

	(For official use only)
File Reference Number:	
NEAS Reference Number:	DEA/EIA/
Date Received:	

Application for authorisation in terms of the National Environmental Management Act, Act No. 107 of 1998, as amended and the Environmental Impact Assessment (EIA) Regulations, 2014, as amended (the Regulations)

PROJECT TITLE

Vaal River Solar 1 PV Facility near Orkney in the North West Province

Kindly note the following:

- 1. This form must always be used for applications that must be subjected to Basic Assessment or Scoping & Environmental Impact Reporting where this Department is the Competent Authority.
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- 3. A copy of this form containing original signatures must be appended to all Draft and Final Reports submitted to the department for consideration.
- 4. All documentation delivered to the physical address contained in this form must be delivered during the official Departmental Officer Hours which is visible on the Departmental gate.
- All EIA related documents (includes application forms, reports or any EIA related submissions) that are faxed; emailed; delivered to Security or placed in the Departmental Tender Box will not be accepted, only hardcopy submissions are accepted.

Departmental Details

Postal address:

Department of Environmental Affairs

Attention: Chief Director: Integrated Environmental Authorisations

Private Bag X447

Pretoria 0001

Physical address:

Department of Environmental Affairs

Attention: Chief Director: Integrated Environmental Authorisations

Environment House 473 Steve Biko Road

Arcadia

Queries must be directed to the Directorate: Coordination, Strategic Planning and Support at:

Email: EIAAdmin@environment.gov.za

1. SPECIALIST INFORMATION

Specialist Company Name:	CT HEITHER					
B-BBEE	Contribution level (indicate 1		Percenta	ge		
	to 8 or non-compliant)	4	Procuren		_	
			recognition	on		
Specialist name:	JENNA LAVIN					
Specialist Qualifications:	MSC ARCHAEOLUG	1				
Professional	ASAPA					
affiliation/registration:	ATTIP					
Physical address:	@ BOIN ESPIRANCE, 235	3 GUEE	NS RD, SI	MOINS TO	Non	
Postal address:	u					
Postal code:	7975	С	ell:	083 61	9 0854	
Telephone:	_	F	ax:	/		
E-mail:	JENNA. LAVIN @C	TSHER	ITAGE. C	em		

2.	DECLARATION BY THE SPECIALIST	Т
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l,	JENNA	LAVIN	, declare that -

- I act as the independent specialist in this application;
- I will perform the work relating to the application in an objective manner, even if this results in views and findings that are not favourable to the applicant;
- I declare that there are no circumstances that may compromise my objectivity in performing such work;
- I have expertise in conducting the specialist report relevant to this application, including knowledge of the Act, Regulations and any guidelines that have relevance to the proposed activity;
- I will comply with the Act, Regulations and all other applicable legislation;
- I have no, and will not engage in, conflicting interests in the undertaking of the activity;
- I undertake to disclose to the applicant and the competent authority all material information in my possession that
 reasonably has or may have the potential of influencing any decision to be taken with respect to the application by
 the competent authority; and the objectivity of any report, plan or document to be prepared by myself for
 submission to the competent authority;
- all the particulars furnished by me in this form are true and correct; and
- I realise that a false declaration is an offence in terms of regulation 48 and is punishable in terms of section 24F of the Act.

Harri
ignature of the Specialist
CTS HELITAGE
ame of Company:
03 08 7022 rate

UNDERTAKING UNDER OATH/ AFFIRMATION

3.

Date

SUID-AFRIKAANSE POLISIEDIENS

COMMUNITY SERVICE CENTRE

MUIZENBERG

COMMUNITY SERVICE CENTRE

MUIZENBERG

SOUTH AFRICAN POLICE SERVICE



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PROJECT TITLE

Vaal River Solar PV Facilities (1,2 &3) and Grid Line, near Orkney in the North West Province

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Email: EIAAdmin@environment.gov.za

