SECTIONAL TITLE LEASE AGREEMENT

THE SCHEDULE

1] THE LANDLORD'S DETAILS

Full Names	>	
Company Registration Number:	>	
VAT Ref. Number:	>	
Physical Address & Domicilium:	>	
Representative	>	
Email Address:	>	
Contact Details:	>	

2] THE TENANT'S DETAILS

		Tenant 1		*Tenant 2*
Full Names	>		>	
ID / Passport / Registration Number:	>		>	
VAT Ref. Number:	>		>	
Physical Address & Domicilium	>		>	
Representative	>		>	
Email Address:	>		>	
Contact Details	>		>	

		Tenant 3		*Tenant 4*
Full Names	>		>	
ID / Passport / Registration Number:	>		>	
Physical Address & Domicilium	>		>	
Email Address:	>		>	
Contact Details	>		>	

** All occupants over the age of 18 are required to sign the lease agreement and provide a copy of their ID document*
** All tenants listed above are jointly and severally liable. In other words, the tenants are individually responsible / liable in terms of the lease.*

3] THE PREMISES

Property Address:	>	

and the following exclusive us areas

Garage Number/s:	>	
Parking Bay Number/s:	>	
Other (Specific):	>	

4] COMMENCEMENT AND EXPIRY DATES

This lease commences on:	(yyyy/mm/dd)	
and shall continue in force until:	(yyyy/mm/dd)	
Lease type:		Fixed-term lease in terms of section 14 of the consumer protection act

5] THE DEPOSIT

Deposit amount	>	
Date by which deposit must have been paid	(yyyy/mm/dd)	

6] THE MONTHLY RENTAL

The Tenant must pay the Monthly Rental to the Landlord in advance and in full,

on or before (day of every month):	>	
The monthly rental amount payable is:	>	
Rental escalation after expiry date & upon renewal / continuation of the lease:	>	
Party responsibe for payment of DSTV:	>	
Party responsibe for payment of Internet / Data:	>	
Party responsibe for payment of Electricty:	>	
Party responsibe for payment of Gas:	>	
Party responsibe for payment of Water Usage:	>	

Party responsibe for payment of Municpal Taxes:	>	
Party responsibe for payment of Body Corporate Levies:	>	

7] THE MAXIMUM NUMBER OF PERSONS TO RESIDE IN THE PREMISES

Per bedroom:	>	
Staff Quarters:	>	
Pets allowed:	>	No - not without express permission in writing

8] THE LANDLORDS BANKING DETAILS:

Account Name:	>	
Account Number:	>	
Account Type:	>	
Bank:	>	
Branch Code:	>	
Deposit Reference to be used:	>	

*The Tenant must attach a copy of the Tenant's identity document and marriage certificate to this lease, if Tenant is an individual.

1.0 THE PREMISES LEASED

The landlord lets to the tenant who hires the premises specified in clause 3 of The Schedule ("the Premises") from the Landlord, together with all fixed improvements thereon.

2.0 DURATION

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3.0 EARLY-CANCELLATION PENALTY

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4.0 OCCUPATION TO BE TAKEN ON THE COMMENCEMENT DATE

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5.0 INSPECTION OF PREMISES BEFORE OCCUPATION

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8.0 MONTHLY RENTAL

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9.0 WATER, ELECTRICITY, INTERNET AND TELEPHONE

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10.0 RATES AND LEVIES

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11.0 MANNER IN WHICH PREMISES MAY BE USED

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12.0 NO FIRE HAZARDS OR OTHER DANGERS

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13.0 PREMISES TO BE KEPT CLEAN

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14.0 TENANT NOT TO MAKE ALTERATIONS OR ADDITIONS

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15.0 TENANT NOT TO CAUSE DISTURBANCE OR BREAK LAWS

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16.0 PETS

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17.0 RULES

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18.0 MAINTENANCE OF AND DAMAGE TO THE PREMISES

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19.0 LANDLORD'S LIABILITY

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20.0 TERMINATION OF LEASE IF PREMISES ARE DESTROYED

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21.0 REDUCTION OF MONTHLY RENTAL IF PREMISES ARE PARTIALLY DESTROYED

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22.0 VALUE ADDED TAX

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23.0 PERSONS FOR WHOM TENANT IS RESPONSIBLE

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24.0 INSURANCE

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25.0 CESSION, SUB-LETTING AND PARTING WITH OCCUPATION OF THE PREMISES

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26.0 NO COMPENSATION FOR IMPROVEMENTS

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27.0 LANDLORD'S ACCESS TO PREMISES

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28.0 CANCELLATION

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29.0 LIEN OVER TENANT'S GOODS

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30.0 HOLDING OVER

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ANNEXURE "A"

LIST OF DEFECTS

ROOM &/OR ITEM	CONDITION BEFORE OCCUPATION	MOVE-OUT CONDITION

*All items are deemed to be in a good condition unless otherwise noted above
*After moving in the tenant has 7 days in which to report & highlight damages / defects that may not have been picked up
*The inspection report is merely for the purpose of record-keeping and not intended as a list for the landlord to make repairs

The tenant hereby confirms that the property was handed over to the tenant in a clean state? ☐ yes / no

TENANT SIGNATURE _____ OCCUPATION DATE: _____

TENANT SIGNATURE _____ VACATION DATE: _____

ANNEXURE "B"

INSPECTION LIST / INVENTORY LIST

METER READING	AT START	AT END
Gas		
Electricity		
Water		

The following Items / Loose fittings / Furinishings / Keys are provided at time of commencement of occupation

ROOM / ITEM	CONDITION (Good / fair / Poor)	PROVIDED AT START (Yes / No)	RETURNED AT END (Yes / No)
2 Sets of house keys (1nr Security Gate + 1nr Front Door)			
2 nr Remotes for motor gate			
2 nr access discs for pedestrian gate			
2 nr keys for post box			

NOTE: List each room and stipulate the key reference & number of keys

TENANT SIGNATURE/S _____ OCCUPATION DATE: _____

TENANT SIGNATURE/S _____ VACATION DATE: _____

ANNEXURE "C"

BODY CORPORATE, SHARE BLOCK OR OTHER RULES

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