

MSUNDUZI MUNICIPALITY BUSINESS STAGE 1 AMNESTY/DISCOUNT/INDIGENT APPLICATION FORM

REFERENCE NUMBER ISSUED

FOR OFFICE USE ONLY

MUNIC ACCOUNT NUMBER

INSTRUCTIONS: 1. B	efore signing the	form, ensure that all are	eas ar	e completed & re	elevant	boxes ticked.	
Customer Details	(Account Hold	er – Duly Authorised	d Cor	npany Membe	r/Trust	ee/Director/C	Company Owner)
Title	Initia	als			Da	te of Birth DA	Y / MONTH/ YEAR
First Name (s)							
Surname							
Gender	Male	Female					
Identification Number	Landlord Tenant Other						
Physical Service	Address – Add	ress where the Amn	nesty	and or Discou	nt is A	pplied for	
Name of Company/Bus	iness/Trust						
Company/Business/ Tr	ust Reg No:						
Unit/Flat/office Number		Floor Number			Ward	l Number	
Block/ Complex Name							
Street Number		Street Name					
Name of Area	me of Area		le F			operty ERF	
Tick this box if the Don	nicilium Postal Add	dress is the same as Ph	ysical	Service Address	above?		
Domicilium (Physical A NOT BE ACCEPTED)	ddress where you agre	ee to accept service of legal o	docume	nts and processes. P	lease No	ote: P.O. Box/Privat	e Bag/Cluster Box address will
Unit/Flat/Office Number		Floor Number		Section		ection Number	
Block/ Complex Name							_
Street Number							
Suburb		Street Name					
Postal Code		Ward Number				Property ERF	
Applicant's Conta	act Details (Refer	rence No. will be sent to	you b	y SMS or Email -	Please	provide email o	or 1 cell-phone number)
Direct Tel Number				Applicant's C	Cell No:		
Business Tel No.				Alternative C	ell No:		
Applicant's E-mail							
Tick a preferred Method of Receiving Ro	eference Number	Cell 1	Cell	2 Email			
PURPOSE OF AP	PLICATION						
AMNESTY DISCOUNT							
Tampered Electricity Meter Electricity is Not Billed Direct Connection Interest Disc						terest Discount	
Tampered/ Different	Tampered/ Different Electricity MCB Unbilled Water Services Bypassed Water Meter Services Discount						rvices Discount
Direct Electricity C	onnection	Signature				Date	//201
Any Other, Specify							