

## Grave Relocation Consent Form

### 1. Project Name: Wonderfontein (uMsimbithi Colliery) Grave Relocation

Location: Wonderfontein Map reference/Coordinates:.....

Nearest Town: Belfast

### 2. Scope of the project:

The proposed relocation of human remains (graves) located at Wonderfontein Farms to make way for the proposed uMsimbithi Colliery extension, in Belfast, Mpumalanga Province.

### 3. Grave(s) Custodian Details:

Names: Mxolisi Surname: Dhlomo

Id Number: 860211 5787 082

Relationship to the deceased: UNCLE

Names: BEN I Surname: MABASO

Id Number: 781124 9258 085

Relationship to the deceased: UNCLE

Names: CONSTANCE Surname: MNISI

**MULAIFA DEVELOPMENT PROJECTS CC**

Engineering | Environment | Project Management | Heritage |

85 Jorrisen Street, Moeregloed, Polokwane. P.O. Box 415, Bendor-Park, 0713 South Africa.

Tel: +27 (015) 291 2265. Fax: +27 086 608 3013.

R.D  
M.S  
M.M

Grave Relocation Consent Form

Relationship to the deceased: NEPHEW, NIECE & SISTER

Id Number: 571020 0789 088

3.1 Contact Details: 076 102 7386

Address: 1044 KWAGGAFONTEIN Code 0458

Tel: 0761027386 /Fax: ..... /Cell: .....

E-mails: bozmandhlamo@gmail.com

4. Consent:

I/We Mxolisi Dhlomo representatives of Dhlomo family, hereby give consent to the applicant to alter/exhume and relocate grave(s) from the current place of burial at Wonderfontein Farms (GY09) to (3 Cemetery). I concede that the applicant has clearly explained the nature and scope of the project to me. I have no objection to the proposed grave (s) alteration, exhumation and relocation.

4.1. Details of the Deceased

Grave No.	Name of deceased	Sex	Date of Birth	Date of Death	Grave description
<u>055</u>	<u>Ezrom Dhlomo</u>	<u>M</u>	<u>10/08/1991</u>	<u>20/05/1992</u>	

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R.R  
 M.S  
 M.M

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DS6	PHINDILE DHLOMO F	SILU BOEN		
DS7	KHAPAZILE KUBA F	19/11/1937	17/12/1957	

Signature of the custodian *[Signature]* Date: 20/09/2021

Witness 1 BEN MABASO (Name & Surname)

Signature *[Signature]* Date: 25/09/2021

Witness 2 CONSTANCE BETTY MASI (Name & Surname)

Signature C.B. MASI Date: 25/09/2021

5. Details of the Applicant:

I, Mabuda Mmbudziseni Moses (Id No. 741212 6494 087) of Mulaifa Development Projects cc, representing and/or acting on behalf of uMsimbithi Colliery certify that I have clearly communicated the project with representatives of the DHLOMO FAMILY family (custodians of the above mentioned graves). I have clearly stated our intention to interred/alter/exhume and relocate remains of 3 ( ) graves from their current place of burial to the proposed new cemetery at KROOMDRAAI..... The grave(s) custodians have no objections to

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*[Handwritten initials]*  
175  
M-M



Grave Relocation Consent Form

the proposed alteration/exhumation and relocation of their grave(s) to the new cemetery.

Responsibility of the applicant (underline the applicable):

Archaeologist/ Social Facilitator / Undertaker


Name of the Company: **MULAIFA DEVELOPMENT PROJECTS**

Contact Details:


Address: Box 415, Bendor-Park, 0713

Tel: +27 (0) 15 291 2265 /Fax:086 603 3013 /Cell: +27 (0) 83 414 1130

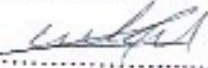
E-mail: Mulaifadevelopment@gmail.com

Signature of the Applicant:  Date: 28/09/2021

Witness1: Rubzani R. Mnyai (Name & Surname)

