spent on the conditional MIG grant by 30 June 2026	
VAT adjustment challenges - resulting in under-reporting of expenditure in one of the projects.	On 19 December 2025, the Municipality submitted an amendment to address a VAT adjustment.
The hard rock in the areas affected the progress in another project.	The amendment was certified by the provincial Municipal Infrastructure Grant (MIG) on 17 March 2026. It is now awaiting final certification from the Department of Cooperative Governance (DCoG).
Contractors' inconsistent site presence resulted in suboptimal production, thus impacting the progress of the Works, and the slow progress was due to delays in the appointment of the service provider for two projects.	Anticipated Completion: Due to adverse weather and hard rock conditions, the project is expected to require an extension, with a new target date of 15 May 2026. Contractors have been tasked with submitting a revised programme to demonstrate how they will mitigate these delays and meet the revised.
% availability of emergency response vehicles per quarter to comply to the codes of practice (SANS 10090)	
Non-Operational Vehicles: 4 vehicles are currently down due to mechanical failures. 2 vehicles: At the service provider for repairs (since 10 October 2025). 1 vehicle: Currently undergoing repairs at the Municipal Workshop. 1 vehicle: Awaiting attention.	Continue to engage fleet and SCM to expedite and prioritize emergency vehicle repairs.

Number of library awareness campaigns conducted per quarter	
Marketing of libraries is mostly done on Saturdays if there is no public event that we can use for such purposes. However, this quarter, there was no such event, and since libraries no longer operate on Saturdays, marketing could not be done	A request will be made to request that the staff work on a chosen Saturday in the next quarter, so that they can market the library
Number of new households earning less than R6000 per month provided with access to free basic services by 30 June 2026 (GKPI)	
The municipality's debt collection is hindered in Eskom-licensed areas because the municipality cannot use electricity cut-offs as a credit control tool. This challenge, combined with high unemployment, has reduced residents' incentive to pay for services or register for indigent support.	The municipality intends to utilize the Indigent Management System to proactively identify qualifying residents and facilitate automatic indigent registration for those who have not formally applied. In addition, the municipality plans to install prepaid water meters for all registered indigent households, enabling them to receive the allocated 6 kilolitres of free basic water. Any consumption exceeding this allocation will be payable by the user through the municipality.



KPA 1: BASIC SERVICE DELIVERY AND INFRASTRUCTURE DEVELOPMENT

Strategic Goal 1: Improved provision of basic services to the residents of VKLM

Strategic Thrust	Programme	KPI	IDP Link	Resp. MM/ED	SDBI P Ref No	Budget R'000	Baseline	Annual Target 2025/26	3 rd Quarter Target	3 rd Quarter Actual	Achievement	Challenges	Corrective Action	POE	IA Comments
Service Delivery	Sanitation	% of households with sanitation connections made for all new paid-up applications by 30 June 2026 (GKPI)	Rw23-2022	ED: TS	1.1.	In house	0%	100% of households' sanitation connections made for all new paid-up applications	N/A	N/A	N/A	N/A	N/A	Register of Paid-up Applications and Connection Booklets	N/A
	Water	% of households water connections made for all new paid-up applications by 30 June 2026 (GKPI)		ED: TS	1.2	In house	100%	100% of households water connections made for all new paid-up applications	N/A	N/A	N/A	N/A	N/A	Register of Work-Orders and Connection Booklets	N/A
Service Delivery	Water	Percentage of water samples compliant with SANS 241 drinking water quality standards	Rw23-2022	ED: TS	1.3	In house	New	95% of water samples are compliant with SANS 241 drinking water quality standards	95% of water samples are compliant with SANS 241 drinking water quality standards	87%	Not Achieved	Non-compliance of water samples in the reticulation network	Dosing HTH at the Reservoirs to eliminate after growth in the reticulation network	Copy of water quality reports	Not Achieved
Service Delivery	Water/Sanitation	Progress report on the development of the Water Services Master Plan and WSDP submitted to the MM by 30 June 2026	Rw30-2022	ED:TS	1.4	DBSA	0	1 Progress report on the development of the Water Services Master Plan and WSDP submitted to the MM	N/A	N/A	N/A	N/A	N/A	Copies of the progress report signed by the MM.	N/A

Strategic Thrust	Programme	KPI	IDP Link	Resp. MM/ED	SDBI P Ref No	Budget R'000	Baseline	Annual Target 2025/26	3 rd Quarter Target	3 rd Quarter Actual	Achievement	Challenges	Corrective Action	POE	IA Comments
	Housing	Number of monthly progress reports submitted to the MM with respect to the # of new RDP Housing units provided by the PDoHS	Hs 01-2022	ED: TS	1.5	In house	12	12 progress reports submitted to the MM with respect to the # of new RDP Housing units provided by the PDoHS	3 progress reports submitted to the MM with respect to the # of new RDP Housing units provided by the PDoHS	3	Achieved	None	None	Copies of monthly progress reports submitted to the MM	Achieved
Project Management	Project Management	Number of Capital projects (infrastructure) completed in terms of agreed MIG Funding.	Rw25-2022	ED: TS	1.7	Incl.	6	(3) Capital projects (infrastructure) completed in terms of agreed MIG Funding.	N/A	N/A	N/A	N/A	N/A	Copies of practical completion certificates	N/A

Strategic Thrust	Programme	KPI	IDP Link	Resp. MM/ED	SDBI P Ref No	Budget R'000	Baseline	Annual Target 2025/26	3 rd Quarter Target	3 rd Quarter Actual	Achievement	Challenges	Corrective Action	POE	IA Comments
		% spent on the conditional MIG grant by 30 June 2026	Rw06-2022	ED: TS	1.9	Incl.	100%	100% spent on conditional MIG grant	75% spent on conditional MIG grant	70%	Not Achieved	<p>VAT adjustment challenges - resulting in under-reporting of expenditure in one of the projects.</p> <p>The hard rock in the areas affected the progress in another project.</p> <p>Contractors' inconsistent site presence resulted in suboptimal production, thus impacting the progress of the Works, and the slow progress was due to delays in the appointment of the service provider for two projects</p>	<p>On 19 December 2025, the Municipality submitted an amendment to address a VAT adjustment.</p> <p>The amendment was certified by the provincial Municipal Infrastructure Grant (MIG) on 17 March 2026. It is now awaiting final certification from the Department of Cooperative Governance (DCoG).</p> <p>Anticipated Completion: Due to adverse weather and hard rock conditions, the project is expected to require an extension, with a new target date of 15 May 2026. Contractors have been tasked with submitting a revised programme to demonstrate how they will mitigate these delays and meet the revised</p>	MIG expenditure report	Not Achieved

Strategic Thrust	Programme	KPI	IDP Link	Resp. MM/ED	SDBI P Ref No	Budget R'000	Baseline	Annual Target 2025/26	3 rd Quarter Target	3 rd Quarter Actual	Achievement	Challenges	Corrective Action	POE	IA Comments
		Number of Capital projects (2026/27) specifications for consultants/constructors prepared and submitted to the Specification Committee by 28 February 2026		ED: TS	1.1.1	Incl.	0%	6 Capital projects (2026/27) specifications for consultants/constructors prepared and submitted to the Specification Committee	6 Capital projects (2026/27) specifications for consultants/constructors prepared and submitted to the Specification Committee	6	Achieved	None	None	Copy of Specification Document and Acknowledgement of Receipt by Specification Committee Chairperson.	Achieved
Service Delivery	Supply Chain Management	Number of Capital projects (2026/27) advertised and concluded for consultants/contractors by 30 June 2026	Rw06-2022	CFO	1.1.10	In house	New	6 Capital projects (2026/27) advertised and concluded for consultants/contractors	N/A	N/A	N/A	N/A	N/A	Copies of the advert and appointment letters	N/A
	Improved community	Number of community awareness campaigns held in terms of waste management by 30 June 2026	Wr02-2022	ED: SS	1.1.2	In house	3	3 community awareness campaigns held in terms of waste management	1 community awareness campaign held in terms of waste management	1	Achieved	None	None	Close-out report for each campaign, pictures, and attendance registers.	Achieved
Service Delivery	Waste Removal	Number of times refuse collection services rendered per week at Ward 1,2,3,4,5,6,7,8 and 9 (GKPI)	Wr01-2022	ED: SS	1.1.3	14 672	52	52 weekly reports on refuse collection services rendered per week at Ward 1, 2, 3, 4, 5, 6, 7, 8 and 9	13 weekly reports on refuse collection services rendered per week at Ward 1, 2, 3, 4, 5, 6, 7, 8 and 9.	13	Achieved	None	None	Refuse collection schedule and signed refuse collection monthly reports	Achieved

Strategic Thrust	Programme	KPI	IDP Link	Resp. MM/ED	SDBI P Ref No	Budget R'000	Baseline	Annual Target 2025/26	3 rd Quarter Target	3 rd Quarter Actual	Achievement	Challenges	Corrective Action	POE	IA Comments
	Electricity	% of new households connections with basic levels of electricity as per received applications by 30 June 2026 (GKPI) (excluding Eskom licenced areas)	Es02-2022	ED:TS	1.1.4	In house	100%	100% of new household connections with basic levels of electricity as per received applications	N/A	N/A	N/A	N/A	N/A	Register of Work-Orders and Connection Booklets	N/A
Service Delivery	Electricity	Progress report on the development of the Electricity Master Plan submitted to the MM by 30 June 2026	Es10-2022	ED:TS	1.1.5	DBSA	0	1 Progress report on the development of the Electricity Master Plan submitted to the MM	N/A	N/A	N/A	N/A	N/A	Copy of the progress report signed by the MM.	N/A
	Electricity	Number of monthly reports on customer disconnections conducted due to electricity tempering submitted to MM	Es10-2022	ED:TS	1.1.6	In house	4	12 monthly reports on customer disconnections conducted due to electricity tempering submitted to MM	3 monthly reports on customer disconnections conducted due to electricity tempering submitted to MM	3	Achieved	None	None	Monthly Reports submitted to the MM	Achieved
	Roads	Number of KMs of surfaced roads constructed by 30 June 2026	Rsw02-2022	ED:TS	1.1.7	Incl.	0km	3.2KM of surfaced roads constructed	N/A	N/A	N/A	N/A	N/A	Completion/practical completion certificates	N/A

Strategic Thrust	Programme	KPI	IDP Link	Resp. MM/ED	SDBI P Ref No	Budget R'000	Baseline	Annual Target 2025/26	3 rd Quarter Target	3 rd Quarter Actual	Achievement	Challenges	Corrective Action	POE	IA Comments
Service Delivery		Number of m ² of potholes repaired and maintained in all wards by 30 June 2026	Rsw07-2022	ED:TS	1.1.8	In house	12 Reports	360m ² of potholes repaired and maintained in all wards	200m ² of potholes repaired and maintained in all wards	262m ²	Achieved	None	None	Monthly pothole patching report submitted to the MM with a photograph	Achieved
Service Delivery	Roads and Storm Water	Number of kilometres of gravel roads graded by 30 June 2026	Rsw06-2022	ED: TS	1.1.9	In house	12 Reports	60KM of gravel roads graded	60KM of gravel roads graded	68.5KM	Achieved	None	None	Road Maintenance Report signed by the MM	Achieved
		Number of meters of storm-water drainage systems cleaned by 30 June 2026	Rsw10-2022	ED: TS	1.2.0	In house	12 Reports	240M of storm-water drainage systems cleaned per quarter.	60M of storm-water drainage systems cleaned per quarter.	60M	Achieved	None	None	Monthly storm water draining systems cleaned, reports submitted to the MM	Achieved

Strategic Thrust	Programme	KPI	IDP Link	Resp. MM/ED	SDBI P Ref No	Budget R'000	Baseline	Annual Target 2025/26	3 rd Quarter Target	3 rd Quarter Actual	Achievement	Challenges	Corrective Action	POE	IA Comments
	Disaster Management	% availability of emergency response vehicles per quarter to comply to the codes of practice (SANS 10090)	Dm02-2022	ED: SS	1.2.1	1 400	58%	80% availability of emergency response vehicles quarter to comply to the codes of practice (SANS 10090)	80% availability of emergency response vehicles quarter to comply to the codes of practice (SANS 10090)	47%	Not Achieved	Non-Operational Vehicles: 4 vehicles are currently down due to mechanical failures.2 vehicles: At the service provider for repairs (since 10 October 2025).1 vehicle: Currently undergoing repairs at the Municipal Workshop.1 vehicle: Awaiting attention.	Continue to engage fleet and SCM to expedite and prioritize emergency vehicle repairs.	Copies of the quarterly statistics register	Not Achieved
Service Delivery	Disaster Management	% response time normal hours (5 min) with respect to the request for emergency services received per month to vehicles out the gate	Dm07-2022	ED: SS	1.2.2	In house	81%	80% response time normal hours (5 min) with respect to the request for emergency services received	80% response time normal hours (5 min) with respect to the request for emergency services received	88	Achieved	The department exceeded the SANS 10090 performance standard, achieving an 88% response rate within 5 minutes (office hours) against the recommended 80% guideline for Category A Fire Departments.	None required	Copies of the monthly statistics register	Achieved

