



THORNHILL
Estate

THORNHILL ESTATE
DOCUMENT CONTROL SYSTEM

ADD:002:D

**ADDENDUM 2:
PROPERTY TRANSFER CLEARANCE AND
AUTHORISATION CERTIFICATE**

Original Issue 'A'	Name	Signature	Date
Prepared by:	Gov Committee	<i>ORIGINAL</i>	06/07/2010
Recommended by Sub Committee:			
Authorised for issue by THOA Chairman:	Allan Bartram	<i>Signed A. Bartram</i>	03/12/2010

REV	DESCRIPTION	DATE	CONTENT APPROVED	AUTHORISED
B	Invula Alarm Monitoring Check added	08/05/2014	I. Boxall	Signed I. Boxall 27/05/2014
C	Confirmation of Estate Agent Registration added	12/05/2015	S Burrow	Signed S. Burrow 26/05/2015
D	Confirmation of Estate Agent Registration modified	15/07/2015	S Burrow	Signed S Burrow 21/07/2015

Thornhill Homeowners Association

9 Namur Avenue, Thornhill Estate, Modderfontein, 1644
 Tel: 011 608 0835 Fax: 011 608 2832 Email: admin@thoa.co.za Web: www.thoa.co.za



PROPERTY TRANSFER CLEARANCE & AUTHORISATION CERTIFICATE

Homeowner: _____ Certificate number _____

Date: _____

Address: _____ Stand No: _____

Agent: _____ Sale Price _____ KPS FEE R _____

AEA Sale Fee: _____ Sales agreement attached: YES NO

FINANCE COMMITTEE:

Levy Status: FINES LEVIES COSTS AND INTEREST

Comments: _____

Authorised by: Name: _____ signed off: _____

GARDENS COMMITTEE:

Comments: _____

Authorised by: Name: _____ signed off: _____

ARCHITECTURAL COMMITTEE:

Comments: _____

Authorised by: Name: _____ signed off: _____

OAKTREE VILLAGE:

Comments: _____

Authorised by: Name: _____ signed off: _____

THE COTTAGES:

Comments: _____

Authorised by: Name: _____ signed off: _____

THE VILLAS:

Comments: _____

Authorised by: _____ Name: _____ signed off: _____

ESTATE AGENTS REGISTRATION:

THOA Registration Status:

Occasional Registration

Annual Registration

Period of Registration: _____

Fee Received: _____ Date Receipt Issued: _____

THOA Documentation Handed Over to Agent/Purchaser - Date: _____

Comments: _____

Authorised by: _____ Name: _____ signed off: _____

OPERATIONS CHECK:

Comments: _____

Authorised by: _____ Name: _____ signed off: _____

ALARM MONITORING BY IMVULA:

Comments: _____

Authorised by: _____ signed off: _____

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Sent to KPS: _____ Date: _____ By: _____