Signature:  Date: 28/09/2021

Witness2: Annlin Matabane (Name & Surname)

Signature:  Date: 28/09/2021

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R.R  
M.S  
M.M

AFFIDAVIT

I/WE MROLISI S DHLOMO ID number 860215787082  
of (Physical Address) KNAGGAFONTJEN 1044 NP 0458

Hereby declare the following under oath that we gave the applicant/consultant permission on behalf of Umsimbithi Colliery to exhume and relocate the remains of our relative who are buried at Wonderfontein Farm 428 J5 in Belfast and be reinterred to (the place) KROONDRAAI Cemetery as agreed by the descendants of the deceased.

I/We concede that the applicant has clearly explained the nature and scope of the project to me/us and activities associated with the graves exhumation and relocation. I/We have no objection to the proposed grave (s) alteration, exhumation and relocation.

Details of the deceased to be exhumed are as follows:

1. ERROM DHLOMO
2. PHINDILE DHLOMO
3. KHATHAZILE KUBHEKA
4. \_\_\_\_\_
5. \_\_\_\_\_

Signature of the Custodian [Signature] Date: 06/10/2021

Witness 1 BEN MABASO (Name & Surname)

Signature [Signature] Date: 06/10/2021

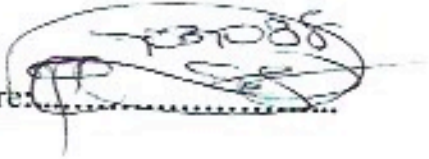
Witness 2 BETTY MNISI (Name & Surname)

Signature C.B Mnisi Date: 06/10/2021

DECLARED before ME AT VOSMAN

On this 07 Day of 10 month 2021

Signature

A handwritten signature, possibly 'VOSMAN', is written inside a hand-drawn circle. The signature is in black ink and appears to be a stylized representation of the name.

SUID-AFRIKAANSE POLISIEDIENS  
COMMUNITY SERVICE CENTRE  
2021 -10- 07  
P. O. BOX 457 WILHELM  
VOSMAN

**Commissioner of oath stamp**

SOUTH AFRICAN REPUBLIC  
 COMMUNITY DEVELOPMENT CENTER  
 2021-09-27  
 P. O. BOX 274 WINDHOLE 1001  
 NORTHERN CAPE PROVINCE  
 SOUTH AFRICA

I.D. No. 860211 5787 08  
 S.A. SIMON, S.A. CITIZEN

BHLOMO  
 Mxolisi SIMON

SOUTH AFRICA  
 1986-02-11  
 2009-03-20

DIRECTOR GENERAL  
 DIRECTOR GENERAL  
 DEPARTMENT OF HOME AFFAIRS



REGISTERED RESIDENTIAL AND POSTAL ADDRESS  
 1. You are liable to maintain a registered residential and postal address in the book.  
 2. If you have changed your address, or if particulars of your present address (e.g. name of house and postal number etc.) have been changed, you must fill in a CHANGE OF ADDRESS form in the book or on back of the identity document when it is issued for change and it must be handed to it or posted to the nearest office of the DEPARTMENT OF HOME AFFAIRS.

I hereby declare that the information given in this document is true and correct to the best of my knowledge and belief.  
 I declare that I am a South African citizen.  
 I declare that I am a South African citizen.

Signed: *[Signature]*  
 Frank Name: *OS437206*  
 Name in print: *OS437206*



GEREGISTREERDE WOON- EN POSADRES

1. Bewaar die bewys van u GEREGISTREERDE WOON- EN POSADRES in hierdie sakkie.

2. Indien u van adres verander het, of indien besonderhede van u huidige adres, by straatnaam en/of -nommer, egs. verander het, moet die vorm KENNISGEWING VAN ADRESVERANDERING, wat in die sakkie agter in die identiteitsdokument is, gebruik word om die verandering aan te meld en moet dit ingedien word by of opgesoek word aan die naaste streek-/distrikkantoor van die DEPARTEMENT VAN BINNELANDSE SAKE.

