



NDLAMBE MUNICIPALITY
 MUNICIPAL MANAGER
 P.O.BOX 13
 PORT ALFRED
 6170

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BUILDING CONTROL SECTION
PENALTY FORM

PLAN NUMBER.....

ERF NUMBER & AREA
 NAME OF REGISTERED OWNER
 ADDRESS
 EMAIL ADDRESS
 CONTACT NUMBERS
 BUILDING CATEGORY/SCOPE
 UNATHORISED BUILDING WORK

YES	NO
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PENALTY	TICK REQUIRED	AMOUNT	CALCULATIONS
BUILDING PLAN FEE: 2 X R.....		R	
INSPECTION FEE (FAILURE TO BOOK)		R	
FOUNDATION		R	
DPM BEFORE SLAB		R	
TIMBER WALL BRACING		R	
ROOF		R	
DRAINAGE		R	
COMPLETION/OCCUPATION		R	
TOTAL AMOUNT		R	BUILDING PLAN FEE: R

OWNER'S/APPLICANT SIGNATURE..... DATE SIGNED.....

CALCULATION DATE: SUBMISSION DATE: ESTIMATED COST: RECEIPT NUMBER: RECEIPT DATE:	FIRST NATIONAL BANK ACCOUNT NUMBER: 53403316037 REFERENCE NUMBER: 01000 000 012 BRANCH CODE 210917
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