



APPEAL FORM

(Section 79 of the Stellenbosch Municipal Land Use Planning By-law)

KINDLY NOTE: Please complete this form using BLOCK letters and ticking the appropriate boxes. Append this form to your letter of appeal which must comply with section 80 (2) of the Stellenbosch Municipal Land Use Planning By-law.

PART A: APPEAL

Are you appealing in terms of section 58 of the said legislation?	Y	N	If Yes, provide facts that prove the failure in Part E.
Are you appealing in terms of section 79 (2) of the said legislation?	Y	N	If Yes, specify in Part E.
Date of decision	DD/MM/YYYY	Date receiving notice of decision	DD/MM/YYYY
Who took the original decision?	√	Authorised employee	√
			Tribunal

PART B: APPELLANT'S DETAILS

First name(s)			
Surname			
Company or legal person's name (if applicable)			
Postal address			Postal Code
Email			
Tel		Fax	Cell

PART C: APPELLANT'S PROPERTY DESCRIPTION *(Property that is affected by proposed development)*

Number(s) of Erf/Erven/Portion(s) or Farm(s), allotment area.	
Physical Address	
Town/City	

PART D: PROPERTY DESCRIPTION OF PROPOSED LAND DEVELOPMENT

Number(s) of Erf/Erven/Portion(s) or Farm(s), allotment area.			
Physical Address			
GPS Coordinates		Town/City	

PART E: APPEAL MOTIVATION AND REASONS*

** Appeal motivation, information and reasons may be attached.*

PART F: APPEAL FEE¹:

Appeal	R
TOTAL APPEAL FEES*	R

*** Appeal fees that are paid to the Municipality are non-refundable and proof of payment of the application fees must accompany the application.**
*** Kindly note that an Appeal Fee is not applicable for Appellants submitting an appeal application against a decision**

BANKING DETAILS

Name: Stellenbosch Municipality
Bank: NEDBANK
Branch no.: 198765
Account no.: 1152271679
SWIFT NEDSZAJJ

Payment reference:
(Erf/Farm number)

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¹ <http://www.stellenbosch.gov.za/documents/idp-budget/2017-2/4873-appendix-3-tariff-book-2017-2018/file>

PART G: ATTACHMENTS AND SUPPORTING INFORMATION AND DOCUMENTATION

Complete the following checklist and attach all the information and documentation relevant to the appeal.

Y	N	Proof of payment of appeal fees (applicant)	Y	N	Proof of serving notice of appeal (applicant)
Y	N	Copy of decision and proof of notification	Y	N	Copy of conditions of approval
Y	N	Motivation and reasons for appeal	Y	N	Other (specify)

SECTION H: DECLARATION

I hereby wish to confirm the following :

1. That the information contained in this appeal form and accompanying documentation is complete and correct.
2. I'm aware that it is an offense in terms of section 86(1)(d) of the said legislation to supply particulars, information or answers knowing the particulars, information or answers to be false, incorrect or misleading or not believing them to be correct.

Appellant's signature: _____ Date: _____

Full name: _____

FOR OFFICE USE ONLY

Date received:

Received by:

Municipal Stamp