RATES REBATE RENEWAL 2025/2026

FINANCE CLUSTER
REVENUE MANAGEMENT UNIT
Florence Mkhize Building
251 Anton Lembede Street
Durban, 4000
080 311 1111
E-Mail: ratesrebates@durban.gov.za
Website: https://www.durban.gov.za
https://correspondence.durban.gov.za/

Date:

Dear Sir/Madam

RE: Identity Number_____ **Rate Number:** _____

In terms of eThekwini Municipality's Rates Policy, the rates rebate that you currently receive is subject to annual review and approval by the Municipality.

In order to continue to receive this rebate for the **2025/2026** financial year, kindly complete and return this form to your nearest Municipal office by no later than **30 April 2025** and ensure that the form is signed in the presence of **the Commissioner of Oaths.**

An **SMS** will be sent to the number below advising you of the status of your application. If this number has changed, please supply the correct number in the space provided. **In addition to the SMS, a message will appear on the next bill after your renewal has been processed advising you on the status.**

Cellular number: _____ **Updated Number if incorrect**: _____

Yours Faithfully

_____
For:
Deputy City Manager – Finance Cluster

RATES REBATE RENEWAL 2025/2026

FINANCE CLUSTER
REVENUE MANAGEMENT UNIT
Florence Mkhize Building
251 Anton Lembede Street
Durban, 4000
080 311 1111
E-Mail: ratesrebates@durban.gov.za
Website: https://www.durban.gov.za
https://correspondence.durban.gov.za/

SECTION A: GENERIC DECLARATION

I/WE acknowledge that the Municipality reserves the right to prosecute anyone who willfully provides false information with the intention to benefit unlawfully from the rebate that is granted.

I/WE agree and aware that incorrect information would affect the consideration of my/our application/rebate renewal and that the Municipality has a right to cancel my/our rebate at any stage.

I/WE acknowledge that I/WE will be liable for any fee the Municipality may charge or any appropriate legal action as a result of incorrect information relied upon on this rebate renewal form.

I/WE undertake to furnish additional documentary proof, if requested.

I/WE consent to the processing of the Information, for all purposes associated with the Application hereby made and/or any other purpose compatible with the purpose for which it was initially provided and/or necessary for the legitimate and justifiable interests of the Municipality. AND

I/WE acknowledge that if I/WE willfully give information which is false in any material respect, I/WE shall be guilty of an offence.

_____ _____

APPLICANT / DEPONENT **DATE**

NB: Senior Citizens Rebate, Child Headed Households, Medical Board and Disability Grantees please complete SECTION B

NB: Bed and Breakfasts, Holiday Accommodations and Back Packers please complete SECTION C

NB: This form must be certified by the Commissioner of Oath in SECTION D

NB: Please attached certified Copy of Identity Document when submitting your Renewal Application.

SECTION B: DECLARATION BY RECIPIENT OF REBATE

I/WE, _____(**Full name**)

the Applicant herein,
Identity Number _____

Do hereby declare under oath that:

The above property is * or isn't* my primary property on which I reside permanently. (*delete, where applicable)

I/WE qualify for the rebate in terms of the **2025/2026** Rates Policy in that there has been no change in circumstances and all information in my/our original application remains true and correct. In the event of changes, I/We undertake to complete a fresh application form, with revised information/documentation, and to submit same together with this Rates Renewal form.

The value of the property does not exceed R2 500 000.00. NB: The Value cap is NOT applicable to Bed & Breakfast, Holiday Accommodations and Back Packers applicants.

FINANCE CLUSTER
REVENUE MANAGEMENT UNIT
Florence Mkhize Building
251 Anton Lembede Street
Durban, 4000
080 311 1111
E-Mail: ratesrebates@durban.gov.za
Website: https://www.durban.gov.za
https://correspondence.durban.gov.za/

RATES REBATE RENEWAL 2025/2026

SECTION C: DECLARATION BY RECIPIENT OF REBATE (Bed &Breakfast; back packers & holiday accommodation)

I/WE _____ (**Full name**), IN MY/OUR CAPACITY AS REGISTERED OWNER OF THE ABOVE PROPERTY* / DULY AUTHORISED REPRESENTATIVE OF THE CORPORATE ENTITY* OR TRUST* BEING THE REGISTERED OWNER OF THE ABOVE PROPERTY (*delete, where applicable)

Identity Number/ Registration Number

_____

Do hereby declare under oath that:

The Property Owner qualifies for the rebate in terms of the **2025/2026** Rates Policy in that there has been no change in circumstances and all information in the original application remains true and correct. In the event of changes, I/We undertake to complete a fresh application form, with revised information/documentation, and to submit same together with this Rates Renewal form.

