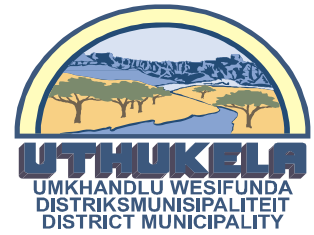


# CREDIT APPLICATION FOR MUNICIPAL SERVICES

## OWNERS ONLY



Service Required	Type of Application
<input type="checkbox"/> New Connection	<input type="checkbox"/> Conventional <input type="checkbox"/> Pre-paid

Particulars of Applicant	
Surname/Business Name	
Full Names of Responsible Person	Initials
ID Number of Applicant/Company Reg.	
Vehicle Registration Number	
Marital Status	In Community      Out of Community      Traditional      Other
Telephone Number (Home)/Business	
Fax Number (Home)/Business	
Cellphone Number	
E-mail	
Vat Registration Number	

Address of Applicant (for purpose of account delivery)/Business	
Physical Address	
Postal Address	

Employer's Details	
Name	Occupation
Physical Address	Telephone No.
	Period in Service (Yrs)
	Telephone No.

Property to which services must be rendered	
Suburb	
Zone	
Stand Number	
Street Name	
Street Name	

Type of Municipal Services	
Type of service	Bulk      Fire Hydrant
	Domestic      Residential
	Borehole      Standpipe

Next of Kin (not living with you)	
Name	Telephone Number
Address	Cellphone Number

FOR OFFICE USE ONLY	
Account number	Suburb
Erf Number	Erf SubDivison

I / We hereby -

- a. Apply for the provision of Municipal services to be provided to the above property;
- b. Accept the conditions applicable to the provision of municipal services as set out in the Municipality's policies, by-laws and the conditions of Supply of any service provider of the Municipality;
- c. Declare that I was informed that the documents referred to in (b) are available for inspection at the offices of the Municipality during office hours;
- d. Declare that this application form and the implications thereof was explained to me;
- e. Declare that all payments that are due and payable by me in pursuance of this application shall promptly be paid by me on the due date;
- f. Declare that the information provided in this application form is true and correct;
- g. Accept that the Municipality may, from time to time, determine different deposits for different categories of customers, users of services and service standards, and undertake to make such payments;
- h. Undertake to pay the municipal account on or by the date as stipulated on the account/invoice;
- i. Accept Council's decision as part of the Credit Control and Debt Collection Policy: That agreements for the supply of services and rates will only be concluded with registered owners as a consolidated account; and
- j. Accept that my account will only be considered being paid if a valid receipt reflects on my account.

**Consent**

The Applicant hereby acknowledges and agrees that the Uthukela District Municipality may, subject to legislative requirements as stipulated in the National Credit Act (NCA) and its Regulations, perform a credit search on the Applicant with one or more of the registered Credit Bureaus in order to assess the Applicant's credit worthiness in terms of this application; to monitor the Applicant's payment behaviour by researching his/her records at one or more of the Credit Bureaus; use new information obtained from Credit Bureaus, to assess the Applicant's credit worthiness in terms of future applications or requests to increase an existing credit facility; to record the existence of the Applicant's account with Credit Bureaus; record and transmit details of how the Applicant has performed, and how the account is conducted by the Applicant in adhering to his/her obligations. The applicant will, as stipulated in the NCA, have the right to contact the Credit Bureaus, have the credit record disclosed and challenge inaccurate information.

I \_\_\_\_\_ the undersigned in my capacity as owner of (Physical Address)

\_\_\_\_\_ do hereby declare that the information recorded in this application form is correct.

Signed at \_\_\_\_\_ on this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_

**Owner's signature:** \_\_\_\_\_

**CERTIFICATION BY MUNICIPALITY**

The consequences of the above declaration made by the applicant were explained to him/her and he/she indicated that the contents of the application have been understood.

\_\_\_\_\_  
Accounts Admin. Official

\_\_\_\_\_  
Date

\_\_\_\_\_  
Accountant Income

\_\_\_\_\_  
Date

\_\_\_\_\_  
CFO/Revenue Manager

\_\_\_\_\_  
Date

**FOR OFFICE USE ONLY**

Amounts paid	Deposit	
	New Connection fee	
	Date	
Account Number		
Commencement Date of Services		
Water	Meter No. 1	Reading
	Meter No. 2	Reading
	Meter No. 3	Reading

The following documents must be attached to this application form:

1. A certified copy of the applicant's identity document or power of attorney.
2. Latest salary advice and proof of income/Proof of company Registration.
3. Three months bank statements.
4. Proof of Ownership (Title Deed / Deed of Sale)