Strategic Thrust	Programme	KPI	IDP Link	Resp. MM/ED	SDBIP Ref No	Budget R'000	Baseline	Annual Target 2025/26	3 rd Quarter Target	3 rd Quarter Actual	Achievement	Challenges	Corrective Action	POE	IA Comments
		% response time after hours (10 min) with respect to the request for emergency services received per month to vehicles out the gate		ED:SS	1.2.3	In house	85%	85% response time after hours (10 min) with respect to the request for emergency services received	85% response time after hours (10 min) with respect to the request for emergency services received	91%	Achieved	Calls responded to within 10 min (After hours) was reached 91% over all emergency calls responded to where the SANS 10090 guideline is gives 80% guideline for category A Fire Departments	None required	Copies of the monthly statistics register	Achieved
Service Delivery	Disaster Management	Number of community awareness programmes conducted per quarter with respect to emergency / disaster risk awareness	Dm07-2022	ED:SS	1.2.4	0	4	4 community awareness programmes conducted with respect to emergency / disaster risk	1 community awareness programmes conducted with respect to emergency/disaster risk	2	Achieved	The request from Bernice Samuel Hospital was unplanned and short-notice, and a request from the hospital management	The evacuation exercise will be an annual feature and will be added to the 2026/2027 SDBIP	Copy of close-out report with photographs and attendance registers.	Achieved

Strategic Thrust	Programme	KPI	IDP Link	Resp. MM/ED	SDBI P Ref No	Budget R'000	Baseline	Annual Target 2025/26	3 rd Quarter Target	3 rd Quarter Actual	Achievement	Challenges	Corrective Action	POE	IA Comments
	Indigent	Number of new households earning less than R6000 per month provided with access to free basic services by 30 June 2026 (GKPI)	Rw04-2022	CFO	1.2.5	0	277	1000 new households earning less than R6000 per month provided with access to free basic services	250 new households earning less than R6000 per month provided with access to free basic services	91	Not Achieved	The municipality's debt collection is hindered in Eskom-licensed areas because the municipality cannot use electricity cut-offs as a credit control tool. This challenge, combined with high unemployment, has reduced residents' incentive to pay for services or register for indigent support.	The municipality intends to utilize the Indigent Management System to proactively identify qualifying residents and facilitate automatic indigent registration for those who have not formally applied. In addition, the municipality plans to install prepaid water meters for all registered indigent households, enabling them to receive the allocated 6 kilolitres of free basic water. Any consumption exceeding this allocation will be payable by the user through the municipality.	Copy of a list of new households provided with FBS	Not Achieved
Service Delivery	Community Upliftment	Number of initiatives focused on improving the life of designated groups by 30 June 2026	Vg03-2022	MM	1.2.6	5 000	3	4 initiatives focused on improving the life of designated groups	1 initiatives focused on improving the life of designated groups	3	Achieved	Due to sufficient budget, we were able to do more	Adjust the target in the next financial year.	Copy of close-out reports for each initiative	Achieved

Strategic Thrust	Programme	KPI	IDP Link	Resp. MM/ED	SDBI P Ref No	Budget R'000	Baseline	Annual Target 2025/26	3 rd Quarter Target	3 rd Quarter Actual	Achievement	Challenges	Corrective Action	POE	IA Comments
		Number of learners provided with financial support (Mayoral community programme) by 31 March 2026	Led 34-2022	MM	1.2.7	600	142	120 learners provided with financial support (Mayoral community programme)	120 learners provided with financial support (Mayoral community programme)	121	Achieved	Due to sufficient budget, we were able to pay for the 121 students	None	Copies of successful learner applications and report on Registration Fee Assistance Fund allocation and Copy of close-out reports	Achieved
	Community Upliftment	Number of Matric Excellence Awards held by 31 March 2026	Led 34-2022	MM	1.2.8	700	1	1 Matric Excellence Awards held	1 Matric Excellence Awards held	1	Achieved	None	None	Copy of a closeout report for the awards inclusive of photographs and attendance registers.	Achieved
Service Delivery	Environmental	Number of trees planted in public and private spaces per quarter	Wr13-2020	ED: SS	1.2.9	75	1570	50 trees planted in public and private spaces	25 trees planted in public and private spaces	25	Achieved	None	None	Copy of close out reports, inclusive of photographs	Achieved
	Parks	Number of main municipal intersections with ornamental structures maintained per month	Cs 03-2022	ED: SS	1.3.0	In house	12	12 main municipal intersections with ornamental structures are maintained	3 main municipal intersections with ornamental structures maintained	3	Achieved	None	None	Copy of close-out reports, inclusive of photographs	Achieved



Strategic Thrust	Programme	KPI	IDP Link	Resp. MM/ED	SDBI P Ref No	Budget R'000	Baseline	Annual Target 2025/26	3 rd Quarter Target	3 rd Quarter Actual	Achievement	Challenges	Corrective Action	POE	IA Comments
	Youth	Number of Youth Imbizo held per quarter	Pa27-2022	ED: SS	1.3.1	1 200	2	4 Youth Imbizo held	1 Youth Imbizo held	1	Achieved	None	None	Copy of close-out reports for each Imbizo held, inclusive of the pictures and attendance registers	Achieved
Service Delivery	Mainstream Disability and Gender	Number of events scheduled and held in terms of mainstreaming of gender (man and woman & LGBTQI+), disabled, elderly and children by 30 June 2026	Vg 01-05 2022	ED: SS	1.3.2	550	9	7 events scheduled and held in terms of mainstreaming of gender (man and woman & LGBTQI+), disabled, elderly and children	1 events scheduled and held in terms of mainstreaming of gender (man and woman & LGBTQI+), disabled, elderly and children	1	Achieved	None	None	Copy of close-out reports for each event inclusive of the, photographs and attendance registers.	Achieved
	Youth	Number of educational initiatives implemented in terms of the Youth by 30 June 2026	Led35-2022	ED: SS	1.3.3	600	6	6 educational initiatives implemented in terms of the Youth	3 educational initiatives implemented in terms of the Youth	3	Achieved	None	None	Copy of close-out reports for each initiative inclusive of photographs and Attendance Registers	Achieved
		Number of Sports and Arts and Culture events held by 30 June 2026	Ts07-2022	ED: SS	1.3.4	900	2	4 Sports and Arts and Culture events held	N/A	N/A	N/A	N/A	N/A	Copy of close-out reports for each event, inclusive of photographs and attendance Registers.	N/A

Strategic Thrust	Programme	KPI	IDP Link	Resp. MM/ED	SDBI P Ref No	Budget R'000	Baseline	Annual Target 2025/26	3 rd Quarter Target	3 rd Quarter Actual	Achievement	Challenges	Corrective Action	POE	IA Comments
Service Delivery	Libraries	Number of community members utilizing the library facilities monthly	Ls03-2022	ED: SS	1.3.5	In house	33404	20 000 community members utilizing the library facilities	5 000 community members utilizing the library facilities	6402	Achieved	Members of the community mostly used the library to apply, email, scan, and type CVs. Learners used the library to research projects, especially around the end of their school term	Usage of libraries is not predictable	Copies of monthly summary of the statistics register	Achieved
		Number of library awareness campaigns conducted per quarter		ED: SS	1.3.6	0	5	4 library awareness campaigns conducted	1 library awareness campaigns conducted	0	Not Achieved	Marketing of libraries is mostly done on Saturdays if there is no public event that we can use for such purposes. However, this quarter, there was no such event, and since libraries no longer operate on Saturdays, marketing could not be done	A request will be made to request that the staff work on a chosen Saturday in the next quarter, so that they can market the library	Copy of close-out report for each campaign conducted, inclusive of pictures and attendance registers	Achieved



Strategic Thrust	Programme	KPI	IDP Link	Resp. MM/ED	SDBI P Ref No	Budget R'000	Baseline	Annual Target 2025/26	3 rd Quarter Target	3 rd Quarter Actual	Achievement	Challenges	Corrective Action	POE	IA Comments
	Environmental Protection	Number of air quality education and awareness campaigns conducted per quarter	Wr10-2020	ED: SS	1.3.7	In house	2	4 air quality education and awareness campaigns conducted	1 air quality education and awareness campaign conducted	1	Achieved	N/A	N/A	Copy of close-out reports for each campaign conducted, inclusive of pictures and Attendance Registers.	Achieved
Service Delivery	Environmental Protection (Air Quality Management Plan)	Number of compliance inspections conducted to monitor facility performance in terms of Air Quality Act by 30 June 2026	Wr10-2020	ED: SS	1.3.8	In house	2	4 compliance inspections conducted to monitor facility performance in terms of Air Quality Act	1 compliance inspections conducted to monitor facility performance in terms of Air Quality Act	1	Achieved	N/A	N/A	Copy of inspections report and Attendance Registers	Achieved
	Environmental Protection (Air Quality Management Plan)	Number of the state of ambient air quality reports submitted to HHS Portfolio Committee per quarter		ED: SS	1.3.9	In house	4	4 state of ambient air quality reports submitted to HHS Portfolio Committee	1 state of ambient air quality reports submitted to HHS Portfolio Committee	1	Achieved	N/A	N/A	Copy of a close-out report inclusive of the daily station data.	Achieved
	Mainstream HIV/AIDS	Number of HIV/AIDS's educational awareness campaigns held each quarter	Vg06-2022	ED:SS	1.4.0	In house	5	4 HIV/AIDS's educational awareness campaigns held	1 HIV/AIDS's educational awareness campaigns held	1	Achieved	None	None	Copy of the close-out report of each campaign held, inclusive of pictures and Attendance Registers	Achieved

KEY PERFORMANCE AREA 2: Financial Viability and Finance Management

The overall score for this KPA is **85%** for the quarter under review.

KPI Status	KPA 2: Financial viability and Finance Management
Target Met (as planned and exceeded)	33
Target Not Met (below planned)	06
Total	39
% Targets met	85%
% Targets not met	15%

Performance Highlights for 2025/26 Quarter (3)

Challenges	Measures taken to improve performance
% of households billed collected per quarter	
Roughly half of the municipality's debt stems from Eskom-licensed areas, where low payment rates persist due to ineffective credit control and high levels of illegal connections fuelled by faulty metering [1]. Furthermore, significant revenue is lost because many eligible residents fail to register for the indigent program, leading to uncollectable debt accumulation.	To improve revenue collection and reduce debt, the Municipal Manager has established an internal Revenue Enhancement Committee focused on enforcing the Credit Control Policy. Key initiatives include replacing faulty meters and using an automated Indigent Management System to streamline the registration of qualifying residents.
% of employees exceeding legislated overtime levels stipulated as not more than (45) hours per month per employee (TS) (essential services)	
Due to infrastructure failure and the number of employees, the department managed to reduce overtime but was not able to reach the set target.	Management will continue to monitor overtime to meet targets. Situation beyond control will be reported as such, and a pre -approval
% of approved (compliant) invoices paid within 30 days	
Only 88% of the approved invoices were paid due to Municipal financial constraints.	Full Implementation of the credit control policy and debt collection

KPA 2: FINANCIAL VIABILITY AND FINANCE MANAGEMENT

Strategic Goal 2: Improved compliance to MFMA and VKLM policy Framework

Strategic Thrust	Programme	KPI	IDP Link	Resp. MM/ED	SDBIP Ref No	Budget R'000	Baseline	Annual Target 2025/26	3 rd Quarter Target	3 rd Quarter Actual	Achievement	Challenges	Corrective Action	POE	IA Comments
Financial Viability	Financial Management	Approval of MTREF Budget by 31 May 2026	Mf22-2022	CFO	2.1	In house	1	1 Approval of MTREF Budget	N/A	N/A	N/A	N/A	N/A	Copy of the approved Final Annual budget	N/A
		% of amounts of households billed collected per quarter	Mf05-2022	CFO	2.2	In house	27%	75% amounts of households billed collected	75% amounts of households billed collected	23%	Not Achieved	Roughly half of the municipality's debt stems from Eskom-licensed areas, where low payment rates persist due to ineffective credit control and high levels of illegal connections fuelled by faulty metering [1]. Furthermore, significant revenue is lost because many eligible residents fail to register for the indigent program, leading to uncollectable debt accumulation.	To improve revenue collection and reduce debt, the Municipal Manager has established an internal Revenue Enhancement Committee focused on enforcing the Credit Control Policy. Key initiatives include replacing faulty meters and using an automated Indigent Management System to streamline the registration of qualifying residents.	Copies of the Credit Control and debt collection report	Not Achieved

