



KAVANGO WEST REGIONAL COUNCIL
KATWITWI SETTLEMENT

Tel: +264 66 264875/6
Fax: +264 66255685

Private Bag 6294
Nkurenkuru
Namibia

Katwitwi.settlement@kavangowestrc.gov.na

APPLICATION FORM FOR ERF/ ERVEN/ PLOT(S) IN KATWITWI SETTLEMENT

Business ☐ Residential ☐ Industrial ☐ Institutional ☐

PART A.

PERSONAL DETAILS:

1. SURNAME:

2. FULL NAMES:

3. IDENTITY NUMBER:

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4. CITIZENSHIP:

5. MARITAL STATUS: (Mark appropriate box with "x")

	Single
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	Married
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	Other specify
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6. POSTAL ADDRESS:

Tel. (Home)..... (Work)Cell.....

Fax:E-mail:

7. CITY/ TOWN:

8. EMPLOYMENT STATUS: EMPLOYER:

PART B.

BUSINESS/COMPANY PARTICULARS:

9. NAME OF THE BUSINESS/COMPANY:

10. CLASS OF BUSINESS:

11. BUSSINESS REGISTRATION NUMBER:

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12. FULL NAME OF MEMBER(S)/DIRECTOR(S): (1)

(2)

(3)

(4)

13. POSTAL ADDRESS:

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Tel: Fax: E-mail:

PART C.

APPLICATION/S PARTICULARS:

ERF NO	ZONING	TOWNSHIP	SIZE (m ²)

14. BRIEFLY STATE THE REASON YOU ARE APPLYING FOR AN ERF/ERVEN, FINANCIAL READINESS AND IMPELMANTATION PLAN.

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PART D.

DECLARATION BY THE APPLICANT:

The following mandatory documents should be attached to this application form:

1. Certified copies of Identity documents.
2. Copy of proof of business registration from the Ministry of Trade and Industry/BIPA.
3. Bank Statement or proof of income.
4. Receipt as a proof of payment for the Application Form.

NB: Please take note that submitting of this application form does not guarantee for erf/erven approval and the final decision rest with the Council.

I certify that the information provided above is correct.

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SIGNATURE OF THE APPLICANT

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DATE

FOR OFFICE USE	
Received by:	
Designation:	
Signature:	
Date:	
Time:	

Bank Name:	STANDARD BANK NAMIBIA
Account Name:	KAVANGO WEST REGIONAL COUNCIL
Account Number:	60000459576
Branch Name:	RUNDU
Type of Account:	CALL DEPOSIT