Blouberg Municipality



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Nomination of Person to be appointed as a member to the Blouberg Municipality Municipal Planning Tribunal in terms of Section 36(1)(b) of Spatial Planning and Land Use Management Act,2013 (Act No. 16 of 2013) read together with the regulation (3)(2)(a) of the Spatial Planning and Land Use Management Regulations: Land Use Management and General Matters, 2015

		,					
		A.	Personal Deta	ils			
Surname							
First Name							
ID or Passport Numl							
·							
✓ Race (please	k)	African	Coloured		Indian	Whi te	
Gender			Female			Male	
Do you have a disab		Yes			No		
If yes, Elaborate							
Are you a South African Citizen? (please tick)			Yes	No			
If no, what is your N	nality						
Work permit Numbe	any)						
Do you hold a professional membership with any professional body, If yes provide information below (please tick)			Yes			No	
Professional body:(tick) attachcopy of membership)		Membership number			Exp	iry date	
		B. Con	tact Details				
Preferred language	for (correspondence					

Telephone number during of	office	hours							
3									
Preferred method for correspondence	Post	Post			Email				
Correspondence contact det (in termsof the above	tails								
C. Qualification (Addit the information is alread			n may	/ be	e provide	ed on yo	ur CV and բ	olease cross X if	
Name of School		Highest Year of Qualification obtained		btained					
Name of institution				I	Name o	f Qualific	ation		
				+					
D. Work Experience (A	Additic	onal Inform	nation	ma	y be pro	ovided o	n your CV)		
Employer	Po	Position			rom		То		
				Мо	nth	Year	Month	Year	
If you were previously employ whether anyconditions exists							Yes	No	
If yes, provide the name of t municipality	the pr	evious							
		E.	Disci	pli	nary red	cord			
Have you been dismissed for misconduct?	Yes					No			
If yes, Name of municipality/instituti on									
Type of misconduct/transgression									
Date of resignation/disciplinary use finalized									
Award/Sanction									

Did you resign from your job on orafter pending finalization of the disciplinary proceedings? If yes, provide details on separate sheet		Yes		No				
		F. Criminal Record						
		Yes			No			
If yes, state type of criminal act								
Date Criminal case finalized								
Outcome/Judge	Outcome/Judgement							
	G. Re	ference (plea	se cross X if inform	mation is on your cv)				
Name of referee	Relationsh	ip	Tel (Office Hours)		Cell Phone Number			
DECLARATION								
thereof is to the best of my k		nowledge true	and correct. I unders	stand	nd any attachments in support that any misrepresentation or rmination of my appointment			
Signature :		Date :						
		[
	Check L	ist						
Copies of academic qualifications attached								
Are you registered with the Professional body(State Name and Membership Number)?								
Do you have Leadership Qualities?								
Do you have experience of Spatial planning, Land Use management and Land Developmentor the law related thereto?								
Have you attached your comprehensive CV?(not								

(full names of nominee), ID No (of nominee)
hereby declare that -

- 1. I am available to serve on Blouberg 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
- 2. there is no conflict of interest OR I have the following interests which may conflict with the Blouberg Municipality Municipal Planning Tribunal and which I have completed on the declaration of interest form (declaration of interest form to be completed only after formally appointed)
- 3. 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 Blouberg Municipal Planning Tribunal and I authorize the Blouberg Municipality to verify any record in relation to such disqualification or requirement.
- 4. I undertake to sign, commit to and uphold the Code of Conduct applicable to members of the Blouberg Municipal Planning Tribunal.

Signature of Nominee
Full Names of Nominee
Date:
Place: