

**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](mailto: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 Council and all the Ward Committees have been consulted.

In addition the following persons and institutions have also been consulted:

Name	Contact details

I confirm that all parties are satisfied with all the ward boundaries as proposed by the MDB.

**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](mailto:registry@demarcation.org.za)) or by fax 012-3422480, as soon as possible but not later than 31 May 2020.

Name of municipality: EKURHULENI METROPOLITAN MUNICIPALITY  
Code EKU

Contact person:.....

Tel. number:.....Cell number:.....

Email address:.....

I hereby confirm that the Municipal Council and all the Ward Committees have been consulted on the ward boundaries proposed by the MDB.

In addition the following persons and institutions have also been consulted:

Name	Contact number or email address

I confirm that all parties agreed to accept the MDB proposals for the following wards:

Ward no.	Ward no.	Ward no.	Ward no.	Ward no.

(Please provide ward numbers as on the map)

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



- 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 municipality: .....Code.....**

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

**Name of person/institution:.....**

**Contact person:.....**

**Address:.....**

**Tel. number:.....Cell number:.....**

**Email address:.....**

**I hereby confirm that I/my institution have/has participated in the municipality's consultative process.**

**I/my institution accept(s) the MDB proposals for the following wards:**

Ward no.	Ward no.	Ward no.	Ward no.	Ward no.

**(Please provide ward numbers as on the map)**

**However, I/my institution do not/does not agree with the configuration of the other ward boundaries, and request(s) the MDB to consider the following proposals:**

Ward number	The ward should comprise of the following voting districts (provide the voting district numbers, and the number of voters in brackets e.g. $VD1(1500)+VD3(2500)=4000$ )	Motivation

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;
- 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:.....**