

B. PROPERTY DESCRIPTION:	
Name of property: OUTFALL	Title Deed No. T21801/1985
Erf/Lot/Farm No: 2414 GT	GPS Co-ordinates -28.307 889 30.292 403
Street Address:	
Local Municipality DUANDEE	District Municipality UMZINYATHI
Traditional Authority Area	
Current zoning	Present use UNCATEGORISED

C. DEVELOPMENT TYPE:					
1. DECISION REQUIRED IN TERMS OF SECTION s41(1) (tick the appropriate box/boxes)					
Linear Development/Barrier exceeding 300m in length e.g. road, pipe/power line, trench, canal or wall					
Other similar form of linear development/barrier exceeding 300m in length					
Construction of a bridge or similar structure exceeding 50m in length					
Any development exceeding 5 000m ² in extent or any other category of development provided for in regulations	<input checked="" type="checkbox"/>				
Any other activity which would change the character of an area of land or water exceeding 10 000m ² in extent					
Any development involving three or more existing erven or sub-divisions thereof					
Any other activity involving three or more existing erven or sub-divisions thereof	<input checked="" type="checkbox"/>				
Any development or other activity involving three or more existing erven or sub-divisions thereof which have been consolidated within the past 5 years					
Any development or other activity the costs of which will exceed a sum set out in the regulations					
Re-zoning of a site exceeding 10 000m ²					
2. DEVELOPMENTS THAT TRIGGER OTHER LEGISLATION (NEMA, ENVIRONMENTAL CONSERVATION ACT, MINERALS ACT, ETC)					
RESPONSE REQUIRED IN TERMS OF s41(8) (tick the appropriate box/boxes)					
BID	<input checked="" type="checkbox"/>	BAR	<input checked="" type="checkbox"/>	EIA	<input checked="" type="checkbox"/>
EMP	<input checked="" type="checkbox"/>	WULA		MPRDA	<input checked="" type="checkbox"/>
OTHER (describe)					

D. IMPACT ON HERITAGE RESOURCES:	
To your knowledge would the Development impact on any known heritage resources protected in terms of the KZN Amafa and Research Institute Act (5/2018), or is the development located in the vicinity of any of the above? If yes, the Heritage Practitioner must create a site on sahris pinpointing the position of the heritage resource/s discovered. (tick the appropriate box/boxes below)	
s37 - Structures or part thereof that can reasonably be expected to be over 60 years of age	
s38 - Graves of victims of conflict,	
s39 - Informal and private burial grounds (traditional graves or graves outside of a formal cemetery e.g. a farm cemetery that are over 60 years of age).	

s40 - Battlefield sites , archaeological sites, rock art sites, palaeontological sites, historic fortifications, ruins over 100 years old, meteorite or meteorite impact sites and any objects or ecofacts associated therewith	
s42 - Protected areas (is the site within a known protected area?)	
s43 - Specially protected heritage resources are listed in Schedule of Heritage Resources	
s44 - Heritage Landmarks including the site on which they are situated	
s45 - Provincial Landmarks and the site on which they are situated (state owned)	
s46 - Graves of members of the Royal Family listed in Schedule of Heritage Resources	
s47 - Battlefield site, public monument or memorial listed in the Schedule of Heritage Resources and any public monument defined in the NHRA and protected in terms of Section 37 of the NHRA, & Section 47 of the KZN Amafa and Research Institute Act (5/2018)	
s49 - Artefacts, or collections thereof on which Heritage Object status has been conferred	

E. CONTACT DETAILS

1. APPLICANT'S DETAILS (OWNER OF PROPERTY)	
NAME <u>KENNETH JOHN LEON</u>	
POSTAL ADDRESS _____	
_____ POST CODE _____	
TEL <u>084 518 6964</u>	FAX/EMAIL <u>ken.robinsonfarming@gmail.com</u>
DECLARATION BY OWNER	
I, _____ (full names of owner/person authorized to sign on behalf of the owner)	
undertake strictly to observe the terms, conditions, restrictions, by-laws and directions under which the KZN Amafa and Research Institute may issue the comment to me.)	
Signature _____	
Place _____ Date _____	

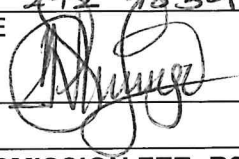
2. DELEGATED AUTHORITY (The name of the person authorized to act on behalf the applicant where the owner is a company, trust, or institution – Power or Attorney/proof of authorization to be attached)

