Yes

AFFIDAVIT: PUBLIC BENEFIT ORGANISATION APPLICATION - N

(To be completed in the presence of a Commissioner of Oaths)

	(Full Names and Surname)		an Adult Male / Female , Ag	je
ID No:		residina at	(Delete if not applicable)	
ID No:, residing at				
(Residential Address in Full)				
Hereby state under oath in English, that:				
 I have made application to the Kwa Sani Municipality for relief from the burden of Municipal Property Rate respect of the following property: 				
Erf / Farm no:				
Physical Address:				
 (a) I am the head of the Organisation (b) The Organisation is registered as a Public Benefit Organisation in terms of the Income Tax Act. (c) We conduct welfare and humanitation/health care/educational activities on the aforementioned property. (d) No private pecuniary profit is made from the property; (e) No rent is received for any use of the property. 				
I am familiar with, and understand the contents of this declaration. I have no objection/have objection to taking the prescribed oath. I consider the prescribed oath as binding to my conscience.				
DEPONENT				
(To be signed in the presence of a Justice of the Peace or Commissioner of Oaths)				
2. I certify that before administering the oath/affirmation, I asked the deponent the following questions and wrote down his/her answers in his/her presence.				
(a) Do you know and understand the contents of the declaration? O Yes O No				
(b) Do you have any objection to taking the prescribed oath? O Yes O No				
(c) Do you consider the prescribed oath to be binding on your conscience? (C) Yes (C) No				
Signed at o		on this	day of	2012
Signature:				
3. I certify that the deponent has acknowledged that he/she knows and understands the contents of this declaration. The deponent utters the following words: "I swear that the contents of this declaration are true so help me God" / "I truly affirm that the contents of the declaration are true." The signature/mark of the deponent is affixed to the declaration in my presence.				
COMMISSIONER OF OATHS / JUSTICE OF THE PEACE				
(To be completed by a Commissioner of Oaths:)				
Full First Name and Surname:			Designation:	
Business P	hysical Address:			
Signed at		on this	_ day of	2012
Signature	:	STAMP		