



NAME CHANGE FORM - NATURAL PERSON

PLEASE COMPLETE IN BLOCK LETTERS

PARTICULARS OF REGISTERED OWNER/ACCOUNT HOLDER

TITLE	<input type="text"/>	INITIALS	<input type="text"/>	DATE OF BIRTH	<input type="text"/>	<input type="text"/>	<input type="text"/>
FULL NAME & SURNAME (old)	<input type="text"/>						
FULL NAME & SURNAME (new)	<input type="text"/>						
ID NUMBER (old)	<input type="text"/>	GENDER	<input type="checkbox"/>	MALE	<input type="checkbox"/>	FEMALE	
ID NUMBER (new)	<input type="text"/>	GENDER	<input type="checkbox"/>	MALE	<input type="checkbox"/>	FEMALE	
ERF DESCRIPTION	<input type="text"/>						
PHYSICAL ADDRESS	<input type="text"/>						
	<input type="text"/>	POSTAL CODE	<input type="text"/>				
ACCOUNT NUMBER*	<input type="text"/>						
RATE ACC NUMBER*	<input type="text"/>	WATER ACC NO*	<input type="text"/>				
ELECTRICITY ACC NO*	<input type="text"/>						
CELLPHONE NUMBER: (Preferred)	<input type="text"/>	HOME NO:	<input type="text"/>	<input type="text"/>			
E- MAIL ADDRESS	<input type="text"/>						

* delete if not applicable

DECLARATION BY REGISTERED OWNER/ACCOUNT HOLDER

I, the undersigned, _____, do hereby declare that:

1. I am the registered owner of the above mentioned property* /account holder*.
2. All the information supplied on this Form is true and correct. All other information on the Municipality's records remains unchanged or will be updated concurrently with this Form.
3. This change of name, if granted, will not release me from any obligations incurred under the existing account/s or action in any previous name and shall not be deemed to constitute the opening of a new account with the Municipality.
4. I acknowledge and understand that all the terms and conditions in the existing Municipal Services Agreement concluded between myself and the Municipality shall remain in full force and effect, except to the extent where variations have been mutually agreed to, in writing.

SIGNATURE OF REGISTERED OWNER

PRINT NAME

DATE



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>

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DOCUMENTS TO ACCOMPANY THIS APPLICATION

1. Certified Marriage Certificate (where the Customer has married and changed his/ her Surname).
2. Certified identify document (old and new).
3. Government Gazette Notice –reflecting his or her name change in instances other than (1) above.

For Office Use Only

Account No: _____

Application: Approved / Not Approved _____

Reason/s for refusal _____

Approved / Not Approved By:

Name _____ Signature: _____ Date: _____

Designation _____