APPLICATION FORM: INDIGENTS



SECTION A: DETAILS OF OWNER	NATURALLY PROGRESSIVE
Indicate by making a "X" where applicable:	
Tittle: Initials: Surname:	
Account Number: Owner: yes/no	
PLEASE MARK WITH "X" WHERE APPLICABLE	
NEW APPLICATION	
RE-APPLICATION	
FORM COMPLETED IN FULL AND SIGNED BY APPLICANT	
ID DOCUMENT	
PENSION DOCUMENTS	
PROOF OF MARITAL STATUS	
PROOF OF INCOME	
* Latest payslip (Applicant, spouse, other family members	
* Proof of pension (Applicant, spouse, other family members)	
* Proof of any other income (Interest, maintenance etc.)	
* Sworn statement of any other income (Self employed)	
* Sworn statement of not being employed (Unemployed)	
OTHER IMPORTANT INFORMATION	
REMARKS RECOMMENDATION/ MOTIVATION BY COMMUN	IITY REP OR OFFICER
Name:	Signature:
Portfolio:	Date:
NAME MUNICIPAL OFFICIAL SIGNATURE	DATE
SECTION B : DEMOGRAPHIC INFORMATION	
Indicate by making a "X" where applicable:	
1. Surname:	
2.Name of Applicant:	
2.1 Name of Applicant's Spouse:	

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3. Age of Applicant:						
4. ID - Applicant:						
ID - Applicant's Spouse:						
4.1 Contact Number:						
4.2 Pension Number: Applicant						
5. Marital Status: Single:						
Divorced:						
Widowed:						
Widower:						
Married:						
Customary Marriage:						
6. Name of Registered Owner of Premises:						
6.1 If not owner, relation to owner:						
SECTION C : STAND DETAILS						
Indicate by making a "X" where applicable:						
1. Account Number:						
2. Ward No:						
3. Residential Address:						
4. Stand Number:	_					
5. Do you let part of your dwelling/stand?	Yes No					
6. Electricity						
6.1 Do you have a electricity meter on the stand?	Yes No					
if YES, is it a pre-paid or conventional meter?	Pre-paid Convent					
6.2 Average monthly payment for electricity						
6.3 Have you completed a Service Agreement with Council?	Yes No					
7. Water/Refuse/Sewerage/Assessment Rates	Yes No					
7.1 Do you have a water meter ?						
7.2 Average monthly payment: Water	R					
Refuse	R					
Sewerage	R					
Assessment Rates	R					
7.3 Have you completed a Service Agreement with Council?	Yes No					
SECTION D : FINANCIAL INFORMATION						
Indicate by making a "X" where applicable: Sun	nmary Attached					
	RANDS					
Gross monthly income of <u>all occupants of the pren</u>	nises 0 - 1430					
Attach proof of income	1430 - 2860					
2.1 Details of other Assets /Fixed Properties:	2860 - 3500					
- AND THE REAL PROPERTY AND THE PARTY AND TH						

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	<u>DESCRIPTION</u> :	<u>Value:</u>	
SECT	ION E: EMPLOYMENT INFORMATION		
ndicat	te by making a "X" where applicable:		
1.	Employment		
1.1	Have you ever worked before? Yes No		
1.2	What type of work have you done & Period?		
1.3	If answer to 1.2 is YES, what was the reason for termination of emplo	ovement?	
	·		
1.3.1	Date of termination of last employment?		
1.3.2	Name, Address & Telephone Number of last employer?		
Signa	ture of Applicant:		
4pplic	cation completed by: Name:		
Coun	Signature:		CDW WCW
Coun	CIIIOF		CDW WCM
Other	Authority		Finance
		_	
۸DDI	ICATION APPROVED	NOT APPROVE	D
	on for disapproval:	NOTAFFROVE	
	e applicant does not meet the requirements to be considered as an ind	ligent	
	e application is incomplete and some of the documents could be missir		
2 The	c application is incomplete and some of the documents could be missil	ing.	
	ner:		
3. Oth	ner:Normal Indigent		Data Stamp
3. Oth	tute Indigent Normal Indigent		Date Stamp
3. Oth			Date Stamp

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GROSS INCOMETOTAL SUMMARY					RELATION TO APPLICANT						ECONOMIC STATUS								SOURCE OF INCOME							
R				Self	Spouse	Child Grand Child	Parent	lenant Employment	Self Employment	Part Time Employment	Unemployed	Pensioner	Disabled	Scholar / Student	Pre-School	Formal Employment	Self Employment	Part Time	Pension	Rental	UIF	Contribution - Relatives	Other - Specify			
		Surname	First Nar	ne Age													R			R I			R	R		
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