

MSUNDUZI MUNICIPALITY

SUSTAINABLE DEVELOPMENT & CITY ENTERPRISES

Telephone/uCingo: 033 392 2490 Facsimile/iFekisi: 086 770 2951

Private Bag/Isikhwama: X321 Pietermaritzburg/ePietermaritzburg 3201

NOMINATION FORM Tick the appropriate box bellow; Municipal Planning Tribunal **Appeal Advisory Panel** Details of nominator who may be a self-nominee; (must be a natural person) PERSONAL DETAILS Name of Candidate Postal Address Residential Address Tele. number (work) Cell number E-mail address Date of birth Citizenship **ID Number Passport Number** Gender Race **ACCEPTANCE**

Hereby declare that:

(a) I am available to serve on the Msunduzi Municipality's Planning Tribunal or Appeal Advisory Panel.

I,(Full names of Nominee),

- (b) Have no conflict of interest in serving on the Municipal Planning Tribunal or Appeal Advisory Panel.
- (c) I am not disqualified in terms of section 38 of the Spatial Planning and Land Use Management Act, 16 of 2013 to serve on the Municipal Planning Tribunal or Appeal Advisory Panel, and I authorise the Municipality to verify any record in relation to such disqualification or requirement.
- (d) I undertake to sign, commit to and uphold the Code of Conduct applicable to members of the Municipal Planning Tribunal or Appeal Advisory Panel.

| MOTIVATION AND REASON FOR NOMINATING THE NOMINEE | |
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Signature of nominee Date: