



Nomination form

In terms of the provisions of the Spatial Planning and Land Use Management Act 16 of 2013 with its regulations read together with Section 33 of the Lephalale Local Municipal Spatial Planning and Land Use Management By-Law 2017

To: The Municipal Manager
Lephalale Local Municipality
Private Bag x136
LEPHALALE
0555

For Attention: _____

For Enquiries: _____

Tel _____

CALL FOR NOMINATIONS FOR PERSONS TO BE APPOINTED AS MEMBERS TO THE LEPHALALE MUNICIPAL PLANNING TRIBUNAL

* I,(full names of
nominee);

ID No (of nominee)

Physical address:
.....;

Postal address:
.....
.....;

Designation or rank of the nominee in the organ of state or non-governmental
organisation:.....
.....

hereby declare that –

- (a) I am available to serve on Lephalale Municipal Planning Tribunal and I am willing to serve as chairperson or deputy chairperson should the Council designate me / I am not willing to serve a chairperson or deputy chairperson (*delete the option not applicable*);
- (b) There is no conflict of interest OR I have the following interests which may conflict with the Lephalale Municipal Planning Tribunal and which I have completed on the declaration of interest form (*delete the option not applicable*);
- (c) I am not disqualified in terms of section 38 of the Spatial Planning and Land Use Management Act, 16 of 2013 to serve on the Lephalale Municipal Planning Tribunal and I authorise the Lephalale Local Municipality to verify any record in relation to such disqualification or requirement;
- (d) I undertake to sign, commit to and uphold the Code of Conduct applicable to members of the Lephalale Municipal Planning Tribunal.

Attached hereto are copies of:-

1. Short curriculum vitae of the nominee (*not exceeding two pages*);
2. Motivation by the nominator for the appointment of the nominee to the MPT (*not exceeding one page*), also detailing the name and address of the nominator, who must be a natural person and a person may nominate himself or herself;
3. Certified copies of qualifications;
4. Certified copies registration certificates indicating registration with the relevant professional body or voluntary association.

Signature of Nominee

Signature of Person signing on behalf of the Organ of State or Non-Governmental Organisation

Full Names of Nominee

Full Names of Person signing on behalf of the Organ of State or Non-Governmental Organisation



DECLARATION/DISCLOSURE OF INTERESTS FORM

In terms of the provisions of the Spatial Planning and Land Use Management Act 16 of 2013 with its regulations read together with Section 34 of the Lephalele Local Municipal Spatial Planning and Land Use Management By-Law 2017

I, the undersigned,

Full names: _____

Identity Number: _____

Residing at: _____

do hereby declare that -

- (a) The information contained herein fall within my personal knowledge and are to the best of my knowledge complete, true and correct, and
- (b) That there is no conflict of interest between myself and the Lephalele Municipal Planning Tribunal; or
- (c) I have the following interests which may conflict or potentially conflict with the interests of the Lephalele Municipal Planning Tribunal:

CONFLICTING INTERESTS

- (d) The non-executive directorships previously or currently held and remunerative work, consultancy and retainership positions held as follows:

1. NON-EXECUTIVE DIRECTORSHIP

Name of Company	Period
1.	
2.	
3.	
4.	
5.	

2. REMUNERATIVE WORK, CONSULTANCY & RETAINERSHIPS			
Name of Company & Occupation	Type of Business	Rand amount per month	Period
1.			
2.			
3.			
4.			
5.			

3. CRIMINAL RECORD	
Type of Offence	Dates/Term of Sentence
1.	
2.	
3.	
4.	

- (e) I am South African citizen or a permanent resident in the Republic;
- (f) I am not a Member of Parliament, a provincial legislature, a Municipal Council or a House of Traditional Leaders;
- (g) I am not an un-rehabilitated insolvent;
- (h) I have not been declared by a court of law to be mentally incompetent and have not been detained under the Mental Health Care Act, 2002 (Act No. 17 of 2002);
- (i) I have not at any time been convicted of an offence involving dishonesty;
- (j) I have not at any time been removed from an office of trust on account of misconduct;
- (k) I have not previously been removed from a tribunal for a breach of any provision of the Spatial Planning and Land Use Management Act, 2013 or provincial legislation or the Lephalale Municipal Spatial Planning and Land Use Management Bylaw 2017 enacted by the Lephalale Local Municipality;
- (l) I have not been found guilty of misconduct, incapacity or incompetence; or
- (m) I have not failed to comply with the provisions of the Spatial Planning and Land Use Management Act, 2013 or provincial legislation or the Lephalale Municipal Spatial

Planning and Land Use Management Bylaw 2017 enacted by the Lephalale Local Municipality.

Signature of Nominee:

Full Names:

SWORN to and SIGNED before me at _____ on this
_____ day of _____.

The deponent having acknowledged that he knows and understands the contents of this affidavit, that the contents are true, and that he or she has no objection to taking this oath and that he or she considers the oath to be binding on his or her conscience.

COMMISSIONER OF OATHS

FULL NAMES: _____

DESIGNATION: _____

ADDRESS: _____