Strategic Thrust	Programme	KPI	IDP Link	Resp. MM/ED	SDBIP Ref No	Budget R'000	Baseline	Annual Target 2025/26	3 rd Quarter Target	3 rd Quarter Actual	Achievement	Challenges	Corrective Action	POE	IA Comments
		% of the amount of businesses billed collected per quarter		CFO	2.3	In house	90%	85% amounts of businesses billed and collected	85% amounts of businesses billed and collected	91%	Achieved	Target achieved	Target achieved	Copies of the Credit Control and debt collection report	Achieved
		Unaudited Annual Financial Statements (AFS) submitted on or before 31 Aug 2025	Mf19-2022	CFO	2.4	In house	1	1 Unaudited Annual Financial Statements (AFS) submitted to AGSA	N/A	N/A	N/A	N/A	N/A	N/A	Copy of the Unaudited AFS & Proof of submission to AG
Financial Management	Financial Management	Number of interim financial statements prepared and submitted to the MM by 31 March 2026	Mf19-2022	CFO	2.5	In house	1	1 interim financial statements prepared and submitted to the MM	1 interim financial statements prepared and submitted to the MM	1	Achieved	None	None	Interim financial statements & acknowledgement of receipt by the MM	Achieved
		Number of monthly section 71 MFMA reports submitted to Mayoral committee within legislative timeframes	Mf16-2022	CFO	2.6	In house	12	12 section 71 MFMA reports submitted to Mayoral committee	4 section 71 MFMA reports submitted to Mayoral committee	4	Achieved	None	None	Copy of monthly section 71 report	Achieved
Financial Management	Financial Management	Midyear section 72 MFMA report submitted to Executive Mayor within legislative timeframes by 25 January 2026	Mf17-2022	CFO	2.7	In house	1	1 Midyear section 72 MFMA report submitted to Executive Mayor	1 Midyear section 72 MFMA report submitted to Executive Mayor	1	Achieved	None	None	Copy of the Section 72 Report and proof of submission	Achieved
		Number of quarterly section 52(d) MFMA reports submitted to Mayoral committee within legislative timeframes	Mf17-2022	CFO	2.8	In house	4	4 section 52(d) MFMA reports submitted to Mayoral committee	1 section 52(d) MFMA reports submitted to Mayoral committee	1	Achieved	None	None	Copy of the quarterly section 52(d) report	Achieved

Strategic Thrust	Programme	KPI	IDP Link	Resp. MM/ED	SDBIP Ref No	Budget R'000	Baseline	Annual Target 2025/26	3 rd Quarter Target	3 rd Quarter Actual	Achievement	Challenges	Corrective Action	POE	Comments
		% of approved (compliant) invoices paid within 30 days		CFO	2.9	In house	16%	100% approved (compliant) invoices paid	100% approved (compliant) invoices paid	88	Not Achieved	Only 88% of the approved invoices were paid due to Municipal financial constraints.	Full Implementation of the credit control policy and debt collection	Copy of the monthly creditors reconciliation report	Not Achieved
Financial management	Financial Management	% spent on conditional FMG grant per quarter	Mf15-2022	CFO	2.1.0	1 800	100%	100% spent on conditional FMG grant	75% spent on conditional FMG grant	75	Achieved	None	None	Copies of the monthly FMG Report	Achieved
		% Debt coverage ratio (GKPI) by 30 September 2025		CFO	2.1.1	In house	0%	45% Debt coverage ratio	N/A	N/A	N/A	N/A	N/A	Statement of financial position and statement of financial performance	N/A
		% outstanding service debtors to revenue (GKPI) by 30 September 2025		CFO	2.1.2	In house	67%	68% Outstanding service debtors to revenue	N/A	N/A	N/A	N/A	N/A	Statement of Financial Position, Statement of Financial Performance, Notes to the AFS	N/A
		Cost coverage ratio (GKPI) by 30 September 2025		CFO	2.1.3	In house	0	1:3 Cost coverage ratio	N/A	N/A	N/A	N/A	N/A	Statement of Financial Position, Statement of Financial Performance, Notes to the AFS	N/A
Financial management	Supply Chain Management	Number of days taken to conclude and award tenders above R300 000 by 30 June 2026	SC04-2022	CFO	2.1.4	In house	90	<90 days taken to conclude and award tenders above R300 000	<90 days taken to conclude and award tenders above R300 000	90 days	Achieved	None	None	Copy of the SCM Register	Achieved

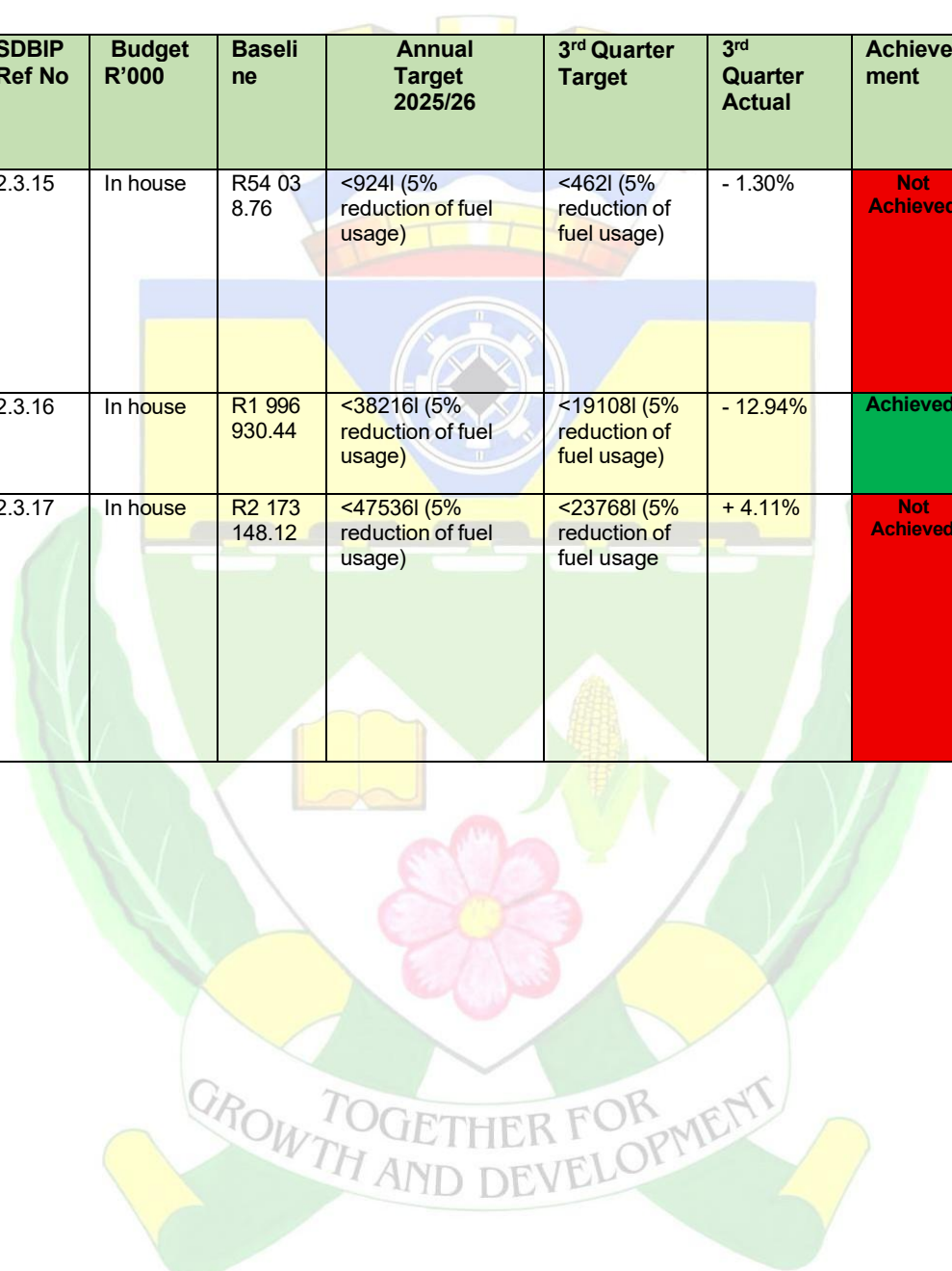
Strategic Thrust	Programme	KPI	IDP Link	Resp. MM/ED	SDBIP Ref No	Budget R'000	Baseline	Annual Target 2025/26	3 rd Quarter Target	3 rd Quarter Actual	Achievement	Challenges	Corrective Action	POE	IA Comments	
		Number of monthly deviation reports submitted to the Council (Total organisation)	SC01-2022	CFO	2.1.5	In house	12	12 deviation reports submitted to Council	4 deviation reports submitted to Council	4	Achieved	None	None	Copy of the quarterly SCM deviation report and Council Resolution.	Achieved	
		Number of monthly SCM reports submitted to Council		CFO	2.1.6	In house	12	12 SCM reports submitted to Council	4 SCM reports submitted to Council	4	Achieved	None	None	Copy of the monthly SCM report and Council Resolution	Achieved	
		Number of monthly UIFW reports submitted to the Council		CFO	2.1.7	In house	12	12 UIFW reports submitted to Council	4 UIFW reports submitted to Council	4	Achieved	None	None	Copy of UIFW Report and Council Resolution.	Achieved	
Financial Management	Asset Management	Number of Asset verification reports submitted to MM by 31 March 2026	As02-2022	CFO	2.1.8	In house	1	2 Asset verification report submitted to Council	1 Asset verification report submitted to Council	1	Achieved	None	None	Copy of the asset verification reports and Council Resolution.	Achieved	
		Fixed Asset Register updated per month.		CFO	2.1.9	In house	12	12 Monthly update of the Fixed Asset Register	3 Monthly update of the Fixed Asset Register	3	Achieved	None	None	Extract of new assets on the fixed asset register.	Achieved	
	Improved Compliance to Legislation & Policies (Financial Management)	% of employees exceeding legislated overtime levels stipulated as not more than (40) hours per month per employee (Finance only)	Mf15-2022	CFO	2.2.5	In house	0%	0% employees exceeding legislated overtime levels stipulated as not more than (40) hours per month	0% employees exceeding legislated overtime levels stipulated as not more than (40) hours per month	0%	0%	Achieved	None	None	Copies of approved financial overtime schedule	Achieved
		% spent of the total operational Budget per quarter		Mf15-2022	CFO	2.2.0	In house	123%	95% spent of the total operational Budget	75% spent of the total operational Budget	66	Not Achieved	This is a saving since the municipality's budget is unfunded.	Full implementation of the cost curtailment policy until the budget is funded.	Copy of the quarterly section 52(d) report	Not Achieved

Strategic Thrust	Programme	KPI	IDP Link	Resp. MM/ED	SDBIP Ref No	Budget R'000	Baseline	Annual Target 2025/26	3 rd Quarter Target	3 rd Quarter Actual	Achievement	Challenges	Corrective Action	POE	IA Comments	
Financial Management	Improved Compliance to Legislation & Policies (Financial)	% spent on employee related costs in terms of the total operational Budget per quarter		CFO	2.2.1	In house	27%	<30% spent on employee related costs in terms of the total operational Budget	<30% spent on employee related costs in terms of the total operational Budget	26	Achieved	None	None	Copy of the quarterly section 52(d) report	Achieved	
		Number of monthly reports submitted to Council in terms of legislated overtime levels (Total Organisation)		ED:CS	2.2.2	In house	12	12 reports submitted to Council in terms of legislated overtime levels	4 reports submitted to Council in terms of legislated overtime levels	4	Achieved	None	None	Copies of the monthly overtime report submitted to Council	Achieved	
		% of employees exceeding legislated overtime levels stipulated as not more than (40) hours per month per employee (OMM)	Mf15-2022	MM	2.2.3	In house	0%	0% employees exceeding legislated overtime levels stipulated as not more than (40) hours per month	0% employees exceeding legislated overtime levels stipulated as not more than (40) hours per month	0%	0%	Achieved	None	None	Copies of the approved financial overtime schedule	Achieved
		% of employees exceeding legislated overtime levels stipulated as not more than (40) hours per month per employee (CS only)		ED:CS	2.2.4	In house	0%	0% employees exceeding legislated overtime levels stipulated as not more than (40) hours per month	0% employees exceeding legislated overtime levels stipulated as not more than (40) hours per month	0%	0%	Achieved	None	None	Copies of the approved financial overtime schedule	Achieved
		% of employees exceeding legislated overtime levels stipulated as not more than (40) hours per month per employee (SS only) (excl., essential services)	Mf15-2022	ED:SS	2.2.6	In house	0%	0% employees exceeding legislated overtime levels stipulated as not more than (40) hours per month	0% employees exceeding legislated overtime levels stipulated as not more than (40) hours per month	0%	0%	Achieved	None	None	Copies of the approved financial overtime schedule	Achieved

