



DEPARTMENT OF
INLAND REVENUE
Central Revenue Administration

AFFIRMATION

(VALUATION SECTION)

Real Property Tax Act, (Section 8 (1))

DATE: _____

PROPERTY OWNER'S NAME: _____

PROPERTY LOCATION: _____

ASSESSMENT NO: _____

OTHER IDENTIFICATION: _____

POSTAL ADDRESS: _____

OWNER OCCUPIED OR RENTED: _____

TO WHOM RENTED: _____

I hereby declare that the above return is true and correct.

SIGNATURE

DATE:

In the presence of _____

DATE:

NOTE: One return is required for each lot, parcel or acreage of property