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1. SPECIALIST INFORMATION

Specialist Company Name:	Lourens du Plessis t/a LOGIS							
B-BBEE	Contribution level (indicate 1	Exempt	Percent	age	0			
	to 8 or non-compliant)		Procure recognit					
Specialist name:	Lourens du Plessis	<u> </u>						
Specialist Qualifications:	BA							
Professional	Professional Geo-Information	Science	(GISc) Pra	ctitioner r	egistered	with	the	SA
affiliation/registration:	Geomatics Council (SAGC) R	eg. No. GPr	GISc 0147		00000			
Physical address:	531A Witogie Street Die Wilge	ers Pretoria						
Postal address:	PO Box 384 La Montagne							
Postal code:	0184	Cel	l :	082 922	9019			
Telephone:		Fax	C				2000 0000000000000000000000000000000000	
E-mail:	lourens@logis.co.za							

2. DECLARATION BY THE SPECIALIST

I, Lourens du Plessis, declare that -

- I act as the independent specialist in this application;
- I will perform the work relating to the application in an objective manner, even if this results in views and findings that are not favourable to the applicant;
- I declare that there are no circumstances that may compromise my objectivity in performing such work;
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- I will comply with the Act, Regulations and all other applicable legislation;
- I have no, and will not engage in, conflicting interests in the undertaking of the activity;
- I undertake to disclose to the applicant and the competent authority all material information in my possession that reasonably has or may have the potential of influencing - any decision to be taken with respect to the application by the competent authority; and - the objectivity of any report, plan or document to be prepared by myself for submission to the competent authority;
- all the particulars furnished by me in this form are true and correct; and
- I realise that a false declaration is an offence in terms of regulation 48 and is punishable in terms of section 24F of the Act.

Deviation	
Signature of the Specialist	
t/a LOGIS	
Name of Company:	
2022/7/8	
Date	

Details of Specialist, Declaration and Undertaking Under Oath

I, Lourens du Plessis, swear under oath / affirm that all the information submitted or to be submitted for the purposes of this application is true and correct.

Signature of the Specialist

t/a LOGIS

Name of Company

202-07-08

Date

Signature of the Commissioner of Oaths

2022-07-08

Date

H AFRICAN POLICE SERVICE

GARSFONTEIN

2022 -07- 08

SUPPORT SERVICE

SUID-AFRIKAANSE POLISIEDIENS



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Email: EIAAdmin@environment.gov.za

SPECIALIST INFORMATION

Specialist Company Name:	Dr Neville Bews & Associate				
B-BBEE	Contribution level (indicate 1 to 8 or non-compliant)	NA	Percentage Procurement	NA NA	
	l a san		recognition		
Specialist name:	Neville Bews				
Specialist Qualifications:	D Litt et Phil				
Professional	Non				
affiliation/registration:					
Physical address:	84 Hennie Alberts Street, Brack	enhurst, Al	berton		
Postal address:	PO Box 1454412				
Postal code:	1452 Cell: 082 557-3489				
Telephone:	000 867-0462	Fax	: 086 621	1-8345	
E-mail:	bewsco@netactive.co.za				

2. DECLARATION BY THE SPECIALIST

I, Neville Bews, declare that -

- I act as the independent specialist in this application;
- I will perform the work relating to the application in an objective manner, even if this results in views and findings that are not favourable to the applicant;
- I declare that there are no circumstances that may compromise my objectivity in performing such work;
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 Regulations and any guidelines that have relevance to the proposed activity;
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- I undertake to disclose to the applicant and the competent authority all material information in my possession that
 reasonably has or may have the potential of influencing any decision to be taken with respect to the application by
 the competent authority; and the objectivity of any report, plan or document to be prepared by myself for
 submission to the competent authority;
- all the particulars furnished by me in this form are true and correct; and
- I realise that a false declaration is an offence in terms of regulation 48 and is punishable in terms of section 24F of the Act.