VERIFICATION/ CERTIFICATION by the Community Tourism Organization (CTO) (to be completed where the property is used as a Bed & Breakfast or Holiday Accommodation)

DECLARATION

I, the undersigned, _____(**Full name**), do hereby declare that the above APPLICANT is a member of the Association and all of the information supplied is to the best of my knowledge, true and correct. Furthermore, the APPLICANT meets all the requirements of the Association.

_____ _____
SIGNATURE **DATE**

_____
CAPACITY

STAMP OF MEMBER ASSOCIATION

SECTION D: CERTIFICATION BY COMMISSIONER OF OATHS

I, _____ (Full names) HEREBY CERTIFY that the Deponent has acknowledged before me that he / she has read, knows and understands the contents of the above declaration, and that in compliance with the regulations contained in Government Notice No. R1258 published on the 21st July 1972 as amended by Notice No. R1648 of the 19th August 1977, the said Deponent signed this declaration before me at _____ **(Place) this** _____ **day of** _____ **2025.**

OFFICIAL STAMP

_____ _____
SIGNATURE **DATE**

FINANCE CLUSTER
REVENUE MANAGEMENT UNIT
Florence Mkhize Building
251 Anton Lembede Street
Durban, 4000
080 311 1111
E-Mail: ratesrebates@durban.gov.za
Website: https://www.durban.gov.za
https://correspondence.durban.gov.za/

RATES REBATE RENEWAL 2025/2026

Below is a list of Customer Care sites that will accept your renewal form and provide you with an Acknowledgment of Receipt as proof of your submission.

Customer Care Sites

REGION	OFFICE	ADRESS
CBD	FLORENCE MKHIZE BUILDING	251 ANTON LEMBEDE STREET
	CHESTERVILLE SIZAKALA	Makhathini road
	WARWICK JUNCTION SEDA	SEDA BUILDING
NORTH	PHOENIX BRANCH OFFICE	145 LONGCROFT DRIVE PHOENIX
	UMHLANGA	327 UMHLANGA ROCKS DRIVE
	VERULAM	151 WICK STREET - MARKET PLAZA
	TONGAAT	325 MAIN ROAD TONGAAT
	KWA MASHU MAIN	Cnr. Malandela Rd and Ntombela Rd
	MIDWAY CROSSING	
	INANDA C	
SOUTH WESTERN	CHATSWORTH BRANCH OFFICE	16 MAIN STREET, TOWNSHIP CENTRE
	SHALLCROSS SIZAKALA	SHALLCROSS CENTRE
SOUTH	UMLAZI MEGA CITY – SIZAKALA	UMLAZI MEGA CITY MALL
	LAMONTVILLE SIZAKALA	MUNICIPAL OFFICE - HULL ROAD
	WINKELSPRUIT	9-11 MAYORS MEWS KINGSBURGH
	CRAIGIEBURN	1 CIVIC STREET, CRAIGIEBURN
	ILLOVU SIZAKALA	6 ESTON RD, R603 ILLOVU CLINIC
	KWA MNYANDU SIZAKALA	Off Mangosuthu Highway
	UMBUMBULU SIZAKALA	P725 Mbumbulu Main Road, Opp. Court
WESTERN	HILLCREST	22-24 DELAMORE ROAD
	HAMMERSDALE WATER	Anderson Road
	MPUMALANGA C	G7 SHEZI RD MPUMALANGA
	PINETOWN CIVIC CENTRE	KINGS ROAD ,PINETOWN
	CLERMONT	CLERMONT SIZAKALA CENTER
	QUEENSBURGH	3 RYCROFT RD, OFF MAIN ROAD, QUEENSBURGH (METRO POLICE)