



a world class African city

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UPDATE NEW CONTACT INFORMATION:
Sectional title property owners

NAME OF BODY CORPORATE: (required)
UNIT/SECTION NO: (required)
EXISTING BODY CORPORATE RATES ACCOUNT NUMBER: (required)
TOWNSHIP AND EXTENSION:
STAND/PORTION NUMBER:

SECTIONAL TITLE OWNER INFORMATION
Personal ownership

SURNAME:
NAME IN FULL (as in ID):
WORK TELEPHONE NUMBER:
HOME TELEPHONE NUMBER:
MOBILE PHONE NUMBER:
EMAIL ADDRESS:

POSTAL ADDRESS FOR ACCOUNT:
CODE

ID NUMBER OF CLIENT OR COMPANY REGISTRATION
VAT NUMBER
STREET OR PHYSICAL ADDRESS
CODE

OWNER OR TENANT

SIGNATURE

Remarks

Horizontal lines for writing remarks