

LETTER OF AUTHORITY

I, (FULL NAME) : _____

ID No. : _____

Physical Address : _____

Postal Address : _____

Telephone : (W _____ (H) _____

Cellphone : _____

E-Mail Address : _____

Registered property owner of Erf _____

hereby authorize (Name of person/Company)

ID NO. (not applicable if company) : _____

to act as my **agent** and to apply for all necessary approvals, as required by uMhlathuze Municipality, on my behalf.

Yours faithfully,

SIGNATURE

DATE

WITNESS 1

WITNESS 2