

 <p>CITY OF TSHWANE IGNITING EXCELLENCE</p>	<p>Department: Economic Development and Spatial Planning Section: Building Plans Management</p>	DOC NO	EDSP/BPM/O P 7.5.1/1/2
		ISSUE DATE	14/01/2014
		REV DATE	23/03/2023
		REV NO	5

SPECIAL POWER OF ATTORNEY

I/We, _____, ID No.: _____,
the undersigned, nominate, constitute and appoint -
_____, ID No.: _____,
SACAP Registered Person: _____,
SACAP Registration Number: _____,
with the power of substitution to be my/our legal attorney(s) and agent(s) in my/our name, place and
stead to apply for _____ (type of
application and property description) at _____ (name
of local authority) and in general to do everything to effect the application and to do whatever I/we would
do if I/we were present in person and acting in the matter; and I/we hereby ratify, allow and confirm, and
promise and agree to ratify, allow and confirm everything my/our attorney(s) and agent(s) may do or
may permit to be done legally in terms of this power of attorney.

Certify special powers granted (if applicable):

Signed at _____ on this _____ day of _____ 20 _____ in
the presence of the undersigned witness.

AS WITNESS:

1. _____
Name in print

SIGNATURE

SIGNATURE: REGISTERED OWNER

Prove authority to act on behalf of:

- a) Company (company resolution)
- b) Close Corporation (CK2 document)
- c) Trust (trust resolution)
- d) Other: _____