



UMZIMVUBU

813 Main Street, KwaBhaca  
Private Bag x 9020, KwaBhaca, 5090

OFFICE OF THE SPEAKER

T. 039 255 0166 F. 039 255 0167 E. www.umzimvubu.gov.za

To BEAUFORT WEST

DATE: 19.08.24

DEAR SIR/MADAM

CONFIRMATION LETTER

I hereby confirm that

Surname JAN Name(s) NGOOSILE

ID No/Date of birth 0406145662087

Is a resident of Ward 27 under the jurisdiction of Umzimvubu Local Municipality.

She/He is residing at the following address MBODLENI LOC EMPENOLANA  
Mrs FRENK  
5090

Yours faithfully,

S.FAYE.....(WARD COUNCILLOR)  
CLLR. 063 750 5315

Umzimvubu Local Municipality  
Cllr. S. Faye  
2024-08-19  
NOT FOR SALE  
Ward 27  
Signature: [Signature]