

FORM A - NOTIFICATION OF CHANGE OF BODY CORPORATE ADDRESS

Sectional Titles Schemes Management Act, 2011 – Section 3(1)(o)

SCHEME DETAILS:

Name of Scheme:

Sectional Scheme (Number/Year): / (first number, if more than one)

Local Municipality Name:

TO:

1. Community Scheme Ombud Service:

2. Local Municipality:

3. Registrar of Deeds:

ADDRESS DETAILS:

(insert below the body corporate's physical service address, its domicilium citandi et executandi)

Province: Municipality:

City: Suburb:

Physical address:

We, the undersigned trustees and (where applicable) managing agent of the body corporate of the above scheme give notice that, in accordance with the requirements of the Act and the rules of the scheme, the body corporate has changed its domicilium citandi et executandi, its address for service of any process, to the above address.

Effective date of address change: (to be inserted by Service) / / (dd/mm/yy)

TO BE SIGNED BY TWO TRUSTEES AND ANY MANAGING AGENT:

Names and details of the Trustees of a Sectional Title Body Corporate, the Board of Directors of a Share Block Company or management association of the Housing Scheme for Retired Persons or trustees of an Association. Any change to the representative must be communicated to the Service by submitting Form A1 attached hereto. A copy of the Resolution appointing the Executive Committee must be attached.

Name:

Capacity:

Signature: Date: / / (dd/mm/yy)

Name:

Capacity:

Signature: Date: / / (dd/mm/yy)

Name:

Capacity:

Signature: Date: / / (dd/mm/yy)

CONFIRMATION OF LODGMENT OF NOTIFICATION:

For Chief Ombud – Community Scheme Ombud Service

Name:

Capacity:

Signature: Date: / / (dd/mm/yy)