Strategic Thrust	Programme	KPI	IDP Link	Resp. MM/ED	SDBIP Ref No	Budget R'000	Baseline	Annual Target 2025/26	3 rd Quarter Target	3 rd Quarter Actual	Achievement	Challenges	Corrective Action	POE	Comments
Financial Management		% of employees exceeding legislated overtime levels stipulated as not more than (45) hours per month per employee (SS only) (essential services)		ED: SS	2.2.7	In house	0%	0% employees exceeding legislated overtime levels stipulated as not more than (45) hours per month (essential services)	0% employees exceeding legislated overtime levels stipulated as not more than (45) hours per month (essential services)	0%	Achieved	none	none	Copies of the approved financial overtime schedule	Achieved
	Improved Compliance to Legislation & Policies (Financial Management)	% of employees exceeding legislated overtime levels stipulated as not more than (40) hours per month per employee (TS) (excl., essential services)	Mf15-2022	ED:TS	2.2.8	In house	9%	0% employees exceeding legislated overtime levels stipulated as not more than (40) hours per month	0% employees exceeding legislated overtime levels stipulated as not more than (40) hours per month	0%	Achieved	None	None	Copies of approved financial overtime schedule	Not Achieved
		% of employees exceeding legislated overtime levels stipulated as not more than (45) hours per month per employee (TS) (essential services)		ED:TS	2.2.9	In house	7%	0% employees exceeding legislated overtime levels stipulated as not more than (45) hours per month (essential services)	0% employees exceeding legislated overtime levels stipulated as not more than (45) hours per month (essential services)	15%	Not Achieved	Due to infrastructure failure and the number of employees, the department managed to reduce overtime but was not able to reach the set target.	Management will continue to monitor overtime to meet targets. Situation beyond control will be reported as such, and a pre-approval	Copies of the approved financial overtime schedule	Not Achieved
	Financial Management & Revenue Enhancement	Number of road traffic safety operations conducted per month	Tp02-2022	ED: SS	2.3.0	In house	15	12 road traffic safety operations conducted	3 road traffic safety operations conducted	3	Achieved	None	None	Copy of close-up report for road traffic safety operations conducted, inclusive of photographs	Achieved
		Number of flammable liquids permits issued by 30 June 2026	Mf02-2022	ED: SS	2.3.1	In house	48	39 flammable liquids permits issued	N/A	N/A	N/A	N/A	N/A	Copy of permits register	N/A

Strategic Thrust	Programme	KPI	IDP Link	Resp. MM/ED	SDBIP Ref No	Budget R'000	Baseline	Annual Target 2025/26	3 rd Quarter Target	3 rd Quarter Actual	Achievement	Challenges	Corrective Action	POE	Comments
Financial Management		% of trade licenses issued as per approved applications by 30 June 2026		MM	2.3.2	In house	7	100% trade licenses issued as per approved applications	N/A	N/A	N/A	N/A	N/A	Copies of the application register and a copy of the trade license issued.	N/A
		Number of monthly reports on the implementation of credit control and debt collection policy submitted to Council.	SCM01-	CFO	2.3.3	In house	12	12 reports on the implementation of credit control and debt collection policy submitted to Council	4 reports on the implementation of credit control and debt collection policy submitted to Council.	4	Achieved	None	None	Copy of Monthly Credit Control Report and Council Resolution	Achieved
		Number of monthly reports submitted to Council on budget funding plan	2022	CFO	2.3.4	In house	4	12 reports submitted to Council on budget funding plan	4 monthly reports submitted to Council on budget funding plan	4	Achieved	None	None	Copies of quarterly budget funding plan reports.	Achieved
	Financial Management	Number of business licences verifications conducted bi-annually	Mf02-2022	MM	2.3.5	In house	34	20 business licences verifications conducted	N/A	N/A	N/A	N/A	N/A	Register of businesses verified, and a copy of a close-out report	N/A
	Improved Compliance to	Number of Bank reconciliation submitted to the Municipal Manager within 10 days after the end of the month'	Mf15-2022	CFO	2.3.6	In house	12	12 Bank reconciliations submitted to the Municipal Manager	3 Bank reconciliations submitted to the Municipal Manager	3	Achieved	None	None	Bank reconciliation and proof of submission	Achieved
	Financial Management	Number of monthly reports produced and submitted to the MM on the usage of fuel	SC01-2022	CFO	2.3.7	In house	12	12 reports produced and submitted to the MM on the usage of fuel	3 reports produced and submitted to the MM on the usage of fuel	3	Achieved	None	None	Copy of signed fuel usage report	Achieved

Strategic Thrust	Programme	KPI	IDP Link	Resp. MM/ED	SDBIP Ref No	Budget R'000	Baseline	Annual Target 2025/26	3 rd Quarter Target	3 rd Quarter Actual	Achievement	Challenges	Corrective Action	POE	IA Comments
Financial management	Financial Management	% reduction of overtime levels worked by employees per quarter (MM only)	Mf15-2022	MM	2.3.8	In house	R507 545.98	<R456 791 (10% reduction of overtime levels worked by employees)	<R100 698.52 (10% reduction of overtime levels worked by employees)	-71%	Achieved	None	None	Copy of the departmental overtime report	Achieved
		% reduction of overtime levels worked by employees per quarter (CS only)		ED:CS	2.3.9	In house	R34 798.11	<R31 318 (10% reduction of overtime levels worked by employees)	<R11 221.4 (10% reduction of overtime levels worked by employees)	- 100%	Achieved	None	None	Copy of the departmental overtime report	Achieved
		% reduction of overtime levels worked by employees per quarter (Finance only)		CFO	2.3.10	In house	R1 628 020.28	<R1 465 218 (10% reduction of overtime levels worked by employees)	<R292 369.26 (10% reduction of overtime levels worked by employees)	- 62%	Achieved	Implementation of cost containment measures.	None	Copy of the departmental overtime report	Achieved
		% reduction of overtime levels worked by employees per quarter (SS only)		ED: SS	2.3.11	In house	R4 038 527.78	<R3 634 675 (10% reduction of overtime levels worked by employees)	<R1 057 330.13 (10% reduction of overtime levels worked by employees)	- 44%	Achieved	Improved controls	Not applicable	Copy of the departmental overtime report	Not Achieved
	% reduction of overtime levels worked by employees per quarter (TS only)	Mf15-2022	TS	2.3.12	In house	R9 501 729.72	<R8 551 557 (10% reduction of overtime levels worked by employees)	<R 2 400 082.12 (10% reduction of overtime levels worked by employees)	- 26%	Achieved	None	None	Copy of the departmental overtime report	Achieved	
	% Reduction of fuel usage per quarter (MM only)		MM	2.3.13	In house	R390 664.84	<376l (5% reduction of fuel usage)	< 188l (5% reduction of fuel usage)	- 40.37%	Achieved	None	None	Copy of the departmental fuel usage	Achieved	
	% Reduction of fuel usage per quarter (CS only)		ED: CS	2.3.14	In house	R49 005.56	<1044l (5% reduction of fuel usage)	<522l (5% reduction of fuel usage)	- 36.30%	Achieved	None	None	Copy of the departmental fuel usage	Achieved	



Strategic Thrust	Programme	KPI	IDP Link	Resp. MM/ED	SDBIP Ref No	Budget R'000	Baseline	Annual Target 2025/26	3 rd Quarter Target	3 rd Quarter Actual	Achievement	Challenges	Corrective Action	POE	Comments
Financial Management	Financial Management	% Reduction of fuel usage per quarter (Finance only)		CFO	2.3.15	In house	R54 038.76	<924l (5% reduction of fuel usage)	<462l (5% reduction of fuel usage)	- 1.30%	Not Achieved	Fuel usage has been reduced, but didn't meet the 5% target.	Fuel usage is to be closely monitored in the 4 th quarter to meet the target.	Copy of the departmental fuel usage	Not Achieved
		% Reduction of fuel usage per quarter (SS only)	Mf15-2022	ED: SS	2.3.16	In house	R1 996 930.44	<38216l (5% reduction of fuel usage)	<19108l (5% reduction of fuel usage)	- 12.94%	Achieved	None	None	Copy of the departmental fuel usage	Achieved
		% Reduction of fuel usage per quarter (TS only)		ED: TS	2.3.17	In house	R2 173 148.12	<47536l (5% reduction of fuel usage)	<23768l (5% reduction of fuel usage)	+ 4.11%	Not Achieved	The increase is due to the vehicles that have to work due to infrastructure failures, triggers, shortage, and supply of water through water trucks	Fuel usage to be closely monitored in the 4 th quarter to decrease usage by 5%.	Copy of the departmental fuel usage	Not Achieved

KEY PERFORMANCE AREA 3: Institutional Development and Transformation

The overall score for this KPA is **82%** for the quarter under review.

KPI Status	KPA 3: Institutional Development and Transformation
Target Met (as planned and exceeded)	14
Target Not Met (below planned)	03
Total	17
% Targets met	82%
% Targets not met	18%

Performance Highlights for 2025/26 Quarter (3)

Challenges	Measures taken to improve performance
% of Internal Audit findings in terms of ICT resolved by 30 June 2026	
Due to systems technical alignment project that has to be implemented e.g. Domain, website, and email migration process before addressing the Internal Audit findings, it is very prudent that ICT adhere to and complete, hence in progress.	The plan is that an induction to Change Management Policy will be conducted and a plan to start with the testing of Disaster Recovery. In Q4 these will be addressed.
2025/26 Mid-year and 2024/25 Annual Performance Reviews of Section 56 & 54A employees conducted by the 31st of March 2026	
Delays in the finalization of assessment reports as well as difficulties in securing all panel members as required by Section 27(4)(d) of the Local Government Performance Management Regulations for the Municipal Manager and the Section 56 Managers (2006).	Ensure early preparation of assessment reports. The assessments will now be held on the 23rd April 2026 as per the uploaded PoE

KPA 3: INSTITUTIONAL DEVELOPMENT AND TRANSFORMATION

Strategic Goal 3: Improved efficiency and effectiveness of the Municipal Administration

Strategic Thrust	Programme	KPI	IDP Link	Resp. MM/ED	SDBIP Ref No	Budget R'000	Baseline	Annual Target 2025/26	3 rd Quarter Target	3 rd Quarter Actual	Achievement	Challenges	Corrective Action	POE	Comments
Operational Efficiency	Performance	% of KPIs attaining organisational targets by 30 June 2026 (Total organisation)	Pm02-2022	MM	3.1	In house	78%	100% KPIs attaining organisational targets	90% KPIs attaining organisational targets	85%	Not Achieved	Refer to Challenges Listed on Not Achieved Indicators	Corrective Action listed to be implemented.	Copies of the quarterly consolidated performance report	N/A
	Organisational Development	Submit a final report to the MM after conducting an employee satisfaction survey by 30 June 2026	Eq1-2022	ED:CS	3.2	In house	0	1 final report submitted to the MM after conducting an employee satisfaction	N/A	N/A	N/A	N/A	N/A	Copy of final satisfaction survey evaluation report acknowledged by MM	N/A
		2026/27 Calendar of events developed and approved by Council by 30 June 2026	Pa18-2022	ED:CS	3.3	In house	1	1 Calendar of events developed and approved by Council	N/A	N/A	N/A	N/A	N/A	Approved calendar of events and Council Resolution	N/A
		% of employees from previously disadvantaged groups appointed in the three highest Task Grades of management (GKPI) by 30 June 2026	Eq2-2022	ED:CS	3.4	In house	85%	85% employees from previously disadvantaged groups appointed in the three highest Task Grades of management	N/A	N/A	N/A	N/A	N/A	Copies of appointment letters	N/A
		2025-30 Employment Equity Plan developed and approved by Council by 31 March 2026.		ED:CS	3.4.1	In house	New	1 (2025-30) Employment Equity Plan developed and approved by Council	N/A	N/A	N/A	N/A	N/A	Approved EE Plan and Council Resolution	N/A
		% of budget spent implementing the Workplace Skills Plan (GKPI) by 30 June 2026	Ts06-2022	ED:CS	3.5	2 000	100%	100% budget spent implementing the Workplace Skills Plan	N/A	N/A	N/A	N/A	N/A	Copy of an extract from a Section 52 (d) report	N/A

