

CONVEYANCER CERTIFICATE

I/We
(conveyancer's name and surname)
Practising at:
(firm and place of practice)
In respect of:
(full property description (erf / farm) as it appear in title deed of same)
Hereby certify that a search was conducted in the Deeds Registry, regarding the said property (ies) (including both current and earlier title deeds/pivot deeds/deeds of transfer): 1
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For example Deed of Transfer T12345/2000 or Certificate of Registered Sectional Title ST1234/2000 (description of title deed number and date)

A. IDENTIFY RESTRICTIVE TITLE CONDITIONS (if any)

	Categories	Are th dee restrict (indic below	d tions ate	Title Deed and Clause number restrictive conditions are found
1.	Use of land	Y	N	
2.	Building lines	Y	N	
3.	Height	Y	N	
4.	Number of Dwellings	Y	N	
5.	Bulk floor area	Y	N	
6.	Coverage/built upon area	Y	N	
7.	Subdivision	Y	N	
8.	Servitudes that may be registered over or in favour of the property	Y	N	
9.	Other Restrictive Conditions	Y	N	

B. INDICATE AFFECTED PARTIES AS PER TITLE DEED (if any)

ln	respe	ct of	which	it w	as found	d that	there	*are,	/are no	res	strictive	condit	ions with	refer	ence to	o Sect	ion	33(4)	(a, b
or	c) of	the	Land	Use	Plannin	g By-l	aw (2	015)	registe	ered	agains	t such	property	(ies)	prohik	biting	it f	rom	being
ut	ilised/	'deve	loped	for t	he follo	vina p	ourpos	es (as	s elabo	rate	d in the	accon	npanvina	applio	ation)				

1.	in the restrictive condition									
2.	A person whose rights or legitimate expectations will be affected by the removal/suspension/amendment of a restriction condition									
3.	All persons mentioned in the deed for whose benefit the restrictive condition applies									
	OCESS BY WHICH RELEVANT CONDITIONS WILL etick appropriate box)	BE ADDRESSED								
1.	Application for removal / suspension / amendment of restrictive condition in terms of Section 15 of the Stellenbosch Municipal Land Use Planning By-Law, 2023									
2.	2. Notarial Deed of Cancellation (Submit Copy of Signed Agreement)									
3.	3. Action by way of court order (Submit Copy of the Court Order)									
4.	If Other, Please Specify:									
Signed at (Place) on this (Day) (Month) of 20 Full names and Surname:										
	Firm Postal Address	Kindly endorse certificate by affixing official stamp here and initial here								
Tel: Email:										