



water & sanitation

Department:
Water and Sanitation
REPUBLIC OF SOUTH AFRICA

Licensing

Section 41(1)(a) of the National Water Act APPLICATION FOR WATER USE LICENCE

Mark the applicable option(s) with an X and/or complete details where applicable/available

1.	GENERAL INFORMATION			
1.1	Do you have an authorization from the Department of Water & Sanitation in the property in respect of this application? (Issued in terms of the National Water Act (Act No. 36 of 1998).	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
	Licence number:			
	Register Number			
2.	APPLICANT DETAILS			
2.1	Applicant Type (mark only one block with X)			
	<input type="checkbox"/> Individual (complete 2.2)	<input type="checkbox"/> Provincial Department (complete 2.5)		
	<input checked="" type="checkbox"/> Company, business, partnership or Community (complete 2.3)	<input type="checkbox"/> Water Services Provider or Water Services Authority (complete 2.6)		
	<input type="checkbox"/> National Department (complete 2.4)	<input type="checkbox"/> Water User Association (complete 2.7)		
2.2	If the applicant is an individual			
2.2.1	Title	Surname	Initials	
2.2.2	South African ID (if holder of South African Id) alternatively Passport Number:			
	ID Number or Passport Number			
	Passport Expiry Date (ccyyymmdd)			
	Passport Country Of Issue			
2.3	If the applicant is a company, business, partnership or community:			
2.3.1	Name of company, business, partnership or community:			
	THE SOUTH AFRICAN NATIONAL ROADS AGENCY SOC LIMITED (SANRAL)			
2.3.2	Business Enterprise Registration Number	1 9 9 8 9 5 8 4 / 3 0		
2.3.3	Date Established (ccyyymmdd)	1 9 9 8 0 5 1 9		
2.3.4	Country Where Established	SOUTH AFRICA		
2.4	If the applicant is a National Department:			

2.4.1	National Department Name:	
2.5	If the applicant is a Provincial Department:	
2.5.1	Province:	
2.5.2	Provincial Department Name:	
2.6	If the applicant is a Water Services Provider (WSP) or Water Services Authority (WSA):	
2.6.1	Name of WSP or WSA:	
2.7	If the applicant is a Water User Association (WUA):	
2.7.1	Name of WUA:	
2.8	How many people will benefit from the acquisition of this water use License?	This cannot be quantified at this stage for a project of this nature. This is best answered by realizing that every person travelling on these roads will benefit.
2.8.1	Describe the equity & gender status of the prospective beneficiaries:	
	Equity/Status	Gender
	(Mark the applicable option(s) with an X and specify the number)	
		Total Number
		Total Number
		Total Number
	<input checked="" type="checkbox"/> Black	<input checked="" type="checkbox"/> Male
	<input checked="" type="checkbox"/> Coloured	<input checked="" type="checkbox"/> Male
	<input checked="" type="checkbox"/> Indian	<input checked="" type="checkbox"/> Male
	<input checked="" type="checkbox"/> White	<input checked="" type="checkbox"/> Male
	<input checked="" type="checkbox"/> Youth	<input checked="" type="checkbox"/> Male
2.8.2	Specify the Broad Based Black Economic Empowerment (BBBEE) Status	
	(Mark the applicable option(s) with an X)	
	<input type="checkbox"/> Historically Disadvantaged Individual (HDI)	
	<input type="checkbox"/> Historically Advantaged Individual (HAI)	
	<input checked="" type="checkbox"/> Black Economic Empowerment (BEE) Compliant	
3. WATER USE DETAILS		
3.1	Name of water resource	PLEASE REFER TO THE COVERING LETTER - WATER USES OF COVER LETTER - TABLE 4
3.2	Type of water source (mark only one with X)	<input checked="" type="checkbox"/> River / stream <input type="checkbox"/> Spring / Eye <input type="checkbox"/> Groundwater <input type="checkbox"/> Dam <input checked="" type="checkbox"/> Wetland <input type="checkbox"/> Lake <input type="checkbox"/> GWS (scheme) <input type="checkbox"/> Estuary If water source is government water scheme, give the name:
3.3	Coordinates in respect to Water Use There are 28 water uses and all have their own co ordinates - PLEASE REFER TO COVER LETTER - WATER USES - TABLE 4	
	S ° ' " or S ° ' " or S ° ' " "	
	E ° ' " or E ° ' " or E ° ' " "	
	Datum type	<input type="checkbox"/> Cape (Modified Clarke 1880) <input checked="" type="checkbox"/> GWS-84

