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## RATES CLEARANCE CERTIFICATE AND CERTIFICATE OF DUES REQUEST **FORM**

| Name of property owner   |
|--|
| Property legal description   |
| Purpose of the use of rates clearance and/ or certificate of dues (tick where applicable)      |
| Registering of Bond Application for subdivision  |
| Transfer of ownership Audit purposes   |
| If required to offer transfer of ownership, please provide the following details of new owner; |
| Name:  |
| Postal address:  |
| Γelephone No.:   |
| Cellphone No:  |
| Email address:   |
| D number:  |
| Name of rates clearance certificate collector:   |
| Date of collection:  |
| Signature:   |
| FOR OFFICE USE ONLY  |
| Date of clearing outstanding rates: Certificate No/Ref.  |
| Date of issue of certificates:   |