NAME _____	
TEL _____	FAX/EMAIL _____

3. DEVELOPER'S DETAILS

NAME(Company/institution/individual) <u>THE ROYAL M COAL (PTY) LTD</u>	
POSTAL ADDRESS <u>P.O BOX 17133</u>	
<u>WITBANK</u> POST CODE <u>1818</u>	
TEL _____	FAX <u>086 519 7803</u>
CELL <u>073 441 0358/083 502 0801</u>	EMAIL <u>mathoko@gmail.com</u>
SIGNATURE <u>PP [Signature]</u>	DATE <u>04/03/2020</u>

4. CONSULTANT'S DETAILS

NAME(Company/institution/individual)	
SINGO CONSULTING (PTY) LTD	
POSTAL ADDRESS POSTNET SUITE 125, PRIVATE BAG X7214	
BEN FLEUR WITBANK	POST CODE 1036
TEL 013 692 0041	FAX 086 514 4103
CELL 078 272 7839	EMAIL kenneth@singoconsulting.co.za
SIGNATURE 	DATE 04/03/2020

F. SUBMISSION FEE: R800.00 (subject to annual increment on the 1 April)

The submission fee is payable to the **KZN Amafa and Research Institute** by bank deposit/internet banking (EFT) and proof of payment must be submitted with the application.

ACCOUNT DETAILS:

ABSA BANK: Branch: ULUNDI Bank Code: 630330
 Account in the name of **AMAFA AKWAZULU-NATALI**
 Account No. 40-5935-6024
 USE SAHRIS ID AS REFERENCE

G. PUBLIC PARTICIPATION: (Contact details of Interested and Affected Parties Consulted - written opinion to be attached to form and drawings to be signed by I & A P. See Guidelines)

Name _____
 Telephone _____ Fax _____

H. CHECKLIST OF DOCUMENTATION SUBMITTED

HARD COPY APPLICATION FORM (COMPLETED & SIGNED BY OWNER, DEVELOPER & CONSULTANT)	
APPLICATION FORM UPLOADED TO SAHRIS	
MOTIVATION	
SITE PHOTOGRAPHS/CASE IMAGES	
1:50 000 MAP & SATELLITE AERIAL VIEW	
KML FILE MAP	
SITE PLAN SHOWING ALL FEATURES & HERITAGE RESOURCES	
DEVELOPMENT PLAN SHOWING ALL FEATURES & HERITAGE RESOURCES SUPERIMPOSED THEREON	
PROOF OF PROFESSIONAL ACCREDITATION (e.g. copy of accreditation card/certificate)	
PROOF OF PUBLIC PARTICIPATION	
ENVIRONMENTAL IMPACT ASSESSMENT	
HERITAGE IMPACT ASSESSMENT	
CONSENT LETTER FROM THE OWNER	
LETTER OF APPOINTMENT OF CONSULTANT	
PROOF OF PAYMENT OF SUBMISSION FEE (EFT/BANK DEP/AMAFA CARD)	

B. PROPERTY DESCRIPTION:	
Name of property: OUTFALL	Title Deed No. T 62243/2004
Erf/Lot/Farm No: 2414 GT	GPS Co-ordinates - 28.309809 30.292423
Street Address:	
Local Municipality DUNDEE	District Municipality UMZINYATHI
Traditional Authority Area	
Current zoning	Present use UNCATEGORISED

C. DEVELOPMENT TYPE:					
1. DECISION REQUIRED IN TERMS OF SECTION s41(1) (tick the appropriate box/boxes)					
Linear Development/Barrier exceeding 300m in length e.g. road, pipe/power line, trench, canal or wall					
Other similar form of linear development/barrier exceeding 300m in length					
Construction of a bridge or similar structure exceeding 50m in length					
Any development exceeding 5 000m ² in extent or any other category of development provided for in regulations	<input checked="" type="checkbox"/>				
Any other activity which would change the character of an area of land or water exceeding 10 000m ² in extent					
Any development involving three or more existing erven or sub-divisions thereof					
Any other activity involving three or more existing erven or sub-divisions thereof	<input checked="" type="checkbox"/>				
Any development or other activity involving three or more existing erven or sub-divisions thereof which have been consolidated within the past 5 years					
Any development or other activity the costs of which will exceed a sum set out in the regulations					
Re-zoning of a site exceeding 10 000m ²					
2. DEVELOPMENTS THAT TRIGGER OTHER LEGISLATION (NEMA, ENVIRONMENTAL CONSERVATION ACT, MINERALS ACT, ETC)					
RESPONSE REQUIRED IN TERMS OF s41(8) (tick the appropriate box/boxes)					
BID	<input checked="" type="checkbox"/>	BAR	<input checked="" type="checkbox"/>	EIA	<input checked="" type="checkbox"/>
EMP	<input checked="" type="checkbox"/>	WULA		MPRDA	<input checked="" type="checkbox"/>
OTHER (describe)					