Strategic Thrust	Programme	KPI	IDP Link	Resp. MM/ED	SDBIP Ref No	Budget R'000	Baseline	Annual Target 2025/26	3 rd Quarter Target	3 rd Quarter Actual	Achievement	Challenges	Corrective Action	POE	Comments
Operational Efficiency	Organisational Development	Number of bi-annual reports submitted to the MM on disciplinary matters reported and finalized by 30 June 2026	Pa36-2022	ED: CS	3.6	In house	2	2 reports submitted to the MM on disciplinary matters reported and finalized by 30 June 2026	N/A	N/A	N/A	N/A	N/A	Reports submitted to the MM on disciplinary matters were reported and finalized	N/A
		% of Internal Audit findings in terms of ICT resolved by 30 June 2026	Pa13-2022	MM	3.7	In house	79%	100% Internal Audit findings in terms of ICT have been resolved	100% Internal Audit findings in terms of ICT have been resolved	34	Not Achieved	Due to systems technical alignment project that has to be implemented e.g. Domain, website, and email migration process before addressing the Internal Audit findings, it is very prudent that ICT adhere to and complete, hence in progress.	The plan is that an induction to Change Management Policy will be conducted and a plan to start with the testing of Disaster Recovery. In Q4 these will be addressed.	Copy of a follow-up on Internal Audit Report	Not Achieved

Strategic Thrust	Programme	KPI	IDP Link	Resp. MM/ED	SDBIP Ref No	Budget R'000	Baseline	Annual Target 2025/26	3 rd Quarter Target	3 rd Quarter Actual	Achievement	Challenges	Corrective Action	POE	IA Comments
Operational Efficiency	ICT	Microsoft 365 programme installed and implemented by 30 September 2025.	It 02/08/2025 2022	MM	3.8	In house	New	Microsoft 365 programme installed and implemented by 30 September 2025.	N/A	N/A	N/A	N/A	N/A	Copy Software License	N/A
		Number of ICT Steering Committee reports submitted to the MM per quarter		MM	3.9	In house	4	1 ICT Steering Committee report submitted to the MM per quarter	1 ICT Steering Committee report submitted to the MM per quarter	1	Achieved	None.	None.	ICT Steering Committee reports signed by the MM per Quarter	Achieved
	Legal Services	Number of quarterly reports on the status of municipal service level agreements approved by the MM by 30 June 2026	SCM01 - 2022	ED: CS	3.1.0	In house	4	4 quarterly reports on the status of municipal service level agreements approved by the MM	1 quarterly report on the status of municipal service level agreements approved by the MM	1	Achieved	None	None	Quarterly Reports on the status of municipal service level agreements approved by the MM	Achieved
Operational Efficiency	Legal Services	Number of quarterly reports on the status of municipal legal cases that the municipality is involved in approved by the MM by 30 June 2026	Mf15-2022	ED: CS	3.1.1	In house	4	4 quarterly reports on the status of municipal legal cases that the municipality is involved in approved by the MM	1 quarterly reports on the status of municipal legal cases that the municipality is involved in approved by the MM	1	Achieved	None	None	Quarterly reports on the status of municipal legal cases that the municipality is involved in approved by the MM	Achieved

Strategic Thrust	Programme	KPI	IDP Link	Resp. MM/ED	SDBIP Ref No	Budget R'000	Baseline	Annual Target 2025/26	3 rd Quarter Target	3 rd Quarter Actual	Achievement	Challenges	Corrective Action	POE	Comments	
Organisational Development	Organisational Development	Review and submit organisational structure (aligned to the IDP and Budget) to Council for approval before June 2026	Eq9-2022	ED:CS	3.1.2	In house	1	1 Review and submit organisational structure (aligned to the IDP and Budget) to Council for approval	N/A	N/A	N/A	N/A	N/A	Copy of an approved annual organogram by Council and Council Resolution	N/A	
		Number of monthly Human Capital reports submitted to Council by 30 June 2026	Eq10-2022	ED:CS	3.1.3	In house	12	12 staff Human Capital reports submitted to Council	4 staff Human Capital reports submitted to Council	4	Achieved	None	None	Copies of Human Capital reports submitted to Council	Achieved	
	Fleet Management	Number of quarterly fleet management reports submitted and approved by the MM	Pa36-2022	ED:TS	3.1.4	In house	4	4 fleet management report submitted and approved by the MM	1 fleet management report submitted and approved by the MM	3	Achieved	None	None	Fleet management reports approved by the MM	Achieved	
	Organisational	Number of job descriptions reports submitted and approved by the MM by 30 June 2026	Eq12-2022	ED:CS	3.1.5	In house	2	2 job descriptions reports submitted and approved by the MM	N/A	N/A	N/A	N/A	N/A	Copy of job descriptions report signed by the MM	N/A	
	Workplace Skills Development	Workplace Skills Plan (WSP) and Annual Training Report (ATR) submitted to LGSETA on due date 30 April 2026	Ts04-	ED:CS	3.1.6	In house	1	1 Workplace Skills Plan (WSP) and Annual Training Report (ATR) submitted to LGSETA	N/A	N/A	N/A	N/A	N/A	N/A	Copies of WSP and ATR submitted to the LG SETA	N/A
		Number of quarterly training status reports submitted to the District	2022	ED:CS	3.1.7	In house	4	4 Training status reports submitted to the District	1 Training status report submitted to the District	1	Achieved	None	None	Copy of quarterly training status report submitted to the District	Achieved	
		Number of employees trained per quarter in line with the approved 2025/26 WSP	Ts04-2022	ED:CS	3.1.9	2 000	7	70 employees trained per quarter in line with the approved 2025/26 WSP	N/A	N/A	N/A	N/A	N/A	N/A	Copies of the quarterly training report submitted to the District	N/A

Strategic Thrust	Programme	KPI	IDP Link	Resp. MM/ED	SDBIP Ref No	Budget R'000	Baseline	Annual Target 2025/26	3 rd Quarter Target	3 rd Quarter Actual	Achievement	Challenges	Corrective Action	POE	IA Comments
Organisational Development	Workplace Health and Safety	Number of monthly workplace inspections conducted and submitted to the MM	Oh06-	ED:CS	3.2.0	In house	12	12 workplace inspections were conducted and submitted to the MM	3 workplace inspections were conducted and submitted to the MM	3	Achieved	None	None	Copies of monthly inspection reports submitted to the MM	Achieved
		Number of quarterly OHS Committee minutes submitted to the MM	2022	ED:CS	3.2.1	In house	4	4 OHS Committee minutes submitted to the MM	1 OHS Committee minutes submitted to the MM	1	Achieved	None	None	Minutes, Attendance Registers, and Acknowledgement of Receipt by the MM.	Achieved
		Number of employee wellness reports submitted to the MM per quarter	Oh05-2022	ED:CS	3.2.2	900	3	4 employee wellness reports submitted to the MM	1 employee wellness report submitted to the MM	1	Achieved	None	None	Copy of the close-out report	Achieved
	Labour Relations	Number of Local Labour Forum (LLF) meetings co-ordinated every quarter as per the approved Calendar of Events	Pa36-2022	ED:CS	3.2.3	In house	4	4 quarterly Local Labour Forum (LLF) meetings co-ordinated	1 quarterly Local Labour Forum (LLF) meeting co-ordinated	1	Achieved	None	None	Copy of signed Council agendas and attendance register	Achieved

Strategic Thrust	Programme	KPI	IDP Link	Resp. MM/ED	SDBIP Ref No	Budget R'000	Baseline	Annual Target 2025/26	3 rd Quarter Target	3 rd Quarter Actual	Achievement	Challenges	Corrective Action	POE	Comments
Operational Efficiency	Performance Management	2025/26 Mid-year and 2024/25 Annual Performance Reviews of Section 56 & 54A employees conducted by the 31 st of March 2026	Pm06-2022	MM	3.2.4	50	2	2025/26 Mid-year and 2024/25 Annual Performance Reviews of Section 56 & 54A employees conducted	2025/26 Mid-year and 2024/25 Annual Performance Reviews of Section 56 & 54A employees conducted	0	Not Achieved	Delays in the finalization of assessment reports as well as difficulties in securing all panel members as required by Section 27(4)(d) of the Local Government Performance Management Regulations for the Municipal Manager and the Section 56 Managers (2006).	Ensure early preparation of assessment reports. The assessments will now be held on the 23rd April 2026 as per the uploaded PoE	Performance Assessment Reports and attendance registers.	Not achieved
		Performance Agreements of Senior Managers signed by 31 July. 2025	Pm05-2022	MM	3.2.5	In house	5	5 Performance Agreements of Senior Managers signed	N/A	N/A	N/A	N/A	N/A	Signed Performance Agreements and proof of submission to CoGTA	N/A
		Compilation of the Annual Performance Report (2024/25 FY) and submitted to AG by 31 Aug 2025	Pm02-	MM	3.2.6	In house	1	1 Annual Performance Report (2024/25 FY) submitted to AG	N/A	N/A	N/A	N/A	N/A	Copy of APR and proof of submission to AG	N/A
		Number of quarterly SDBIP performance reports submitted to Council	2022	MM	3.2.7	In house	4	4 SDBIP performance reports submitted to Council	1 SDBIP performance report submitted to Council	1	Achieved	None	None	Quarterly SDBIP performance report and Council Resolution.	Achieved

Strategic Thrust	Programme	KPI	IDP Link	Resp. MM/ED	SDBIP Ref No	Budget R'000	Baseline	Annual Target 2025/26	3 rd Quarter Target	3 rd Quarter Actual	Achievement	Challenges	Corrective Action	POE	IA Comments
Records Management		Number of paper-based records digitalized and indexed into EDMS per quarter.	Rm01 –	ED:CS	3.2.8	In house	New	400 paper-based records digitized and indexed into EDMS	100 paper-based records digitized and indexed into EDMS	250	Achieved	The municipality is implementing the Electronic Document Management System (EDMS) to enhance the efficiency, security, and accessibility of records.	The digitization process is aligned with the provisions of the National Archives and Records Service of South Africa Act, 1996 (Act No. 43 of 1996), Mpumalanga Archives Act, No. 14 of 1998 and the municipality's Records Management Policy.	Copy of dated EDMS screenshots of uploaded records	Achieved
		Number of records management workshops conducted for staff by 30 June 2026	2022	ED:CS	3.2.9	In house	New	4 Records management workshops conducted for staff	1 Records management workshop conducted for staff	2	Achieved	In order to strengthen compliance with records management prescripts and improve system utilization.	Strengthening of monitoring and compliance mechanisms are implemented	Invitation and Attendance Registers	Achieved



Strategic Thrust	Programme	KPI	IDP Link	Resp. MM/ED	SDBIP Ref No	Budget R'000	Baseline	Annual Target 2025/26	3 rd Quarter Target	3 rd Quarter Actual	Achievement	Challenges	Corrective Action	POE	Comments
Operational efficiency	Records Management	Number of mini registry inspections conducted per quarter in terms of compliance with the Mpumalanga Archives	Rm01-2022	ED:CS	3.2.10	In house	New	4 mini registry inspections conducted per quarter in terms of compliance with the Mpumalanga Archives	1 mini registry inspection conducted per quarter in terms of compliance with the Mpumalanga Archives	1	Achieved	The purpose of the inspection was to assess the condition of records management practices, compliance with records management policies, and to identify areas requiring improvement in line with legislative requirements and best practices.	The Records Management Unit will continue to inspect mini registries in order to protect the integrity and longevity of municipal records but also ensure compliance with the National Archives and Records Service of South Africa Act, 1996 (Act No. 43 of 1996) and internal records management policies.	Inspection Report with a checklist and register.	Achieved

KEY PERFORMANCE AREA 4: Good Governance and Public Participation

The overall score for this KPA is **86%** for the quarter under review.

