



VICTOR KHANYE

LOCAL MUNICIPALITY – PLAASLIKE MUNISIPALITEIT - MASIPALA

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OFFICE OF THE MM

SPATIAL PLANNING & LAND USE MANAGEMENT

SUPPORTING AFFIDAVIT WITH REGARD TO PROOF AS REQUIRED IN TERMS OF SECTION 86 OF THE SPATIAL PLANNING AND LAND USE MANAGEMENT BY-LAWS 2015

I/We _____
(Full name/s and Surname)

Registered owner/s of: _____
(Description of Property / Land)

Hereby declare that:

1. All development charges due on the property / land have been paid;
2. All contravention penalties have been paid and I / We have complied with all directives issued with regard to compliance in terms of the SPLUMA By-Laws 2015;
3. I / We, understand the requirements of Section 26 of the Spatial Planning and Land Use Management Act, Act 16 of 2013, read with the Victor Khanye Local Municipality SPLUMA By-Laws, 2015, and applicable Delmas Town Planning Scheme 2007, with regard to the permitted land use rights of the property / land and buildings constructed on the property / land;
4. The land use rights as determined by Delmas Town Planning Scheme 2007 and the buildings constructed and utilized on the property / land complies with said Town Planning Scheme 2007 and National Building Regulations and Standard Act, Act 103 of 1977.

Signature/s

Date

OATH / AFFIRMATION

I, certify that before administering the oath OR affirmation, I asked the deponent the following questions and wrote the answers supplied by him / her, in his / her presence:

Do you:

1. Understand the contents of the declaration? **ANSWER** _____
2. Have any objections in taking the prescribed oath or affirmation? **ANSWER** _____
3. Consider the prescribed oath or affirmation to be binding on your conscience? **ANSWER** _____

I, hereby certify that the deponent has acknowledged that he / she knows and understands the contents of the declaration. The deponent utters the following words: "I swear that the contents of this declaration or affirmation are true"

Commissioner of Oath / Transferring Attorney

Full names and Surname: _____
(Block letters)

Designated Rank: _____ (Ex Officio of SA)

Domicilium Citandi Et Executandi _____

Date: _____

Place: _____

OFFICIAL STAMP OF COMMISSIONER OF OATH: