

APPLICATION FOR SPECIAL OR UNANIMOUS RESOLUTION ST 1 FORM

Kindly complete the form in a legible manner and all pages must be completed.

Details of person making this application:

Please fill in Block Letters

Full Names:																																
Surname:																																
ID Number:																																
Tel No: (home/work):											Cell Phone:																					
Email:																																
Race:											Age:			Gender:																		

Address:

Name of Scheme:																										Unit No:					
Street Name																															
Suburb:																															
City:																															
Province:																					Postal Code:										

Postal address of applicant (if different from above):

PO Box No:											Suburb:																				
City:																															
Province:																					Postal Code:										

The application Pertains to which type of community scheme Living:

tick applicable ✓

<input type="checkbox"/> Sectional Title Development	<input type="checkbox"/> Homeowners Association
<input type="checkbox"/> Housing Scheme for Retired Persons	<input type="checkbox"/> Share Block Company
<input type="checkbox"/> Housing Cooperative	<input type="checkbox"/> Other (please specify) <input type="text"/>

Person / association making the application (applicant):

tick applicable ✓

<input type="checkbox"/> Owner	<input type="checkbox"/> Occupier	<input type="checkbox"/> Management Agent
<input type="checkbox"/> Board of Directors	<input type="checkbox"/> Sectional Title Trustees	<input type="checkbox"/> Management Association for Retired Persons
<input type="checkbox"/> Other (please specify) <input type="text"/>		

Details of the community scheme you are making the application against:

(If more than one person, please state details under additional information)

Details:																															
Address:																															
																Tel No: (home/work):															
Email:																															

Details of the special or unanimous resolution:

Please legibly set out all the facts which you consider having bearing on this application, including dates, places and persons involved.

Exhaustion of internal remedies:

Please advise what has been done to try to resolve this application? Please describe what you have done, who you have talked to and what they offered to do.

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

Is there any financial implications should the resolution be approved, if yes, please specify?

(i, e special levy, insurance etc.)

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

Is there any structural alteration should the resolution be approved, if yes, please specify?

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

Is there any health and safety implications should the resolution be approved, if yes, please specify?

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

Supporting Documentation:

Please tick one or more of the boxes ✓

I have supporting documentation or other evidence to supply with my application:

- A copy of Scheme Governance documentation (including: any rules, regulations, articles, constitution, terms and conditions or other provisions that control the administration or occupation of private areas and common areas)
- A copy of Sectional Title / Homeowners Association Plan
- A copy of the Title Deed
- All documentation, including correspondence with the Respondent (party you are making the application against) relevant to the application
- A copy of your latest statement of account
- A copy of the minutes of the Annual / Special General Meeting
- Photographs
- A copy of audited financial statements
- A copy of Summons
- A copy of Administration Order
- Other (please specify)
- I do not have supporting documentation

Declaration and signature of applicant and/or two trustees and/or managing agent:

Name:	Capacity:
Signature:	
Name:	Capacity:
Signature:	
Name:	Capacity:
Signature:	