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□ customercare@drakenstein.gov.za

DEPARTMENT PLANNING AND DEVELOPMENT BUILDING CONTROL: COMPLAINTS FORM

DATE		
COMPLAINANT'S NAME		
COMPLAINANT'S ADDRESS		
COMPLANANT'S		
CONTACT DETAILS		
TRANSGRESSOR'S		
DETAILS ADDRESS *		
NAME/ CONTACT		
NUMBER (IF AVAILABLE)		
Kindly note the following:		
 Complaints will only be officially lodged once both sides of this form are completed correctly and information verified by the Building Control Official. The statement on the rear of this page should include the date when this transgression took place and the dates / actions taken by the Complainant to remedy the matter prior to reporting it to the Drakenstein Building Control Office. Contact details of the Complainant are required as, should the matter go to prosecution, the Complainant may be summonsed to appear in Court. It is the Complainant's responsibility to ensure that the relevant Building Inspector is notified of any change in particulars. Should the matter include a property boundary encroachment, it is the responsibility of the Complainant to provide a Land Surveyors' Certificate indicating the extent of the encroachment, should no Erf boundary pegs be visible on the property. 		
	Complete statement on rear of page	

١,	the undersigned (name)	, (ID Number)
D	o hereby state that:	
1.		statement, am a legal person of sound mind, and the correct and fall within my personal knowledge and contrary appears from the context.