



PORT ST JOHNS  
MUNICIPALITY

OFFICE OF THE MUNICIPAL MANAGER

PORT ST JOHNS MUNICIPALITY

EASTERN CAPE PROVINCE OF RSA

PO Box 2 . Port St Johns . 5120 – Erf 257 . Main Street . Port St Johns . 5120

Dear Sir/Madam

RE: CONFIRMATION OF RESIDENCE

This serves to confirm that: GKIDIDI Zovuyo

With ID no: 900408 1016 084

Is a resident of: Ntsimbini location, at Ward: 07

In Port St Johns Municipality.

Therefore I have no objection in you assisting him/her.

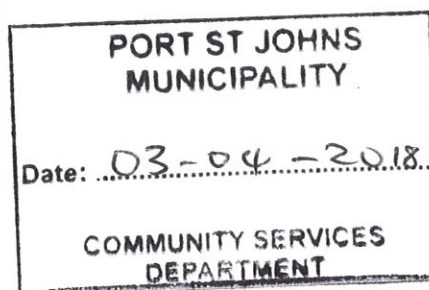
I hope you will find the above in order.

Yours in Service

P. P. O. M.

Ward Councillor

F. Jansa



ALL CORRESPONDENCE MUST BE DIRECTED TO THE OFFICE OF THE MUNICIPAL MANAGER

Tel: 0475641207/8 Fax: 0475641206 Email: fmshiywa@psjmunipality.gov.za

www.psjmunipality.gov.za