**APPLICATION FORM FOR REGISTRATION AND EXAMINATION**

REGISTRATION NO.

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**SOUTH AFRICAN COUNCIL FOR THE PROPERTY VALUERS PROFESSION**

ESTABLISHED BY SECTION 2 OF THE PROPERTY VALUERS PROFESSION ACT, 2000 (ACT NO. 47 OF 2000)

PHYSICAL ADDRESS: 77 KARIBA STREET, LYNNWOOD GLEN TELEPHONE NUMBERS :( 012) 348-8643

POSTAL ADDRESS: P O BOX 114, MENLYN, 0063 FAX NUMBER: (012) 348-7528

E-MAIL:info@sacpvp.co.za

WEBSITE: [www.sacpvp.co.za](http://www.sacpvp.co.za)

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| **ALL QUESTIONS APPLICABLE TO YOUR APPLICATION MUST BE ANSWERED.**  **COMPLETE THIS FORM WITH A BLACK PEN AND IN BLOCK LETTERS AND, WHERE APPLICABLE, MAKE A CROSS(X) IN THE APPROPRIATE BLOCK.**  **USE POSTAL ADDRESS FOR ALL POSTAL CORRESPONDENCE, NOT PHYSICAL ADDRESS.** |

**THIS FORM MUST BE ACCOMPANIED BY THE FOLLOWING: NB: All copies must be certified**

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| --- |
| 1. Proof of payment of the Application Fee- **Non- refundable** (No cash payments at SACPVP Office)  2. Proof of enrolment for property valuation qualification **(at least 3 subjects)**  3. Copy of academic certificates and transcripts  4. Copy of ID or Passport & Visa for non-SA citizens  5. Supervisor’s letter when applying as a candidate or Pr Aval registered with conditions/ restrictions. This letter should confirm willingness to mentor the applicant. NB: The letter should be dated and have the original signature- **electronic signatures will not be accepted)**  6. Record of **ALL** your experience in valuation work when applying to sit for the admission examination to be completed under item 11.1 of this form  **Note that all Council correspondence should be in English** |

**1.** **APPLICATION TO REGISTER IN TERMS OF THE PROPERTY VALUERS PROFESSION ACT, 2000, AS:**

1.1 CANDIDATE VALUER PROFESSIONAL ASSOCIATED VALUER PROFESSIONAL VALUER

CANDIDATE SINGLE RESIDENTIAL PROPERTY ASSESSOR SPECIFIED CATEGORY

1.2 **APPLICATION TO WRITE ADMISSION EXAMINATION: (Note that all examinations will be conducted in English)**

1.3 PROFESSIONAL ASSOCIATED VALUER PROFESSIONAL VALUER SINGLE RESIDENTIAL PROPERTY ASSESSOR

1.4 OTHER: (specify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**2. PERSONAL PARTICULARS:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| PROF | DR | MR | MRS | MISS | MS |

* 1. SURNAME\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2.2 FIRST NAMES: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| --- | --- | --- | --- | --- | --- | --- | --- |
| Y | Y | Y | Y | M | M | D | D |

2.3 ID NO.: DATE OF BIRTH:

* 1. PLACE OF BIRTH: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2.5 NATIONALITY AND RACE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2.6 RESIDENTIAL ADDRESS: 2.7 POSTAL ADDRESS: 2.8 FULL BUSINESS ADDRESS:

(if not same as Residential) (Not P O Box number)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (POSTAL CODE) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (POSTAL CODE) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (POSTAL CODE)

2.9 TEL NO: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 2.10 TEL NO: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 2.11 FAX NO: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2.12 MAGISTERIAL DISTRICT: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 2.13 CELL NO: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2.14 E-MAIL:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**3. ARE YOU ORDINARILY RESIDENT IN THE REPUBLIC OF SOUTH AFRICA YES NO**

**4. CANDIDATE VALUER (STILL STUDYING), GIVE PARTICULARS OF:**

* 1. TYPE OF QUALIFICATION/ PROGRAMME WHICH YOU ARE CURRENTLY ENROLLED FOR:

|  |  |  |
| --- | --- | --- |
| DIPLOMA | DEGREE | OTHER |

* 1. NAME OF THE QUALIFICATION/ PROGRAMME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
  2. ACADEMIC INSTITUTION AT WHICH YOU ARE CURRENTLY ENROLLED: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**5. QUALIFICATIONS:**

5.1 HIGHEST STANDARD/ GRADE PASSED: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ YEAR:

|  |  |  |  |
| --- | --- | --- | --- |
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* 1. PARTICULARS OF YOUR ACADEMIC QUALIFICATIONS:

|  |  |  |
| --- | --- | --- |
| QUALIFICATION | ACADEMIC INSTITUTION | YEAR |
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**6. MEMBERSHIP OF VALUERS RELATED VOLUNTARY ASSOCIATION/ ORGANISATION:**

|  |  |
| --- | --- |
| ORGANISATION | YEAR OF ADMISSION |
|  |  |
|  |  |
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**7. EMPLOYMENT DETAILS:**

* 1. NAME OF PRESENT EMPLOYER:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
  2. ADDRESS OF PRESENT EMPLOYER: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
  3. POSITION : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (FROM/ DATE) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

7.4 YOUR ENGAGEMENT IN PROPERTY VALUATION: PART TIME FULL TIME

* 1. IF PART TIME, STATE YOUR MAIN OCCUPATION: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**8. PROPERTY VALUATION HISTORY:**