Signature of the Specialist

Dr Neville Bews & Associates

Name of Company:

04 October 2021

Date

I, Neville Bews, swear under oath / affirm that all the	information submitted or to be submitted for the purposes of	TINIS
application is true and correct.		
	,	
A second		
Signature of the Specialist		
See		
Dr Neville Bews & Associates		
Name of Company		
04 October 2021		
Date MMMM QUISON		
MIIII MI MASSED ON-	County, the restricted round observed from promote annual programs, and with a single	
Signature of the Commissioner of Oaths	JEWARICAN FOLICE SERVICE	
1 /1	REGISTRATION CENTRE	
7001 - 1000	0	
2021/10/04	0 4 ~10 - 2021	-
Date /	CKE NOOWNS	
	ASTRAND	
	CV LIAFS, CAN POLICE SERVICE	

SPECIALIST INFORMATION

Specialist Company Name:	Nkurenkuru Ecology and Biodiversity (Pty) Ltd.					
B-BBEE	Contribution level (indicate 1 4 Percentage 100					
	to 8 or non-compliant)		Procurement			
			recognition			
Specialist name:	Gerhard Botha					
Specialist Qualifications:	BSc (Hons)					
Professional	SACNASP Pr Sci Nat 400502/14 Ecological and Botany					
affiliation/registration:	Service of the Consideration o					
Physical address:	2 Jock Meiring Street, Park We	st, Bloemfo	ontein, 9324			
Postal address:	PO Box 12500, Brandhof, 9324					
Postal code:	9324 Cell: 084 207 3454					
Telephone:	-	Fax:	-		Mark Const.	
E-mail:	gerhard@nkurenkuru.co.za					

2. DECLARATION BY THE SPECIALIST

1, Gerhard Botha, declare that -

- I act as the independent specialist in this application;
- I will perform the work relating to the application in an objective manner, even if this results in views and findings
 that are not favourable to the applicant;
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1000 0 %	0.00		
Signature	of the	Spe	cialis

Nkurenkuru Ecology and Biodiversity (Pty) Ltd

Name of Company:

7 October 2021

Date

I, Gerhard Botha, swear under oath / affirm that all the information submitted or to be submitted for the purposes of this application is true and correct.

Signature of the Specialist

Nkurenkuru Ecology and Biodiversity (Pty) Ltd

Name of Company

7 October 2021

Date

Signature of the Commissioner of Oaths

Date

1505 - 01 - 8

Certified a true copy of the original

Date: 8 - 10 - 2021

Ex Officio COMMISSIONER OF OATHS Leon Abraham Janse van Rensburg

DEPUTY PRINCIPAL 3 Jock Meiring Street Park West, Bloemfontein



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Email: EIAAdmin@environment.gov.za

1. SPECIALIST INFORMATION

Specialist Company Name:	TerraAfrica Consult CC				
B-BBEE	Contribution level (indicate 1	4	Percentage	100%	
	to 8 or non-compliant)		Procurement		
	·		recognition		
Specialist name:	Mariné Pienaar			·	
Specialist Qualifications:	MSc. Environmental Science (Wits); BSc. (Agric) Plant Production (UP)				
Professional	SACNASP Registration No:400274/10				
affiliation/registration:	Soil Science Society of South Africa ; IAIAsa				
Physical address:	Farm Strydpoort 403, Ottosdal, 2610				
Postal address:	P.O. Box 433, Ottosdal				
Postal code:	2610	Cell:	082 8	28 3587	
Telephone:	082 828 3587	Fax:	N/A		
E-mail:	mpienaar@terraafrica.co.za				

2. DECLARATION BY THE SPECIALIST

I, Mariné Pienaar, declare that -

- I act as the independent specialist in this application;
- I will perform the work relating to the application in an objective manner, even if this results in views and findings that are not favourable to the applicant;
- I declare that there are no circumstances that may compromise my objectivity in performing such work;
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 the competent authority; and the objectivity of any report, plan or document to be prepared by myself for
 submission to the competent authority;
- all the particulars furnished by me in this form are true and correct; and
- I realise that a false declaration is an offence in terms of regulation 48 and is punishable in terms of section 24F of the Act.

No.		
Signature of the Specialist		
TerraAfrica Consult		
Name of Company:		
2022-07-08		
Date		

I, <u>Mariné Pienaar</u>, swear under oath / affirm that all the information submitted or to be submitted for the purposes of this application is true and correct.



Signature of the Specialist

TerraAfrica Consult CC

Name of Company

2022-07-08

Date

Signature of the Commissioner of Oaths

08 07 2022

Date

Commissioner of Oaths (RSA) Stephanus François Kasselman

59 Kruger street Wolmaransstad 2630 T: 018 596 1320 F: 018 596 1395