D. IMPACT ON HERITAGE RESOURCES:	
To your knowledge would the Development impact on any known heritage resources protected in terms of the KZN Amafa and Research Institute Act (5/2018), or is the development located in the vicinity of any of the above? If yes, the Heritage Practitioner must create a site on sahris pinpointing the position of the heritage resource/s discovered. (tick the appropriate box/boxes below)	
s37 - Structures or part thereof that can reasonably be expected to be over 60 years of age	
s38 - Graves of victims of conflict,	
s39 - Informal and private burial grounds (traditional graves or graves outside of a formal cemetery e.g. a farm cemetery that are over 60 years of age).	

s40 - Battlefield sites , archaeological sites, rock art sites, palaeontological sites, historic fortifications, ruins over 100 years old, meteorite or meteorite impact sites and any objects or ecofacts associated therewith	
s42 - Protected areas (is the site within a known protected area?)	
s43 - Specially protected heritage resources are listed in Schedule of Heritage Resources	
s44 - Heritage Landmarks including the site on which they are situated	
s45 - Provincial Landmarks and the site on which they are situated (state owned)	
s46 - Graves of members of the Royal Family listed in Schedule of Heritage Resources	
s47 - Battlefield site, public monument or memorial listed in the Schedule of Heritage Resources and any public monument defined in the NHRA and protected in terms of Section 37 of the NHRA, & Section 47 of the KZN Amafa and Research Institute Act (5/2018)	
s49 - Artefacts, or collections thereof on which Heritage Object status has been conferred	

E. CONTACT DETAILS

1. APPLICANT'S DETAILS (OWNER OF PROPERTY)	
NAME <u>ORG BURGER</u>	
POSTAL ADDRESS _____	
_____ POST CODE _____	
TEL <u>082 323 4298</u>	FAX/EMAIL <u>orgburger@gmail.com</u>
DECLARATION BY OWNER	
I, _____	
(full names of owner/person authorized to sign on behalf of the owner)	
undertake strictly to observe the terms, conditions, restrictions, by-laws and directions under which the KZN Amafa and Research Institute may issue the comment to me.)	
Signature _____	
Place _____ Date _____	

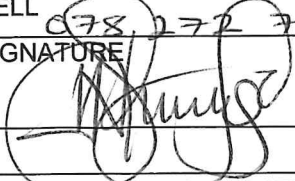
2. DELEGATED AUTHORITY (The name of the person authorized to act on behalf the applicant where the owner is a company, trust, or institution – Power or Attorney/proof of authorization to be attached)

NAME _____	
TEL _____	FAX/EMAIL _____

3. DEVELOPER'S DETAILS

NAME(Company/institution/individual) <u>THE ROYAL M COAL (PTY) LTD</u>	
POSTAL ADDRESS <u>P.O BOX 17133</u>	
<u>WITBANK</u> POST CODE <u>1818</u>	
TEL _____	FAX <u>086 519 7803</u>
CELL <u>073 441 0358 / 083 5020801</u>	EMAIL <u>mathekoga@gmail.com</u>
SIGNATURE <u>PP [Signature]</u>	DATE <u>04/03/2020</u>

4. CONSULTANT'S DETAILS

NAME(Company/institution/individual)	
SINGO CONSULTING (PTY) LTD	
POSTAL ADDRESS POSTNET SUITE 125, PRIVATE BAG X7214	
BEN, FLEUR, WITBANK	POST CODE 1036
TEL 013 692 0041	FAX 086 514 4103
CELL 078 272 7837	EMAIL Kenneth@singoconsulting.co.za
SIGNATURE 	DATE 04/03/2020

F. SUBMISSION FEE: R800.00 (subject to annual increment on the 1 April)

The submission fee is payable to the KZN Amafa and Research Institute by bank deposit/internet banking (EFT) and proof of payment must be submitted with the application.

