Appendix E

LANDOWNER AGREEMENTS



Department of Environment Affairs Working for Wetlands Programme

Wetlands Rehabilitation Activities Consent

Property Details

| Property Type: | PRIVATE PROPERTY | | | | |
|---|---|--|--|--|--|
| Registration Division: | WILLOWMORE | | | | |
| Farm Number: | | | | | |
| Portion Number: | | | | | |
| Farm Name: | DAM SE DRIF | | | | |
| Surveyor-General Key: | | | | | |
| Province: | Eastern Cape | | | | |
| Unique Wetland Number: | L81C – 06 Dam se Drif | | | | |
| | | | | | |
| | Owner Details | | | | |
| Owner Name: (Full Names/Full Registered Name) | Runé Janse van Rensburg | | | | |
| Person Type: | Company Close corporation Trust X Natural person | | | | |
| Registration/Identity Number: | 7401115087085 | | | | |
| | (Where applicable. For a trust, attach a copy of the latest letters of trusteeship issued by the Master of the High Court.) | | | | |
| Owner's chosen address for delivery of notices and | Postal Address: Damsedvif, Lulet 6452 Physical Address: Damsedvif Lulet 6452 | | | | |
| documents: | damsedrif@gmail.com damsedrif@gmail.com | | | | |
| | | | | | |

Project Name: Baviaanskloof wetlands project

I/We hereby consent to the Working for Wetlands Programme of the Department of Environmental Affairs and its appointed implementers undertaking the wetland rehabilitation activities listed in annexure "WFW 003A" attached hereto, for the project referred to above, subject to my/our approval of the relative Wetland Rehabilitation Plan, on the property described above of which I am the owner.

Al

| Signature Date 21/8/2015 | Name | Runé J. van Rensburg | Position | Eignaas |
|--------------------------------|-----------|----------------------|----------|-----------|
| | Signature | B.R.L.S | Date | 21/8/2015 |

| Please fax or post this form to: | With a copy to: |
|----------------------------------|--|
| | The Planning, Monitoring and Evaluation Manager Working for Wetlands, Dept. of Environmental Affairs, Private Bag X447, Pretoria, 0001 |



Department of Environment Affairs Working for Wetlands Programme

Wetlands Rehabilitation Activities Consent

| Property Details | | | | |
|------------------------|---|--|--|--|
| Property Type: | PRIVATE PROPERY | | | |
| Registration Division: | WILLOWMORE | | | |
| Farm Number: | RIETRIVIER 205 | | | |
| Portion Number: | RESTANT OF PORTION Z OF THE FARM RIETRIVIER 205 | | | |
| Farm Name: | RIETRIVIER | | | |
| Surveyor-General Key: | | | | |
| Province: | Eastern Cape | | | |
| Unique Wetland Number: | L81A - 01 Fan4 | | | |

| Owner Details | | | | |
|---|---|-------------|---------------------------------------|----------------|
| Owner Name: (Full Names/Full Registered Name) | DU PREEZ FAMILY TRUST | | | |
| Person Type: | Company Close | corporation | X Trust | Natural person |
| Registration/Identity Number: | TM 4754 (Where applicable. For a trust, attach a copy of the latest letters of trusteeship issued by the Master of the High Court.) | | | |
| Owner's chosen address for delivery of notices and documents: | Postal Address: POBOX 28302, SUNRINGE PARK, P.E. | | Physical Addres 65 LILLY SUNRIDG 6008 | |

| Project Name: | Baviaanskloof wetlands project | |
|----------------------|--------------------------------|--|
|----------------------|--------------------------------|--|

I/We hereby consent to the Working for Wetlands Programme of the Department of Environmental Affairs and its appointed implementers undertaking the wetland rehabilitation activities listed in annexure "WFW 003A" attached hereto, for the project referred to above, subject to my/our approval of the relative Wetland Rehabilitation Plan, on the property described above of which I am the owner.

