



Completed forms must be emailed to:  
ema@csos.org.za

## APPOINTMENT OF AN EXECUTIVE MANAGING AGENT (EMA 1 FORM)

**CSOS Registration Number**

Sectional Titles Schemes Management Regulations- 28 (1)-(2)	
Scheme Details:	
Name of Scheme:	<i>(first number, if more than one)</i>
Sectional Scheme (Number/Year):	
Local Municipality Name:	

### To: Community Schemes Ombud Service

We, the undersigned trustees and (where applicable) members of the body corporate of the above scheme give notice that, in accordance with the requirements of the Sectional Titles Schemes Management Act and its Regulations the body corporate obtained a special resolution and/or members entitled to 25 percent of the total quotas of all sections set out in the schedule attached to this notice and signed by us for identification.

Date of resolution:  (to be inserted before signature)

**To be signed by trustees and/or members (at least 25% of total quotas (members) who are making the application):**

### Details of person making this application:

**Please fill in block letters**

Full Names:   
 Surname:   
 Tel No: (home/work):  Cell Phone:   
 Email:

Full Names:   
 Surname:   
 Tel No: (home/work):  Cell Phone:   
 Email:

Full Names:   
 Surname:   
 Tel No: (home/work):  Cell Phone:   
 Email:

### Details of the application:

**Please legibly set out all the facts which you consider having bearing on this application, including dates, places and persons involved.**

## Additional Information:

## Supporting Documentation

Please tick one or more of the boxes

I have supporting documentation or other evidence to supply with my application:

- A copy of Scheme Governance documentation if relevant to the application
- A copy of Sectional Title / Homeowners Association Plan
- A copy of the Title Deed
- A copy of the participation quota
- A copy of minutes of the special resolution
- Any correspondence with the trustees or managing agent relevant to the application
- Any other relevant information (please specify)
- I do not have supporting documentation

## Declaration and signature of applicant:

I declare that the above information is true and correct to the best of my knowledge. I agree that the information I have given in this form may be used or disclosed to process and resolve this application.

Signature:

/  /   
(dd/mm/yy)