3.4	Quaternary Drainage Region	U 6 0 F	U 6 0 C	U 2 0 M		
3.5	Select the Applicable Water Management Area					
	01 Limpopo	<input type="checkbox"/>	05 Vaal	<input type="checkbox"/>	09 Berg-Olifants	
	02 Olifants	<input type="checkbox"/>	06 Orange	<input checked="" type="checkbox"/>	Umgeni	
	03 Inkomati-Usuthu	<input type="checkbox"/>	07 Mzimvubu-Tsitsikamma			
	04 Pongola-Umzimkulu	<input type="checkbox"/>	08 Breede-Gouritz			
3.6	Description of Activities In Relation to the Water Use Application (for what purpose):					
	<p>The project deals with 2 areas which are related to water uses these are listed below:</p> <p>1. The major interchanges to be upgraded are:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Solomon Mahlangu (N2/M7). <input type="checkbox"/> EB Cloete (N2/N3). <input type="checkbox"/> Westville Spine Road (N3/St James/Harry Gwala). <input type="checkbox"/> Paradise Valley (N3/M13). <p>2. The construction of two temporary access roads to get to the areas beneath the Westville and Paradise Valley Viaducts.</p> <ul style="list-style-type: none"> <input type="checkbox"/> Proposed Westville Viaduct access road (sited near the residential area of Chesterville on the south side of the N3). <input type="checkbox"/> Proposed Paradise Valley Viaduct access road (sited within the Paradise Valley Nature Reserve). 					
3.7	Select the applicable Water Use (WU) sector(s) – Purpose of the WU					
	<input type="checkbox"/> Agriculture: Aquaculture	<input type="checkbox"/> Power Generation	<input type="checkbox"/> Commercial Forestry			
	<input type="checkbox"/> Agriculture: Irrigation	<input type="checkbox"/> Recreation	<input type="checkbox"/> Water Supply Service			
	<input type="checkbox"/> Agriculture: Watering Livestock	<input checked="" type="checkbox"/> Development	<input type="checkbox"/> Industrial			
	<input type="checkbox"/> Sanitation	<input type="checkbox"/> Mining	<input type="checkbox"/> Other:			
	If Other is selected, Please Specify:					
DECLARATION BY APPLICANT OR WATER USER						
Delete the words that are not applicable <u>DUMISANI MOSES NKABINDE</u> (FULL NAME(S)) hereby declare that the information provided by me in this application form is, to the best of my knowledge, true and correct.						

	Signature	Date (ccyymmdd)	Thumbprint (only if requested)
	<input type="text"/>	1 2 0 4 2 0 1 9	<input type="text"/>

4. PROPERTY WHERE WATER USE(S) WILL OCCUR

4.1	Name of Property where water use takes place (farm, stand or community): Description as per the Deeds Act if applicable, or Name of agricultural holding, farm, township, town or city. In the event of multiple properties and water uses, please only list one considered to be the main property. The rest of the property details shall be submitted with the water use technical report.
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Starting Points of M7, N2 and N3 where water uses occur	End Points of M7, N2 and N3 where water uses occur
<p>M7 Sites : M7-01-01 Location: M7 Property No.: 513 Owner: Ethekewini Municipality Of KwaZulu-Natal Title Deeds No.: T16788/1976 Surveyor General Cadastral Code: N0FT00180000051300335 Portion of Property: 335 Name of Water Source: M7-1-R01</p>	<p>M7 Sites : M7-01-05 Location: M7 Property No.: 513 Owner: Ethekewini Municipality Title Deeds No.: T17318/1971 Surveyor General Cadastral Code: N0FT00180000051300000 Portion of Property: 0 Name of Water Source: N2-1-R02</p>
<p>N2 Sites : N2-01-01 Location: N2 Property No.: 895 Owner: SANRAL Surveyor General Cadastral Code: N0FT00450000007600895 Title Deeds No.: T35821/2002 Portion of Property: 76 Name of Water Source: N2-1-R02a Road Reserve</p>	<p>N2 Sites : N2-01-17 Location: N2 Property No.: 4089 Owner: SANRAL Surveyor General Cadastral Code: N0FT00450000015300014 Title Deeds No.: T50527/2008 Portion of Property: 3 Name of Water Source: N2-1-R10</p>

