



CONVEYANCING EXAM PREPARATION

Durban 1/2009

This workshop is primarily aimed at preparing the candidate for the Conveyancing Exam of 06 May 2009. If you are interested please let us have your completed response form back by post, fax or e-mail to reach us by 12 noon on Fri 17 April.

DATES & TIMES – 17H00 – 21H00
28, 29 & 30 April 2009

PRESENTER/S:
- John Christie – Practising conveyancer
and an experienced lecturer

Venue
Venue to be announced to registered candidates.

REGISTRATION FEE R320 p/p

PROGRAMME
DAY 1 – HOW TO APPROACH STUDYING FOR THE EXAM
exam tips
ordinary transfers
deeds of transfer
power of attorney
servitudes
description of persons and property

DAY 2 – SECTIONAL TITLES
sectional titles schemes
bonds, bond related questions
general questions
DAY 3 - certificate of title
consolidations
transfer duty and VAT
general questions

PRE-REQUIREMENTS: CANDIDATES MUST BE IN POSSESSION OF THE FOLLOWING:

- Deeds Registries Act and regulations (Essential)
 - Alienation of Land Act (Essential)
 - Relevant sections of other Acts as set out in the 2009 Syllabus (preferably)
 - Jones (even outdated) Essential.
 - Chief Registrars Circulars and Conference resolutions (Butterworth's loose-leaf binder) recommended
 - Allen West's Practitioners guide (recommended)
 - Conveyancing Practice Guide – 3RD Edition – J.O. Christie (Recommended)
 - Transfer Duty Act (Essential)
 - Sectional Titles Act and regulations (Essential)
 - Question papers (this will be supplied to registered candidates)
- We stress that without these you will lack tools required for effective preparation and you will not derive the full value of this seminar

**Registration: CONVEY EXAM
PREPARATION**
DURBAN 1/2009

Post or fax the completed registration form together with payment/proof of payment to: PO Box 27169, Sunnyside, 0132 /Docex 227, Pretoria; Fax: (012) 341-1339 or e-mail to: dudu@lssalead.org.za or amanda@lssalead.org.za.

Amanda Kibido or Dudu Khukhama
Tel: (012) 441-4600

Please complete a separate registration form for each delegate

Surname		First name:		Title:	
ID number:		Gender:		Race (Optional):	
Firm:		DX address:			
Postal address:					
Tel: ()		Fax: ()		Cell:	
Payment by credit card		e-mail:			
Card type: MasterCard <input type="checkbox"/> Visa <input type="checkbox"/> Diners Club <input type="checkbox"/>					
Expiry date:		Card holder's name:			
Card Number:					
Signature:		Date:		Amount: R	

Payment by cheque (Cheques must be made payable to Law Society of SA)
Amount of accompanying cheque: R