KPI Status	KPA 4: Good Governance and Public Participation
Target Met (as planned and exceeded)	32
Target Not Met (below planned)	05
Total	32
% Targets met	86%
% Targets not met	14%

Performance Highlights for 2025/26 Quarter (3)

Challenges	Measures taken to improve performance
% of AG Management Letter findings resolved (in terms of the Audit Action Plan) by 30 June 2026 (Total organization)	
The billing corrections are ongoing and identifiable as and when the billing is done.	The revenue section has started the data cleansing, which will address almost all their findings. The methodology to revise the useful life of assets is completed and submitted to Internal Audit for review.
% of Council meetings resolutions resolved per quarter (Total organisation)	
The resolutions not achieved are interlinked between different departments. Other resolutions are reliant on external stakeholders.	The responsible departments will ensure that the resolutions not implemented will be implemented by the end of the financial year.
% of Internal Audit Findings resolved per quarter as per the Audit Plan (Total Organization)	
Targets not fully achieved within the period due to resource constraints and prioritization of high-risk areas.	Continue monitoring progress, provide additional support and guidance, and ensure completion by the next review period.
Number of radio slots secured for the Executive Mayor per quarter	
Reached an agreement with the GCIS to secure weekly slots in the fourth quarter with three community radio stations (KCRS, Emalahleni and RISE fm), the one radio station did not comply during the third quarter hence there was no slot provided.	Reached an agreement with the GCIS to secure weekly slots in the fourth quarter with three community radio stations (KCRS, Emalahleni and RISE fm). RISE FM came up with a proposal regarding the radio slots, following an engagement with the Communications unit. The proposal will still have to be considered, as it will be at the cost of the municipality.

KPA 4: GOOD GOVERNANCE AND PUBLIC PARTICIPATION

Strategic Goal 4: Improve community confidence in the system of local government

Strategic Thrust	Programme	KPI	IDP Link	Resp. MM/ED	SDBIP Ref No	Budget R'000	Baseline	Annual Target 2025/26	3rd Quarter Target	3rd Quarter Actual	Achievement	Challenges	Corrective Action	POE	IA Comments	
Good Governance	Good Governance	% of total MPAC resolutions raised and resolved per quarter	Pa29-2022	MM	4.1	In house	65%	80% MPAC resolutions were raised and resolved	80% MPAC resolutions were raised and resolved	100%	Achieved	None	None	Copies of the quarterly Report inclusive of MPAC Resolutions Register	Achieved	
	Risk Management	% execution per quarter of Risk Management Plan in line with detailed time schedule (total organisation)	Pa07-2022	MM	4.2	In house	85%	85% execution of the Risk Management Plan in line with the detailed time schedule	85% execution of the Risk Management Plan in line with the detailed time schedule	85%	Achieved	None	None	Copies of the Quarterly Risk Reports, and minutes of the Risk Management Meetings	Achieved	
	Good Governance	Obtain an improved audit opinion from the annual audit outcome from AGSA	Pa08-2022	CFO	4.3	In house	Qualified Opinion	Unqualified Opinion	N/A	N/A	N/A	N/A	N/A	N/A	Copy of the Auditor General's final audit report	N/A
		% of AG Management Letter findings resolved (in terms of the Audit Action Plan) by 30 June 2026 (Total organization)	Pa11-2022	CFO	4.4	In house	72%	85% AG Management Letter findings resolved (in terms of the Audit Action Plan)	50% AG Management Letter findings resolved (in terms of the Audit Action Plan)	24	Not Achieved	The billing corrections are ongoing and identifiable as and when the billing is done.	The revenue section has started the data cleansing, which will address almost all their findings. The methodology to revise the useful life of assets is completed and submitted to Internal Audit for review.	Copy of the quarterly AG Action Plan status report	Not Achieved	

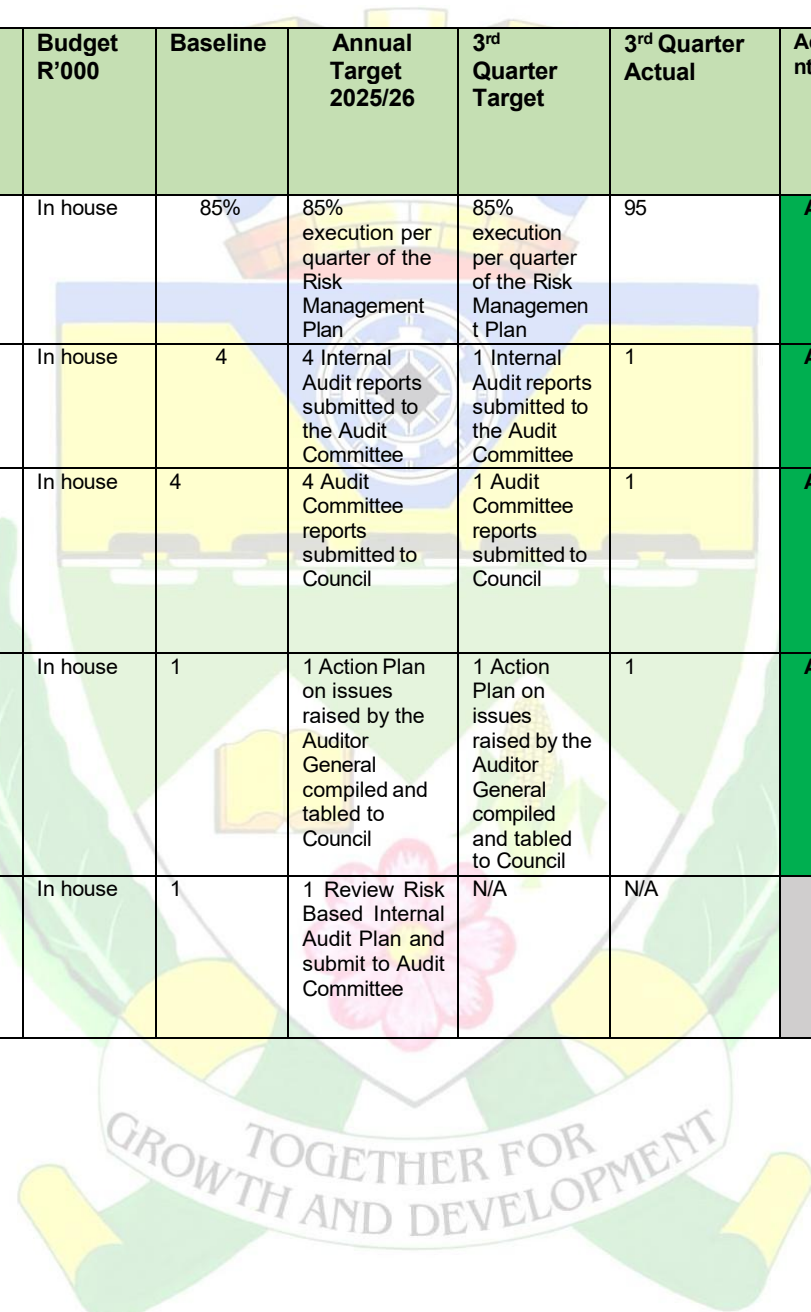
Strategic Thrust	Programme	KPI	IDP Link	Resp. MM/ED	SDBIP Ref No	Budget R'000	Baseline	Annual Target 2025/26	3 rd Quarter Target	3 rd Quarter Actual	Achievement	Challenges	Corrective Action	POE	IA Comments
		Draft Consolidated Annual Report submitted to AG on or before the 31 Aug 2025	Mf15-2022	MM	4.5	In house	1	1 Draft Annual Report compiled and submitted to the office of the Auditor General	N/A	N/A	N/A	N/A	N/A	Copy of Annual Report and proof of submission to AG	N/A
		Number of Ward operational plans submitted to Council by 30 September 2025	Pa24-2022	MM	4.6	1 000	0	9 Ward operational plans submitted to Council	N/A	N/A	N/A	N/A	N/A	N/A	Copy of annual Ward operational reports submitted to Council and Council Resolution
Accountability	Community Participation	Number of Quarterly Ward Committee Functionality reports submitted to Council.	Pa22-2022	MM	4.7	In house	0	4 Ward Committee Functionality reports submitted to Council	1 Ward Committee Functionality Report submitted to Council	1	Achieved	None	None	Copies of quarterly ward committee Functionality reports submitted to Council and Council Resolution.	Achieved
		Number of Quarterly Community outreach meetings facilitated and attended	Pa21-2022	MM	4.8	320	2	4 Community outreach meetings facilitated and attended	1 Community outreach meeting facilitated and attended	1	Achieved	None	None	Copy of the quarterly outreach report, inclusive of the attendance register	Achieved
Good Governance	Good Governance	Submission of final audited consolidated Annual Report to Council by the 31 Jan 2026	Mf15-2022	MM	4.9	In house	1	1 Annual report tabled before council	1 Annual report tabled before council	1	Achieved	N/A	N/A	Copy of Final Annual Report and Council Resolution.	Achieved
		Submission of Oversight Report to Council by the 31 March 2026		MM	4.1.0	In house	1	1 Oversight report submitted to Council	1 Oversight report submitted to Council	1	Achieved	None	None	Annual Oversight Report and Council Resolution.	

Strategic Thrust	Programme	KPI	IDP Link	Resp. MM/ED	SDBIP Ref No	Budget R'000	Baseline	Annual Target 2025/26	3 rd Quarter Target	3 rd Quarter Actual	Achievement	Challenges	Corrective Action	POE	IA Comments
Good Governance	Good Governance	2026/27 IDP Review Process Plan approved by Council by 31 Aug 2025	Mf20-2022	MM	4.1.1	In house	1	1 IDP process plan developed and approved by Council	N/A	N/A	N/A	N/A	N/A	Copy of approved IDP review Process Plan and Council Resolution.	N/A
		Final 2025/2026 IDP tabled and approved by Council by 31 May 2026	Mf20-2022	MM	4.1.2	In house	1	1 Final IDP tabled and approved by Council.	N/A	N/A	N/A	N/A	N/A	Copy of Final IDP and Council resolution	N/A
		Number of new/reviewed policies, strategies and By-Laws approved by Council by 30 June 2026 (OMM)	Pa37-2022	MM	4.1.3	In house	10	10 new/reviewed policies, strategies and By-Laws approved by Council	N/A	N/A	N/A	N/A	N/A	Council Resolution of all approved policies, strategies and By-Laws.	N/A
		Number of monthly Section 80 Committee meetings co-ordinated as per the approved Calendar of Events	Pa33-2022	ED:CS	4.1.4	In house	30	33 monthly Section 80 Committee meetings co-ordinated	9 monthly Section 80 Committee meetings co-ordinated	(9) 9 monthly Section 80 Committee meetings co-ordinated	Achieved	None.	None.	Copies of signed Section 80 Committee agendas	Achieved
		Final SDBIP approved by Executive Mayor within 28 days after approval of Budget	Pa32-2022	MM	4.1.5	In house	1	1 Final SDBIP approved by Executive Mayor	N/A	N/A	N/A	N/A	N/A	Copy of Final approved SDBIP and Acknowledgement letter by the Mayor	N/A
		Adjusted Budget and SDBIP approved by Council by the end of February 2026	Pa32-2022	MM	4.1.6	In house	1	1 Adjusted Budget and SDBIP approved by Council	1 Adjusted Budget and SDBIP approved by Council	1	Achieved	None	None	Copy of Adjustment Budget, SDBIP, and Council Resolution	Achieved

Strategic Thrust	Programme	KPI	IDP Link	Resp. MM/ED	SDBIP Ref No	Budget R'000	Baseline	Annual Target 2025/26	3 rd Quarter Target	3 rd Quarter Actual	Achievement	Challenges	Corrective Action	POE	IA Comments
Good Governance	Good Governance	% of Council meetings resolutions resolved per quarter (Total organisation)		MM	4.1.7	In house	54%	100% Council meeting resolutions resolved	100% Council meeting resolutions resolved	54%	Not Achieved	The resolutions not achieved are interlinked between different departments. Other resolutions are reliant on external stakeholders.	The responsible departments will ensure that the resolutions not implemented will be implemented by the end of the financial year.	Copy of the quarterly status report of Council resolutions resolved	Not Achieved
		Number of monthly Ordinary Council meeting co-ordinated as per the approved Calendar of Events	Pa35-2022	ED:CS	4.1.8	In house	9	11 Ordinary Council meetings co-ordinated	3 Ordinary Council meetings co-ordinated	3	Achieved	None	None	Copy of signed Council agendas and attendance register	Achieved
		Number of monthly ordinary MAYCO meetings co-ordinated per the approved Calendar of Events	Pa34-2022	ED:CS	4.1.9	In house	10	11 Ordinary MAYCO meetings co-ordinated	3 Ordinary MAYCO meetings co-ordinated	3	Achieved	None	None	Copy of signed Mayoral Committee agendas and attendance registers.	Achieved
		Number of quarterly Compliance Monitoring Reports submitted to RAMAFACC	Pa38-2021	MM	4.2.0	In House	New	4 Quarterly Compliance Monitoring Reports submitted to RAMAFACC	1 Quarterly Compliance Monitoring Report submitted to RAMAFACC	1	Achieved	None	None	Copy of quarterly Compliance Monitoring Report and Proof of submission to RAMAFACC	Achieved
		Number of MPAC committee reports submitted to Council per quarter	Pa29-2022	MM	4.2.1	In house	2	4 MPAC committee reports submitted to Council	1 MPAC committee reports submitted to Council	1	Achieved	None	None	Copy of MPAC Report and Council Resolution.	Achieved

