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AFFIDAVIT OF UNEMPLOYMENT/NON-EMPLOYMENT

Applicant/Resident Name: _____ Unit _____
 Social Security # _____
 Property Name: _____

1. I reside and/or have made application to rent an apartment at _____

2. Check (a), (b) or (c) as applicable:

(a) I am not presently employed, however, I am currently receiving unemployment benefits (verification attached) in the amount of \$ _____ per week. *Unemployment benefits must be annualized and included in anticipated gross annual income.

(b) I am not presently employed, but will begin an employment starting on the date of _____ at \$ _____ per _____.

(c) I am not presently employed and do not anticipate becoming employed within the next twelve (12) months. Reason for non-employment: (retired, disabled/handicapped, full-time student, full-time mother/parenting teacher, or other _____).

3. Based on my past work experience, skills and income history as reflected in my income tax return for the most recent tax year (copy attached) and with adjustments to reflect circumstances anticipated within the next twelve (12) months, I expect to earn \$ _____ per year when I become employed.

Under penalty of perjury, I certify that the information presented in this certification is true and accurate to the best of my knowledge. I further understand that providing false representations herein constitutes an act of fraud. False, misleading or incomplete information may result in the termination of lease agreement or denial of rental application.

APPLICANT / RESIDENT _____ DATE _____

NOTE: _____

IN THE MATTER HELD BEFORE THE CCMA OF THE GAUTENG REGION, HELD IN CENTURION

Case number GAJB111-11

Between

EMPLOYEE

Applicant

And

EMPLOYER PTY LTD

Respondent

CONFIRMATIONARY AFFIDAVIT IN SUPPORT OF A RECISSION APPLICATION

I, *John Employee* hereby declare under oath as follows:

I hold the position of *Senior Technician* with the Respondent.

I read the affidavit of *Name of main deponent*, supporting the application for rescission of the award of Commissioner *Name Commissioner of 12 July 2013*. I confirm the contents thereof as true and correct in so far as it relates to me and *Employer Pty Ltd*

SIGNED ON THIS 12th DAY of August 2013 in Pretoria

John Employee

AFFIDAVIT OF HEIRSHIP

UNIT _____
 LEGAL DESCRIPTION _____

(Decedent)

STATE OF _____
 COUNTY/PARISH OF _____

_____ whose address is _____

heretofore referred to as "Affiant," being of lawful age and being duly sworn, upon oath deposes and says that (s/he was well acquainted with _____, heretofore referred to as "the Decedent," and that the answers and statements given in the following questionnaire are based upon Affiant's personal knowledge and are true and correct.

- How long did you know the Decedent? _____
- What was your relationship to the Decedent? _____
- The Decedent's residence was at _____
 The decedent died on _____ at _____.

4. Did the Decedent leave a will? _____ If the Decedent did leave a will, please attach copy of same hereto.

5. Have any proceedings been commenced with respect to the Decedent's estate? _____ If so, complete the following sentence to the best of your knowledge: Proceedings were commenced in _____ County, State of _____, and the name and address of the executor or administrator is _____.

6. Are there any debts still owing by the Decedent's estate and if so, will the size of the estate be sufficient in your opinion to pay such debts? _____

7. Have all Federal and State inheritance taxes been paid? (If none due, so state.) _____

8. Was the interest in the above described property community or separate? _____

9. Was the property of the decedent in the legal description above their homestead? _____

10. Give the names of all spouses of the decedent and their address or date of death/divorce: _____

NAME OF SPOUSE	DATE OF MARRIAGE	CURRENT ADDRESS OR DATE OF DEATH/DIVORCE



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