8.1 DO YOU PRESENTLY SPECIALISE IN THE VALUATION OF ANY PARTICULAR TYPE OF PROPERTY: YES N

8.2 IF YES, SPECIFY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

8.3 WERE YOUR VALUATIONS SUBJECT TO DISPUTE IN ANY COURT/ VALUATION BOARD/ ARBITRATION BOARD: Y N

8.4 IF YES, IN HOW MANY CASES HAVE YOU BEEN CALLED UPON TO GIVE EVIDENCE?

HIGH COURT OTHER COURTS

8.5 ARE YOU AN APPRAISER APPOINTED IN TERMS OF THE ADMINISTRATION OF ESTATES ACT, 1965 YES NO

8.6 IF YES, FOR WHICH MAGISTERIAL DISTRICT(S): (ATTACH LETTER OF APPOINTMENT)

8.7 YEAR OF APPOINTMENT:

|  |  |  |  |
| --- | --- | --- | --- |
|  |  |  |  |

8.8 HAVE YOU AT ANY TIME BY REASON OF IMPROPER CONDUCT BEEN DISMISSED FROM A POSITION OF TRUST: YN N

8.9 HAVE YOU EVER BEEN CONVICTED OF ANY OFFENCE INVOLVING AN ELEMENT OF DISHONESTY: Y N

8.10 IF YES, GIVE DETAILS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

9. **DECLARATION BY APPLICANT:**

**I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** SOLEMNLY DECLARE THAT THE ABOVE PARTICULARS ARE TRUE AND CORRECT:

SIGNED AT: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ON THIS: \_\_\_\_\_\_\_ DAY OF \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 20 \_\_\_\_\_\_\_\_\_\_\_

SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

10. **COMMISSIONER OF OATH:**

SIGNED AND SWORN/ DECLARED BEFORE ME, ON THIS: \_\_\_\_\_\_\_\_ DAY OF: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 20 \_\_\_\_\_\_\_\_\_\_\_

THE DEPONENT ACKNOWLEDGES THAT HE/ SHE KNOWS AND UNDERSTANDS THE CONTENTS OF THIS DECLARATION.

|  |
| --- |
| **STAMP OF THE**  **COMMISSIONER OF OATHS**  **AND**    **DATE** |

NAME OF COMMISSIONER OF OATH: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DESIGNATION/ AUTHORITY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SIGNATURE OF COMMISSIONER: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| 11**. Applications for registration as Professional Valuer, Professional Associated Valuer and**  **Single Residential Property Assessor**  **A record of ALL your work in valuation** (showing the date of valuation, property description, type of property, purpose of valuation and value/ amount) must accompany this application. The numbers in the record must correspond with the numbers in the summary of item 11.1 of this form. Your application must be accompanied by a letter from your supervisor and s/he must initial each page of your record. |

**SUMMARY OF THE VARIETY AND NATURE OF ALL EXPERIENCE IN PROPERTY VALUATION. INDICATE THE NUMBER OF PROPERTY VALUATIONS PEFORMED FOR EACH TYPE OF PROPERTY:**

**11.1 EXPERIENCE MATRIX (INDICATE THE NUMBER OF VALUATIONS IN EACH CELL)**

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| PURPOSE OF VALUATION    TYPE OF  VALUATION | Purchase & Sale and Capital Gains Tax | Rental Determination | Mortgage Bond and Security, [section 13(t)] | Financial statements and Investments | Expropriation/  Land Restitution | Endowment | Compensation:  Town planning Schemes | Rating | Deceased Estates | Insurance |
| Vacant Single Residential Land |  |  |  |  |  |  |  |  |  |  |
| Vacant General Residential Land (Flats) |  |  |  |  |  |  |  |  |  |  |
| Single Dwellings |  |  |  |  |  |  |  |  |  |  |
| Blocks of Flats |  |  |  |  |  |  |  |  |  |  |
| Individual Residential Units (Sectional Title & Share block) |  |  |  |  |  |  |  |  |  |  |
| Sectional Title Scheme & Share Block Schemes |  |  |  |  |  |  |  |  |  |  |
| Timeshare Schemes |  |  |  |  |  |  |  |  |  |  |
| Leasehold |  |  |  |  |  |  |  |  |  |  |
| Vacant  Commercial Land |  |  |  |  |  |  |  |  |  |  |
| Commercial Properties |  |  |  |  |  |  |  |  |  |  |
| Vacant Industrial Land |  |  |  |  |  |  |  |  |  |  |
| Industries/  Warehouses |  |  |  |  |  |  |  |  |  |  |
| Potential Township  Land |  |  |  |  |  |  |  |  |  |  |
| Partially Developed  Townships |  |  |  |  |  |  |  |  |  |  |
| Agricultural Holdings  (Small Holdings) |  |  |  |  |  |  |  |  |  |  |
| Servitudes  (Specify type below) |  |  |  |  |  |  |  |  |  |  |
| Land on which  Mines are situated |  |  |  |  |  |  |  |  |  |  |
| Farms  (Specify type below) |  |  |  |  |  |  |  |  |  |  |
| Special Type Properties  (Specify type below) |  |  |  |  |  |  |  |  |  |  |

* 1. **Specify:**
     1. Servitudes: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
     2. Farms: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
     3. Special type properties:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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