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**APPLICATION FOR A SENIOR CITIZEN PROPERTY RATES REBATE**

**1 JULY 2023 TO 30 JUNE 2027**

To qualify for a rebate, a senior citizen must meet the following requirements:

* The applicant must be the registered owner of the property
* The applicant must occupy the property as his/her primary residence or where the owner is unable to occupy the property due to no fault of his/her own, the spouse and/or minor children must occupy the property.
* The applicant must be retired and at least 60 years of age.
* If the retired person turns 60 after the 1st of July in any financial year, on submission of an application, the rebate will be granted with effect from the next billing cycle following the date on which the application is received.
* Submit an application for the 2023/24 financial year and thereafter when the age category changes.

**Senior citizens will be categorized into three age groups and a percentage rebate will be applied according to the age category.** **Joint owners in different age groups will receive an average of the two age groups. The three categories are as follows:**

|  |  |  |
| --- | --- | --- |
| **AGE GROUP** | **% REBATE** | **SUPPORTING DOCUMENTS** |
| 60 - 64 YEARS | 40% | Certified ID copy/ies, confirmation that the applicant is retired. |
| 65 – 74 YEARS | 62.5% | Certified ID Copy/ies |
| 75 YEARS UPWARDS | 85% | Certified ID Copy/ies |

**The senior citizens rebate will lapse under the following circumstances:**

* On the death of the applicant
* On the date of transfer of ownership
* When the rating category of the property changes due to change in use.
* On 30 June 2027. **(Applications must be renewed by 30 June 2027)**

**Kindly complete the application form in full and return by hand to any Revenue Management Office or email to** **BathandwaN@buffalocity.gov.za**

RATES RELIEF APPLICATION

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
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**MUNICIPAL ACCOUNT NUMBER:**

|  |  |  |
| --- | --- | --- |
| ERF NO: | PORTION/UNIT NO: | SUBURB: |

|  |  |
| --- | --- |
| **REGISTERED OWNER/S OF PROPERTY (Full names)** |  |
| **IDENTITY NUMBER/S** |  |
| **PHYSICAL ADDRESS** |  |
| **POSTAL ADDRESS** |  |
| **TELEPHONE NUMBER** | **Home:****Cell:** |
| **EMAIL ADDRESS** |  |

……………………………………………… ………………………………………………………….

SIGNATURE OF APPLICANT DATE

COMMISSIONER OF OATH’S STAMP

Thus signed and sworn to before me at:

on this ……………… day of …………………… 20……

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COMMISSIONER OF OATH’S SIGNATURE