

REF NUMBER:

Small/ Medium/ Large Business

PAYMENT RELIEF APPLICATION FORM (COVID-19)

We hereby wish to apply for repayment relief on our municipal account.

MUNICIPAL ACCOUNT NUMBER	
ACCOUNT-HOLDER NAME	
NAME OF BUSINESS	
VAT NUMBER	
BUSINESS INDUSTRY TYPE	
DOMICILE ADDRESS	
CONTACT PERSON	
CONTACT NUMBER	
CELL NUMBER FOR SMS OUTCOME	Domicile Cell:

Relief questionnaire

- Did your income/revenue decrease due to COVID? (Y/N)
- Was the account in arrears prior to lockdown (26/03/2020)? (Y/N)
- Do you have an existing arrangement in place? (Y/N)
- Do you require the arrangement to be restructured – extended? (Y/N)
- Indicate number of additional repayment months required

Motivation/ Other:

Documents required with application:

- Proof of loss of income (e.g. 3 months bank statements)
- Latest audited financial statements or any other financial info required by NMBM
- Proof of application for relief from National Government (e.g. UIF etc)
- Proof of outcome of above-mentioned application

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Full name of applicant

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Signature

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Date

Email this application form and documents to accountrelief@mandelametro.gov.za

Approved/ Not Approved – Signature.....