<p>N3 Sites : N3-01-17 Location: N3 Property No.: 720 Owner: SANRAL Surveyor General Cadastral Code: N0FT00200000072000001 Portion of Property: 1 Name of Water Source: N3-1-R04</p>	<p>N3 Sites : N3-01-23 Road Reserve Location: N3 Property No.: 3061 Owner: Ethekwini Surveyor General Cadastral Code: N0FT02600000306100001 Title Deeds No.: T4895/2010 Portion of Property: 1 Name of Water Source: Umbilo River Culvert</p>
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Deeds Registration Date (ccyymmdd):									
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4.2	Property Type (mark only one with an X)
	<input type="checkbox"/> Agricultural Holding <input type="checkbox"/> Exclusive Use Areas (EUA) <input type="checkbox"/> Sectional Scheme (To Obtain EUA) <input type="checkbox"/> Sectional Scheme Unit <input type="checkbox"/> Unspecified <input checked="" type="checkbox"/> Erf <input type="checkbox"/> Farm <input type="checkbox"/> Sectional Scheme (to obtain units) <input type="checkbox"/> Township <input type="checkbox"/> Unsurveyed

4.3	If the property type is unsurveyed, complete the following:								
	a) Surname and initials of leader of village, community or tribal authority								
	<table border="1" style="width: 100%;"> <tr> <td style="width: 60%;"></td> <td style="width: 10%; text-align: center;">Initials</td> <td style="width: 30%; text-align: center;"> </td> <td style="width: 10%; text-align: center;"> </td> <td style="width: 10%; text-align: center;"> </td> <td style="width: 10%; text-align: center;"> </td> <td style="width: 10%; text-align: center;"> </td> <td style="width: 10%; text-align: center;"> </td> </tr> </table>		Initials						
	Initials								
	b) Local Authority								
	&/or								
	c) Magisterial District								
	&/or								
	d) Tribal Authority/Council								

4.4	If the property type is not equal to unsurveyed, complete the following:	
	a) Deeds Office	
	b) Registration Division	
	c) Property No (i.e. Farm No./Erf No./ Holding Area No./ Scheme No.)	
	d) Portion of Property	
	e) Title Deed Number	

5. DETAILS OF PROPERTY OWNER											
5.1 Nature of property owner (mark only one block with X)											
<input type="checkbox"/> Individual (complete 5.2)				<input checked="" type="checkbox"/> Provincial Department (complete 5.5)							
<input type="checkbox"/> Company, business, partnership or community (complete 5.3)				<input type="checkbox"/> Water Services Provider or Water Services Authority (complete 5.6)							
<input type="checkbox"/> National Department (complete 5.4)				<input type="checkbox"/> Water User Association (complete 5.7)							
5.2 If property owner is an individual											
5.2.1 Surname			Maiden Name								
5.2.2 Initials			Title			Position or official status					
5.2.3 Marital Status (mark only one):											
<input type="checkbox"/> Married In Community Of Property			<input type="checkbox"/> Married Out Of Community Of Property								
<input type="checkbox"/> Unmarried											
5.3 If holder of South African ID:											
5.3.1 ID Number											
5.3.2 If not holder of South African ID:											
5.3.2.1 Passport No.											
5.3.2.2 Expiry Date (ccyymmdd)											
5.3.2.3 Country of issue											
5.4 If the property owner is a company, business, partnership or community:											
5.4.1 Name of company, business, partnership or community:											
THE SOUTH AFRICAN NATIONAL ROADS AGENCY SOC LIMITED (SANRAL) AND ETHEKWINI MUNICIPALITY											
5.4.2 Trading name if different from name of company, business, partnership or community:											
5.4.3 Type of Enterprise (mark only one with an X)											
<input type="checkbox"/> 06 Public Company (Ltd)				<input type="checkbox"/> 07 Private Company (Pty) Ltd				<input type="checkbox"/> 08 Article 21 (Association inc under Section 21)			
<input type="checkbox"/> 09 Limited By Guarantee				<input type="checkbox"/> 10 External Company				<input type="checkbox"/> 11 External Company under Article 21			
<input type="checkbox"/> 20 Transvaal Ordinance				<input type="checkbox"/> 21 Incorporated (Inc)				<input type="checkbox"/> 22 Unlimited			
<input type="checkbox"/> 23 Close Corporation (CC)				<input checked="" type="checkbox"/> Parastatal				<input type="checkbox"/> Trust			
<input type="checkbox"/> Other [i.e. Non-CIPRO Company Types (e.g. Churches, Schools, Community Groups, etc.) excluding Trust & Parastatal]											
5.4.4 Business Registration Number											
1 9 9 8 9 5 8 4 / 3 0											
5.4.5 Date Established (ccyymmdd)											
1 9 9 8 0 5 1 9											
5.4.6 Country Where Established											
SOUTH AFRICA											
5.5 If the property owner is a National Department:											
5.5.1 National Department Name:											

