

FORM MDB1

WARD DELIMITATION

FORM TO NOTIFY THE MDB THAT LOCAL CONSULTATIONS ON THE DRAFT WARD BOUNDARIES, HAVE BEEN COMPLETED AND THAT THE MUNICIPALITY AND LOCAL STAKEHOLDERS AGREE WITH THE DRAFT WARD BOUNDARIES.

(Please send this form to the MDB by email (registry@demarcation.org.za) or by fax 012-3422480, as soon as possible but not later than 30 April 2020.

Name of municipality:	Code
Contact person:	
Tel. number:	Cell number:
Email address:	
I hereby confirm that the Municipal Conbeen consulted.	uncil and all the Ward Committees have
In addition the following persons and i	nstitutions have also been consulted:
Name	Contact details
by the MDB.	rith all the ward boundaries as proposed
MUNICIPAL MANAGER	
DATE:	

FORM MDB2

WARD DELIMITATION

FORM TO NOTIFY THE MDB THAT THE MUNICIPALITY AND LOCAL STAKEHOLDERS DO NOT AGREE WITH SOME OR ALL THE DRAFT WARD BOUNDARIES, AND TO SUBMIT TO THE MDB ALTERNATIVE PROPOSALS ON WHICH CONSENSUS HAS BEEN REACHED WITH LOCAL STAKEHOLDERS

(Please send this form to the MDB by email (registry@demarcation.org.za) or by fax 012-3422480, as soon as possible but not later than 30 April 2020.

by fax 012	2-3422480, as so	on as possi	ble but not later th	an 30 April 2020.
Name of mun	icipality:			Code
Contact perso	on:			
Tel. number:.		Ce	ell number:	
Email addres	s:			
•		•	cil and all the War proposed by the M	d Committees have IDB.
In addition th	e following pers	sons and ins	titutions have also	been consulted:
Name		0	Contact number or	email address
I confirm that		ed to accept	the MDB proposa	ils for the
Ward no.	Ward no.	Ward no	Ward no.	Ward no.
(Please provi	de ward numbe	rs as on the	map)	

The municipality has reached consensus with stakeholders that the following alternative proposals should be submitted to the MDB for consideration:

Ward number	The ward should comprise of the	Motivation
	following voting districts	

(provide the voting district	
numbers, and the number of	
voters in brackets e.g.	
VD1(1500)+VD3(2500)=4000)	
VD1(1300)+VD3(2300)=4000)	

The following written, and supporting submissions have been received, and are attached:

Received from	Date of submission

I confirm that:

- the boundaries of the proposed wards have been mapped on the attached map provided by the MDB;
- each cluster of voting districts form a contiguous ward;
- the number of voters in each ward fall within the minimum and maximum of the norm.
- the proposed ward boundaries comply, in general, with the criteria.

MUNICIPAL MANAGER	
DATE:	

FORM MDB3

WARD DELIMITATION

FORM TO SUBMIT TO THE MDB SEPARATE INDIVIDUAL PROPOSALS ON WARD BOUNDARIES WHERE THERE IS DISAGREEMENT WITH THE DRAFT WARDS

Name of muni	cipality:				Code
=		e MDB by email (<u>r</u> on as possible bu			
Name of perso	on/institution:				
Contact perso	n:				
Address:					
Tel. number:		Cell nur	nber:.		
Email address	;				
_	rm that I/my ins consultative pr	titution have/has rocess.	partic	ipated in t	he
I/my institution	n accept(s) the	MDB proposals fo	or the	following	wards:
Ward no.	Ward no.	Ward no.	d no. War		Ward no.
			+		
(Please provid	 le ward number	rs as on the map)			
•		not/does not agre equest(s) the MD		•	
Ward number	following vo (provide the numbers, an voters in br	hould comprise of oting districts e voting district and the number of eackets e.g.	:	Motivatio	n

	ritten, and supporting submission	ns have been received, and
e attached:		

I confirm that:

Received from

 the boundaries of the proposed wards have been mapped on the attached map;

Date of submission

- each cluster of voting districts form a contiguous ward;
- the number of voters in each ward fall within the minimum and maximum of the norm;
- the proposed ward boundaries comply, in general, with the criteria.

SIGNATURE		
DATE:	 	