



UMZIMVUBU
LOCAL MUNICIPALITY

CUSTOMER INFORMATION UPDATE FORM

Full Name of Ratepayer: _____

Identity Number:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

ERF Number: _____

ERF Description(Residential/ Business): _____

Physical Address: _____

Postal Address: _____

Home Telephone Number:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Cellphone Number:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Email Address: _____

Ratepayer's Signature: _____

SECTION B: INFORMATION REQUEST/ NATURE OF QUERY

Please tick one or more boxes:





UMZIMVUBU
LOCAL MUNICIPALITY

- Wrong charges on my account**
- Check my account balance**
- Request a statement**
- Change of property owner details**
- Make a payment arrangement**
- Update contact or property details**
- Other (please explain): _____**