Strategic Thrust	Programme	KPI	IDP Link	Resp. MM/ED	SDBIP Ref No	Budget R'000	Baseline	Annual Target 2025/26	3 rd Quarter Target	3 rd Quarter Actual	Achievement	Challenges	Corrective Action	POE	IA Comments
Good Governance	Risk Management	Draft 2026/27 IDP tabled before Council for adoption by 31 March 2026	Mf20-2022	MM	4.2.2	In house	1	1 Draft 2026/27 IDP tabled before Council for adoption	1 Draft 2026/27 IDP tabled before Council for adoption	1	Achieved	None	None	Copy of the Draft 2025/26 IDP and Council Resolution	Achieved
		% execution per quarter of Risk Management Plan in line with detailed time schedule (OMM)	Pa17-2022	MM	4.2.3	In house	85%	85% execution per quarter of Risk Management Plan	85% execution per quarter of Risk Management Plan	93%	Achieved	None	None	Copy of the Risk Monitoring Report	Achieved
		% execution per quarter of Risk Management Plan in line with detailed time schedule (Finance only)	Pa17-2022	CFO	4.2.4	In house	93%	85% execution per quarter of Risk Management Plan	85% execution per quarter of Risk Management Plan	93%	Achieved	None	None	Copy of the Risk Monitoring Report	Achieved
		% execution per quarter of Risk Management Plan in line with detailed time schedule (SS only)		ED: SS	4.2.5	In house	8%	85% execution per quarter of Risk Management Plan	85% execution per quarter of Risk Management Plan	97%	Achieved	None	None	Copy of the Risk Monitoring Report	Achieved
		% execution per quarter of Risk Management Plan in line with detailed time schedule by (TS)		ED: TS	4.2.6	In house	89%	85% execution per quarter of Risk Management Plan	85% execution per quarter of Risk Management Plan	88%	Achieved	None	None	Copy of the Risk Monitoring Report	Achieved
		Number of Risk Management reports submitted to the Risk Management Committee per quarter		MM	4.2.7	In house	4	4 Risk Management reports submitted to the Risk Management Committee	1 Risk Management reports submitted to the Risk Management Committee	1	Achieved	None	None	Copy of quarterly Risk Management Committee report	Achieved
		Number of Risk Management Committee reports submitted to the Audit Committee per quarter	Pa04-2022	MM	4.2.8	In house	4	4 Risk Management Committee reports submitted to the Audit Committee	1 Risk Management Committee reports submitted to the Audit Committee	1	Achieved	None	None	Copies of Risk Management Committee reports	Achieved

Strategic Thrust	Programme	KPI	IDP Link	Resp. MM/ED	SDBIP Ref No	Budget R'000	Baseline	Annual Target 2025/26	3 rd Quarter Target	3 rd Quarter Actual	Achievement	Challenges	Corrective Action	POE	IA Comments
Good Governance		% execution per quarter of the Risk Management Plan in line with the detailed time schedule (CS only)	Pa17-2022	ED: CS	4.2.9	In house	85%	85% execution per quarter of the Risk Management Plan	85% execution per quarter of the Risk Management Plan	95	Achieved	None	None	Copy of the Risk Monitoring Report	Achieved
		Number of Internal Audit reports submitted to the Audit Committee per quarter	Pa10-2022	MM	4.3.0	In house	4	4 Internal Audit reports submitted to the Audit Committee	1 Internal Audit reports submitted to the Audit Committee	1	Achieved	None	None	Copy of the quarterly IA progress report	Achieved
	Internal Audit	Number of Audit Committee reports submitted to Council per quarter	Pa10-2022	MM	4.3.1	In house	4	4 Audit Committee reports submitted to Council	1 Audit Committee reports submitted to Council	1	Achieved	None	None	Copy of quarterly AC report submitted to Council and Council Resolution	Achieved
	Good Governance	Action Plan on issues raised by the Auditor General compiled and tabled to Council by 31 January 2026	Pa08-2022	CFO	4.3.2	In house	1	1 Action Plan on issues raised by the Auditor General compiled and tabled to Council	1 Action Plan on issues raised by the Auditor General compiled and tabled to Council	1	Achieved	None	None	Copy of approved Action Plan and Council Resolution.	Achieved
	Internal Audit	Review Risk Based Internal Audit Plan and submit to Audit Committee by 31 Aug. 2025	Pa08-2022	MM	4.3.3	In house	1	1 Review Risk Based Internal Audit Plan and submit to Audit Committee	N/A	N/A	N/A	N/A	N/A	Reviewed Risk Based Internal Audit Plan submitted to Audit Committee	N/A



Strategic Thrust	Programme	KPI	IDP Link	Resp. MM/ED	SDBIP Ref No	Budget R'000	Baseline	Annual Target 2025/26	3 rd Quarter Target	3 rd Quarter Actual	Achievement	Challenges	Corrective Action	POE	IA Comments
Customer Relationship Management	Customer/ Stakeholder Relationship Management	Number of quarterly Customer Complaint reports submitted to Council (inclusive of Presidential Hotline)	Pa39-2022	MM	4.3.4	In house	3	1 Customer Complaint reports submitted to Council	1 Customer Complaint reports submitted to Council	0	Not Achieved	Council resolved that the report must have a column that states the closure of all Complaints.	MunComp, together with the IT department, will assist Customer Care with the necessary resources to generate a complete report (provision of the printing that has the scanner and to update the system. The technical department must make sure that the daily job cards are sent back to customer care timeously so that the complaints can be closed.	Copy of quarterly Customer Complaint reports and Council Resolution	Achieved
Good Governance	Good Governance	% of Internal Audit Findings resolved per quarter as per the Audit Plan (Total Organization)	Pa10-2022	MM	4.3.5	In house	25%	100% Internal Audit Findings resolved as per the Audit Plan	100% Internal Audit Findings resolved as per the Audit Plan	39%	Not Achieved	Targets not fully achieved within the period due to resource constraints and prioritization of high-risk areas.	Continue monitoring progress, provide additional support and guidance, and ensure completion by the next review period.	Copy of the quarterly internal audit report	Not Achieved

Strategic Thrust	Programme	KPI	IDP Link	Resp. MM/ED	SDBIP Ref No	Budget R'000	Baseline	Annual Target 2025/26	3 rd Quarter Target	3 rd Quarter Actual	Achievement	Challenges	Corrective Action	POE	IA Comments
Good Governance	Good Governance	Number of new/reviewed policies, strategies and By-Laws approved by Council by 30 June 2026 (B&T only)	Pa37-2022	CFO	4.3.6	In house	19	19 new/reviewed policies, strategies and By-Laws approved by Council	N/A	N/A	N/A	N/A	N/A	Council Resolution of all approved policies, strategies and By-Laws.	N/A
		Number of new/reviewed policies and strategies approved by Council by 30 June 2026 (CS only)	Pa37-2022	ED:CS	4.3.7	In house	3	05 new/reviewed policies and strategies approved by Council	N/A	N/A	N/A	N/A	N/A	Council Resolution of all approved policies and strategies	N/A
		Number of new/reviewed policies, strategies and By-Laws approved by Council by 30 June 2026 (SS only)	Pa37-2022	ED:SS	4.3.8	In House	0	5 Number of new/reviewed policies, strategies and By-Laws approved by Council	N/A	N/A	N/A	N/A	N/A	Council Resolution of all approved policies, strategies and By-Laws.	N/A
		Number of new/reviewed policies, strategies and By-Laws approved by Council by 30 June 2026 (TS only)	Pa37-2022	ED:TS	4.3.9	In house	New	1 new/reviewed policies, strategies and By-Laws approved by Council	N/A	N/A	N/A	N/A	N/A	Council Resolution of all approved policies, strategies and By-Laws.	N/A
	Youth Development	Review and Adoption of the Youth Development Strategy by 31 Dec. 2025	Yd32-2022	ED:SS	4.4.0	In-House	New	1 Youth Development Strategy reviewed and adopted	N/A	N/A	N/A	N/A	N/A	Copy of the reviewed and adopted Youth Development Strategy and the Council Resolution	N/A

Strategic Thrust	Programme	KPI	IDP Link	Resp. MM/ED	SDBIP Ref No	Budget R'000	Baseline	Annual Target 2025/26	3 rd Quarter Target	3 rd Quarter Actual	Achievement	Challenges	Corrective Action	POE	IA Comments
Customer Relationship Management	Improved Compliance to Legislation &	Number of Municipal firearms inspections conducted per month	Tp03-2022	ED:SS	4.4.1	In house	12	12 Municipal firearms inspections conducted	3 Municipal firearms inspections conducted	3	Achieved	None	None required	Copies of firearms inspections forms	Achieved
		Number of Cemeteries Management Forum Meetings Scheduled & held per quarter	Cs01-2022	ED:SS	4.4.2	In house	4	4 Cemeteries Management Forum Meetings Scheduled & held	1 Cemeteries Management Forum Meetings Scheduled & held	1	Achieved	Not applicable	Not applicable	Copy of the close-out report for each forum meeting, inclusive of Attendance Registers	Achieved
	Customer/Stakeholder Relationship Management	Number of Customer satisfaction surveys conducted by 30 June 2026	Pa20-2022	MM	4.4.3	In house	0	1 Customer Satisfaction survey conducted	N/A	N/A	N/A	N/A	N/A	Report on Customer Satisfaction Survey submitted to the MM	N/A
		Number of monthly updates of the Municipal social media accounts		MM	4.4.4	In house	100%	12 monthly updates of the Municipal social media accounts	3 monthly updates of the Municipal social media accounts	3	Achieved	None	None	Copy of dated screenshots of social media accounts updates.	Achieved
		Number of quarterly newsletter(s) published		ED:CS	4.4.5	600	2	4 newsletter(s) published	1 newsletter(s) published	1	Achieved	None	None	Copy of quarterly newsletter(s) published.	Achieved

Strategic Thrust	Programme	KPI	IDP Link	Resp. MM/ED	SDBIP Ref No	Budget R'000	Baseline	Annual Target 2025/26	3 rd Quarter Target	3 rd Quarter Actual	Achievement	Challenges	Corrective Action	POE	IA Comments
		Number of radio slots secured for the Executive Mayor per quarter	Pa18-	ED:CS	4.4.6	200	4	4 radio slots secured for the Executive Mayor	1 radio slot secured for the Executive Mayor	0	Not Achieved	Reached an agreement with the GCIS to secure weekly slots in the fourth quarter with three community radio stations (KCRS, Emalahleni and RISE fm), the one radio station did not comply during the third quarter hence there was no slot provided.	Reached an agreement with the GCIS to secure weekly slots in the fourth quarter with three community radio stations (KCRS, Emalahleni and RISE fm). RISE FM came up with a proposal regarding the radio slots, following an engagement with the Communications unit. The proposal will still have to be considered, as it will be at the cost of the municipality.	Copy of confirmation from the radio station	Not Achieved

Strategic Thrust	Programme	KPI	IDP Link	Resp. MM/ED	SDBIP Ref No	Budget R'000	Baseline	Annual Target 2025/26	3 rd Quarter Target	3 rd Quarter Actual	Achievement	Challenges	Corrective Action	POE	IA Comments
		Number of legislated notices approved by the MM and published per quarter	2022	ED:CS	4.4.7	500	5	5 legislated notices approved by the MM and published	3 legislated notices approved by the MM and published	3	Achieved	None	None	Copy of approved notices published	Achieved
		Number of monthly updates of the Municipal Website as per Section 75 of the MFMA.		MM	4.4.8	In house	98%	12 monthly updates of the Municipal Website as per Section 75 of the MFMA	4 monthly updates of the Municipal Website as per Section 75 of the MFMA	4	Achieved	None.	None.	Dated Municipal Website screenshots.	Achieved
Good Governance	Strategic Planning	Strategic Planning Lekgotla report Submitted to Council by 31 March 2026	Mf20-2022	MM	4.4.9	In house	1	1 Strategic Planning Lekgotla report Submitted to Council	1 Strategic Planning Lekgotla report Submitted to Council	1	Achieved	None	None	Close-out report, attendance register, and Council Resolution	Achieved
	Security Services	Number of quarterly status reports on monitoring of Municipal security services submitted to the Municipal Manager per quarter	Tp03-2022	ED:SS	4.5.0	In house	4	4 status reports on the monitoring of Municipal security services submitted to the Municipal Manager	1 status report on the monitoring of Municipal security services submitted to the Municipal Manager	1	Achieved	None	None	Quarterly Security Reports and Acknowledgement of receipt by MM	Achieved,
	All Services	Number of service delivery reports compiled and submitted to the MM per quarter	As01-2022	MM	4.5.1	In house	4	4 service delivery reports compiled and submitted to the MM	1 service delivery reports compiled and submitted to the MM	1	Achieved	None	None	Copy of signed service delivery reports	Achieved



KEY PERFORMANCE AREA 5: Spatial Rationale

The overall score for this KPA is **86%** for the quarter under review.

KPI Status	KPA 5: Spatial Rationale
Target Met (as planned and exceeded)	6
Target Not Met (below planned)	1
Total	7
% Targets met	86%
% Targets not met	14%

Performance Highlights for 2025/26 Quarter (3)

Challenges	Measures taken to improve performance
Number of property inspections conducted per quarter in terms of compliance to the Land scheme and Building Regulations	
A vacant critical building inspector vacancy and an uncoordinated inspection schedule	Increase inspections during favourable weather periods build flexibility into inspection schedules

KPA 5: SPATIAL DEVELOPMENT

Strategic Goal 5: Increase regularisation of built environment

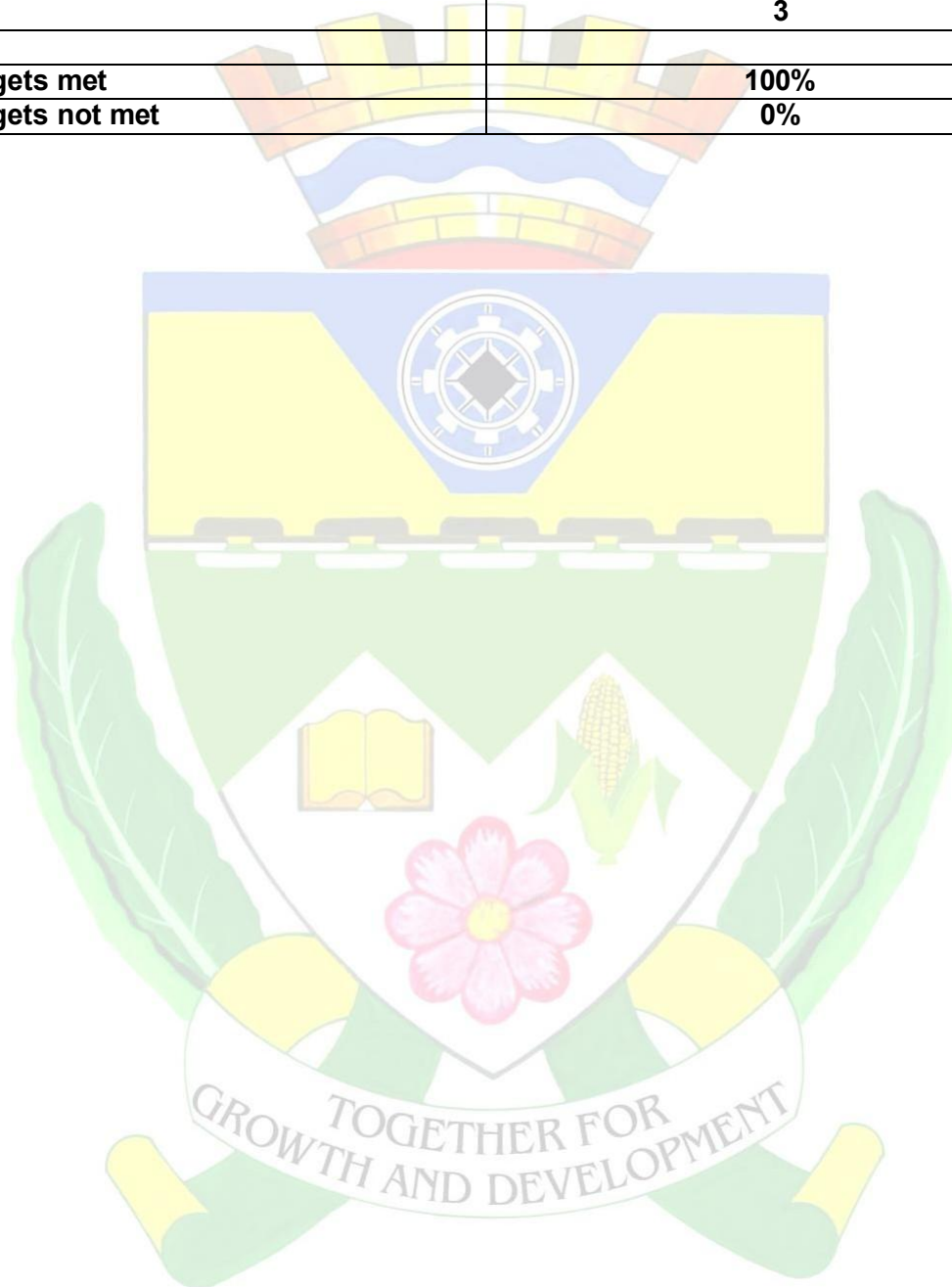
Strategic Thrust	Programme	KPI	IDP Link	Resp. MM/ED	SDBIP Ref No	Budget R'000	Baseline	Annual Target 2025/26	3 rd Quarter Target	3 rd Quarter Actual	Achievement	Challenges	Corrective Action	POE	IA Comments
Land Tenure and Spatial Development		% of new registered building plan applications received and approved (referred back) within agreed timeframes of 28 days.	Sd07-2022	MM	5.1	In house	100%	100% new registered building plan applications received and approved (referred back)	100% new registered building plan applications received and approved (referred back)	100%	Achieved	None	None	Copy of application Register	Achieved
	Land Tenure and Spatial Development	% of (category 2) land use applications received and processed within 90 days by authorised officer	Sd06-2022	MM	5.2	In house	100%	100% (category 2) land use applications received and processed	100% (category 2) land use applications received and processed	100%	Achieved	None	None	Copy of the land use applications report and register	Achieved
		% of (category 1) land use applications received and referred to Nkangala District Tribunal within 90 days from VKLM	Sd06-2022	MM	5.3	In house	100%	100% (category 1) land use applications received and referred to Nkangala District Tribunal	100% (category 1) land use applications received and referred to Nkangala District Tribunal	100%	Achieved	None	None	The list of registered applications received and referred to NDM (Land tribunal)	Achieved
	Building Control	Number of quarterly reports on building contraventions notices issued submitted to the MM	Sd06-2022	MM	5.4	In house	100%	4 Quarterly Reports on building contraventions notices issued submitted to the MM	1 Quarterly Report on building contraventions notices issued submitted to the MM	1	Achieved	None	None	Copy of quarterly reports submitted and signed by the MM.	Achieved
		Number of property inspections conducted per quarter in terms of compliance to the Land scheme and Building Regulations		MM	5.5.	In house	New	720 property inspections conducted in terms of compliance to the Land scheme and Building Regulations	180 property inspections conducted in terms of compliance to the Land scheme and Building Regulations	38	Not Achieved	Vacant critical building inspector vacancy and uncoordinated inspection schedule	Increase inspections during favourable weather periods build flexibility into inspection schedules	Close-out report with signed inspection forms	Not Achieved

Strategic Thrust	Programme	KPI	IDP Link	Resp. MM/ED	SDBIP Ref No	Budget R'000	Baseline	Annual Target 2025/26	3 rd Quarter Target	3 rd Quarter Actual	Achievement	Challenges	Corrective Action	POE	IA Comments
	Land Audit	Progress report on the development of the Land Audit submitted to the MM by 30 June 2026	Sd06-2022	MM	5.6	In house	New	2 progress reports on the development of the Land Audit submitted to the MM	N/A	N/A	N/A	N/A	N/A	Copy of progress reports on the development of the land audit signed by the MM.	N/A
Land Tenure and Spatial Development	Land Audit	Number of quarterly reports on cases of Land Invasion reported and resolved submitted to the MM	Sd09-2022	MM	5.7.	In house	New	4 Quarterly Reports on cases of Land Invasion reported and resolved, submitted to the MM	1 Quarterly Report on cases of Land Invasion reported and resolved submitted to the MM	1	Achieved	None	None	Land invasion reports submitted and signed by the MM	Achieved
		Number of Quarterly reports on Land Contraventions notices issued and submitted to the MM by 30 June 2026		MM	5.8.	In house	New	4 Quarterly reports on Land Contraventions notices issued and submitted to the MM	1 Quarterly report on Land Contraventions notices issued, submitted to the MM	1	Achieved	None	None	Copy of the quarterly report of building contravention notices issued, signed by the MM.	Achieved

KEY PERFORMANCE AREA 6: Local Economic Development

The overall score for this KPA is **100%** for the quarter under review.

KPI Status	KPA 6: Local Economic Development
Target Met (as planned and exceeded)	3
Target Not Met (below planned)	0
Total	3
% Targets met	100%
% Targets not met	0%



KPA 6: LOCAL ECONOMIC DEVELOPMENT

Strategic Goal 6: Increased economic activity and job creation

Strategic Thrust	Programme	KPI	IDP Link	Resp. MM/ED	SDBIP Ref No	Budget R'000	Baseline	Annual Target 2025/26	3 rd Quarter Target	3 rd Quarter Actual	Achievement	Challenges	Corrective Action	POE	IA Comments
Economic Growth and Development	Economic Growth and Development	Number of MOU's signed and implemented with respect to external Social Responsibility Programmes by 30 June 2026	Led03 -	MM	6.1	house	2	2 MOU's signed and implemented with respect to external Social Responsibility Programmes	N/A	N/A	N/A	N/A	N/A	Copy of Close-out Report submitted to the MM and Signed MOU	N/A
		Number of bi-annual reports submitted to Council with respect to CSI and SLP Programme of both Business and Mining organisations by 30 June 2026	2022	MM	6.2	In house	5	2 CSI and SLP Programme of both Business and Mining organisations Report submitted to Council	N/A	N/A	N/A	N/A	N/A	Copies of bi-annual reports submitted to Council	N/A
		Number of total work opportunities created through programmes by 30 June 2026 (GKPI).	Led09 -2022	ED:TS	6.3	In house	15	55 work opportunities created through the labour-intensive programme (GKPI).	20 work opportunities created through the labour-intensive programme (GKPI).	20	Achieved	None	None	Job opportunity report	Achieved
	Economic Growth and Development	Number of skills development initiatives scheduled and held in terms of the youth bi-annually	Led35 -2022	ED:SS	6.4	400	2	2 skills development initiatives held for the youth	1 skill development initiatives held for the youth	1	Achieved	None	None	Copy of the close-out report inclusive pictures, and the Attendance Register.	Achieved
		Number of SMME's and Cooperatives capacity building skills workshops held by the 30 June 2026	Led10 -2022	MM	6.5	200	5	2 SMME's and Cooperatives skills workshop held	N/A	N/A	N/A	N/A	N/A	Copy of close-out reports inclusive of Attendance Register.	N/A
		Number of work opportunities created through the implementation of EPWP by 30 June 2026	Led09 -2022	MM	6.6	1 900	New	00 Work opportunities created through the implementation of EPWP	N/A	N/A	N/A	N/A	N/A	Front page of the contract and copy of ID document	N/A

Strategic Thrust	Programme	KPI	IDP Link	Resp. MM/ED	SDBIP Ref No	Budget R'000	Baseline	Annual Target 2025/26	3 rd Quarter Target	3 rd Quarter Actual	Achievement	Challenges	Corrective Action	POE	IA Comments
Economic Growth and Development	Business Licensing	Number of new investments attracted into the local economy by 30 June 2025.	Led09-2022	MM	6.7	In house	New	2 Direct/Non-direct Investments attracted into the local economy	N/A	N/A	N/A	N/A	N/A	Copy of a close-out report for each investment attracted	N/A
		Number of quarterly business compliance inspections conducted	Led03 – 2022	MM	6.12	In house	New	40 quarterly business compliance inspections conducted	10 quarterly business compliance inspections conducted	10	Achieved	None	N/A	Close-out report with signed inspection forms	Achieved



I, Tswaledi Macdonald Mashabela the Municipal Manager of the Victor Khanye Local Municipality, hereby certify that the Quarter 3 Performance Report and supporting documentation for the period October 2025 to December 2025 has been prepared in accordance with the Municipal Finance Management Act and the regulations made under the Act.

SIGNED BY THE MUNICIPAL MANAGER: MR TM MASHABELA

Signed by:

47C48485FBC745E...
SIGNATURE

5/21/2026
DATE