5.6 If the property owner is a Provincial Department:			
5.6.1 Province:		KWAZULU-NATAL	
5.6.2 Provincial Department Name:		Ethekwini Municipality	
5.7 If the property owner is a Water Services Provider or Water Services Authority:			
5.7.1 Name of WSP or WSA:			
5.8 If the property owner is a Water User Association:			
5.8.1 Name of WUA:			
5.9 Postal Address:			
PO BOX 100410			
SCOTTSVILLE			
KWAZULU-NATAL		Postal Code	3 2 0 9
5.10 Street Address (only if different from postal address):			
58 VAN ECK PLACE			
MKONDENI			
PIETERMARITZBURG		Postal Code	3 2 0 1
5.11 Contact Telephone Number During Office Hours			
Area/c ell code		Number	Ext
	0 3 3	3 9 2 8 1 0 0	
Alternative contact number			
Area/c ell code		Number	Ext
	0 8 3	2 8 3 6 0 6 4	
5.12 DECLARATION BY PROPERTY OWNER			
5.12.1 Position or official status: (Please specify if Property Owner or Lessee): (If not the property owner, please submit letter of authority to sign on behalf of the property owner)			
I declare that the applicant defined in this application has lawful access to the property and carry out the water use activity or activities related to this application.			
	Signature	Date (ccyymmdd)	Thumbprint (only if requested)

6.	TERMS & CONDITIONS
6.1	<p>In this License Application Form, unless the context clearly shows a different intention, the words defined below will have the meanings given to them, and similar words or expressions will have corresponding similar meanings:-</p> <ol style="list-style-type: none"> 1. Act means the National Water Act, 1998(Act No 36 of 1998). 2. Property means the property where the water use will take place
6.2.	<p>The Department of Water and Sanitation has a zero tolerance approach to fraud, corruption and any other irregular conduct. I make a commitment to report any potential corrupt activity by any employee of the Department of Water and Sanitation to the National Anti-Corruption Hotline: 0800 701 701, Fax Number: 0800 204 965 and Postal Address:</p> <p>P O Box 582, Umhlanga Rocks, Kwazulu-Natal, 432.</p>
6.3	<p>I undertake not to fail to provide access to any books, accounts, documents or assets when required to do so under this Act as provided for in section 151(1)(b) of the National Water Act, 1998 (Act No 36 of 1998).</p>
6.4	<p>I undertake not to use water otherwise than as permitted under this Act as provided for in section 151(1)(a) of the National Water Act, 1998 (Act No 36 of 1998).</p>
6.5	<p>I undertake not to fail or refuse to give data or information, or give false or misleading data or information when required to give information under this Act as provided for in section 151(1)(f) of the National Water Act, 1998 (Act No 36 of 1998).</p>

I declare that agree with the Terms and conditions of this application:			
	Signature	Date (ccyymmdd)	Thumbprint (only if requested)

7. THIS SECTION IS RESERVED FOR OFFICE USE ONLY

7.1 LIST OF SUPPORTING DOCUMENTATION RECEIVED

Mark with an X if these documents have been submitted with this application

	Certified Copy of Identity Document (of the Representative and/or an Applicant)	<input type="checkbox"/> There will be a form attached from SANRAL as no Certified ID copy is presented
	Certified Copy of Business Registration Certificate (if applicant is a Company)	<input checked="" type="checkbox"/>
	Certified Copy of Title Deeds Document and/or Permission to Occupy	<input type="checkbox"/> SANRAL is exempt from this
	Certified Copy of Letter of Authority/Power of Attorney to sign on behalf of the Prospective Water User	<input checked="" type="checkbox"/>
	Proof of Payment of Water Licensing Fee	<input type="checkbox"/> Need to get details. DWS official has indicated that the fee can be paid on the 13 th floor
	Certified Copy of BBBEE certificate	<input checked="" type="checkbox"/>
	Master Layout Plan (optional)	<input checked="" type="checkbox"/>

7.2 WATER USE LICENSE QUALITY MANAGMENT ASSESSMENT

File number (i.e. Office Hardcopy Register File No)	
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Received by:	
Surname	
Initials	
Position / Rank	
Signature	Date (ccyymmdd)

Date stamp of receiving office