| Name | GERHARD DU | PREEZ | Position | TRUSTEE |
|-----------|------------|-------|----------|----------------|
| Signature | | | Date | 24 AUGUST 2015 |
| | 14 | | | |

| Please fax or post this form to: | With a copy to: |
|----------------------------------|--|
| | The Planning, Monitoring and Evaluation Manager Working for Wetlands, Dept. of Environmental Affairs, Private Bag X447, Pretoria, 0001 |



Property Type:

Project Name:

Department of Environment Affairs Working for Wetlands Programme

Wetlands Rehabilitation Activities Consent

Property Details

PRIVATE PROPERTY

| Registration Division: | WILLOW | IMPRE | | |
|---|-------------------------------------|--|-------------------------------------|-----------------------|
| Farm Number: | WIDE OF | TIORE | | |
| Portion Number: | | | | |
| Farm Name: | SPITSKLO | oof | | |
| Surveyor-General Key: | | | = | 79. |
| Province: | Eastern Cape | | | |
| Unique Wetland Number: | L81B - 01 Spits | kloof | | |
| | | | | |
| | Own | er Details | * | 2 |
| Owner Name: (Full Names/Full Registered Name) | WILLIAM JOHANNES JANSE VAN RELSBERG | | | |
| Person Type: | Company | Close corporation | n Trust | Natural person |
| Registration/Identity Number: | (Where applicable | 5086 OS1 e. For a trust, attach a ster of the High Court.) | copy of the latest le | etters of trusteeship |
| Owner's chosen address for delivery of notices and documents: | Postal Address : | Vzuowene | Physical Address VERLORENRZ ICLOSE | s: wzcik, bavziams |

I/We hereby consent to the Working for Wetlands Programme of the Department of Environmental Affairs and its appointed implementers undertaking the wetland rehabilitation activities listed in annexure "WFW 003A" attached hereto, for the project referred to above, subject to my/our approval of the relative Wetland Rehabilitation Plan, on the property described above of which I am the owner.

Baviaanskloof wetlands project

diff-

| Name | W.I. JAWSE U PENSBURG | Position | Owned |
|-----------|-----------------------|----------|------------|
| Signature | Mensber | Date | 2015-08-21 |

| Please fax or post this form to: | With a copy to: |
|----------------------------------|--|
| | The Planning, Monitoring and Evaluation Manager Working for Wetlands, Dept. of Environmental Affairs, Private Bag X447, Pretoria, 0001 |
| XX XX CONTRACTOR XX XX | |



Department of Environment Affairs Working for Wetlands Programme

Wetlands Rehabilitation Activities Consent

| | Property Details | |
|--|---|---|
| Registration Division: Farm Number: Portion Number: Farm Name: Farm Name: | RIVATE JILLOWMORE DACHIMS KRAAL WEST NR. 0 223, DICHESEN | 10. T3900/1915, T1859.90 |
| Owner Name: (Full Names/Full Registered Name) Person Type: Registration/Identity Number: | Owner Details Company Close corporation Company Close corporation Company Close corporation TT 2272 / 2000 (Where applicable. For a trust, attach a consistence of the High Court.) | opy of the latest letters of trusteeship |
| Owner's chosen address for delivery of notices and documents: | Postal Address: RUS EN VREDE, P.K. LULET | Physical Address: RUS EN VREDE, P.K. LUILET BAVIAANSKLOOF |
| Project Name: | Baviaanskloof wetlands project | |

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| Name | Christian house | | | Position | Trustee | | |
|----------------------------------|-----------------|-----|--|----------|---------|---|------|
| Signature | Gen | ER. | J.K. | Date | 20 | 8 | 3015 |
| | | | | | | | |
| Please fax or post this form to: | | | With a copy to: | | | | |
| | | | The Planning, Monitoring and Evaluation Manager Working for Wetlands, Dept. of Environmental Affairs, Private Bag X447, Pretoria, 0001 | | | | |