ACCOUNT DETAILS:

ABSA BANK: Branch: ULUNDI Bank Code: 630330
 Account in the name of **AMAFI AKWAZULU-NATALI**
 Account No. 40-5935-6024
 USE SAHRIS ID AS REFERENCE

G. PUBLIC PARTICIPATION: (Contact details of Interested and Affected Parties Consulted - written opinion to be attached to form and drawings to be signed by I & A P. See Guidelines)

Name _____
 Telephone _____ Fax _____

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1:50 000 MAP & SATELLITE AERIAL VIEW	
KML FILE MAP	
SITE PLAN SHOWING ALL FEATURES & HERITAGE RESOURCES	
DEVELOPMENT PLAN SHOWING ALL FEATURES & HERITAGE RESOURCES SUPERIMPOSED THEREON	
PROOF OF PROFESSIONAL ACCREDITATION (e.g. copy of accreditation card/certificate)	
PROOF OF PUBLIC PARTICIPATION	
ENVIRONMENTAL IMPACT ASSESSMENT	
HERITAGE IMPACT ASSESSMENT	
CONSENT LETTER FROM THE OWNER	
LETTER OF APPOINTMENT OF CONSULTANT	
PROOF OF PAYMENT OF SUBMISSION FEE (EFT/BANK DEP/AMAFI CARD)	

B. PROPERTY DESCRIPTION:	
Name of property: <u>OUTFALL</u>	Title Deed No. <u>T30254/200E</u>
Erf/Lot/Farm No: <u>2414 GT</u>	GPS Co-ordinates <u>28.299239</u> <u>30.319114</u>
Street Address:	
Local Municipality <u>DUNDEE</u>	District Municipality <u>UMZINYATHI</u>
Traditional Authority Area	
Current zoning	Present use <u>UNCATEGORISED</u>

C. DEVELOPMENT TYPE:					
1. DECISION REQUIRED IN TERMS OF SECTION s41(1) (tick the appropriate box/boxes)					
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RESPONSE REQUIRED IN TERMS OF s41(8) (tick the appropriate box/boxes)					
BID	<input checked="" type="checkbox"/>	BAR	<input checked="" type="checkbox"/>	EIA	<input checked="" type="checkbox"/>
EMP	<input checked="" type="checkbox"/>	WULA		MPRDA	<input checked="" type="checkbox"/>
OTHER (describe)					

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E. CONTACT DETAILS

1. APPLICANT'S DETAILS (OWNER OF PROPERTY)	
NAME <u>BRUYNS PETRUS HENDRIK</u>	
POSTAL ADDRESS <u>P.O BOX 495</u>	
<u>DUNDEE</u>	POST CODE <u>3000</u>
TEL <u>083 776 6665</u>	FAX/EMAIL <u>woesie.3@gmail.com</u>
DECLARATION BY OWNER	
I, _____ (full names of owner/person authorized to sign on behalf of the owner)	
undertake strictly to observe the terms, conditions, restrictions, by-laws and directions under which the KZN Amafa and Research Institute may issue the comment to me.)	
Signature _____	
Place _____ Date _____	

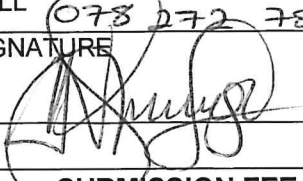
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NAME	
TEL	FAX/EMAIL

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POSTAL ADDRESS <u>P.O BOX 17133</u>	
<u>WITBANK</u>	POST CODE <u>1818</u>
TEL	FAX <u>086 519 7803</u>
CELL <u>073 441 0358/083 502 0801</u>	EMAIL <u>mathoko@gmail.com</u>
SIGNATURE <u>P/P [Signature]</u>	DATE <u>04/02/2020</u>

4. CONSULTANT'S DETAILS

NAME(Company/institution/individual) SINGO CONSULTING (PTY) LTD	
POSTAL ADDRESS POSTNET SUITE 125 PRIVATE BAG X 7214	
BEN FLEUR, WITBANK	POST CODE 1036
TEL 013 692 0041	FAX 086 514 4103
CELL 078 272 7839	EMAIL kenneth@singoconsulting.co.za
SIGNATURE 	DATE 04/03/2020

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PROOF OF PAYMENT OF SUBMISSION FEE (EFT/BANK DEP/AMAFI CARD)	