Ethekwini Revenue
Florence Mkhize Building
251 Anton Lembede Street
Durban
4001

Tel: 031 324 5000
Fax: 031 324 5500
E-Mail: revline@durban.gov.za
Website: http://www.durban.gov.za

LETTER OF AUTHORITY
Agent/Proxy Form

I, Full name and Surname:

Identity Number:

the duly authorized owner of the property described as:

Physical address:

Postal Code

Postal address:

Postal Code

Rate Number:

Account Number:

Do hereby appoint (Full Name and Surname):

Identity Number:

To act in my place and stead as my agent for the purposes of the following:
(Tick applicable box)

Opening of Municipal Account ☐

Settlement of arrears (incl. Arrangements to pay) ☐ (attach special power of attorney)

Termination of Municipal Account ☐

If other, furnish detail…….

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SIGNATURE OF OWNER DATE DD/MM/YY

Notes:

1. Attach certified copies of identity documents of owner and agent
2. A proxy may be used by the property owner(s) in a form acceptable to the municipality, but the date of the proxy must not be older than 30 days as at the date of application for the municipal service.