

COMMENT AND REGISTRATION FORM

BASIC ASSESSMENT PROCESS & INTEGRATED WATER USE LICENSE FOR THE REDEVELOPMENT OF DR YUSUF DADOO HOSPITAL, KRUGERSDORP EAST, MOGALE CITY LOCAL MUNICIPALITY, WEST RAND DISTRICT, GAUTENG PROVINCE

GDARD REF: Gaut 002/17-18/E0243

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TITLE (Prof/Mr/Mrs)		FIRST NAME	
SURNAME			
CAPACITY (eg. Director/Secretary)			
ORGINASATION			
POSTAL ADDRESS		POSTAL CODE	
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FAX NO:		EMAIL ADDRESS:	
COMMENTS/ISSUES / CONCERNS (Please use separate sheet, if required)			

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