REGISTERED RESIDENTIAL AND POSTAL ADDRESS

1. Keep the proof of your REGISTERED RESIDENTIAL AND POSTAL ADDRESS in this pocket.

2. If you have changed your address, or, if particulars of your present address, (e.g. name of street and/or street number, etc.) have been changed, the NOTICE OF CHANGE, which is attached to the pocket at the back of the Identity Document, must be used to report the change and it must be handed in at or posted to the nearest regional district office of the DEPARTMENT OF HOME AFFAIRS.

1

I.D.No. 571020 0789 08 8



S.A. BURGER/S.A. CITIZEN

VAN/SURNAME

MNISI

VOORNAME/FORENAMES

CONSTANCE BETTY

GEBORTEDISTRIK OF-LAND/  
DISTRICT OR COUNTRY OF BIRTH

SOUTH AFRICA

GEBORTEDATUM/  
DATE OF BIRTH

1957-10-20



DATUM UITGEREIK  
DATE ISSUED

2001-07-24

UITGEREIK OP GESAG VAN DIE  
DIREKTOR-GENERAAL:  
BINNELANDSE SAKE

ISSUED BY AUTHORITY OF THE  
DIRECTOR-GENERAL  
HOME AFFAIRS

SUID-AFRIKAANSE POLISIEDIENS  
COMMUNITY SERVICE CENTRE  
2021 -10- 04  
P. O. BUX 457 WITBANK  
VOSMAN  
SOUTH AFRICAN POLICE SERVICE

I hereby certify that this document is a true reproduction (copy) of the original document which it was intended to replace for authentication.  
I verklaar hiermee dat hierdie afskrif 'n ware afskrif is van die oorspronklike dokument wat dit vervang en bedoel is om te dien doel te gebruik te maak.  
Signature: *[Handwritten Signature]*  
Date: 26/07/2001  
Place: Witbank  
National Police



1

**GEREGISTREERDE WOON- EN POSADRES**

1. Bewaar die bewys van u GEREGISTREERDE WOON- EN POSADRES in hierdie sakke.

2. Indien u van adres verander het, of u huidige adres, bv. straatnaam en/of -no. moet die vorm **KENNEDIGEMING VAN AC** in die sakke sê toe u in die toekoms enige verandering aan te maak en moet di ingevul aan die nagesêre streek- of distriktoer van BINNELANDSE SAKE.

**REGISTERED RESIDENTIAL AND POSTAL ADDRESS IN THIS PACKET**

1. Keep the proof of your REGISTERED POSTAL ADDRESS in this packet.

2. If you have changed your address, present address, e.g. name of street and/or door number, etc., new details, the **NOTICE OF CHANGE OF ADDRESS** form in the packet at the back of the identity document must be used to report the change and it must be handed in at or posted to the nearest registration office in the DEPARTMENT OF HOME AFFAIRS.

**7811245258085**

**I.D.No. 781124 5258 08 5**

**S.A. BURGER/S.A. CITIZEN**

**VAN/SURNAME**  
**MABASO**

**VOORNAME/FORENAMES**  
**BEN**


**GEBORTEDISTRIK OF -LAND/  
DISTRICT OR COUNTRY OF BIRTH**  
**SOUTH AFRICA**

**GEBORTE DATUM/  
DATE OF BIRTH** **1978-11-24**

**DATUM UITGEREIK  
DATE ISSUED** **1998-09-23**

**UITGEREIK OP BELEG VAN DIE  
DIRECTEUR-GENERAAL  
BINNELANDSE SAKE**

**ISSUED BY AUTHORITY OF THE  
DIRECTOR GENERAL  
HOME AFFAIRS**



**SUID-AFRICAANS**  
**COMMUNITY SERVICE CENTER**

**2021 -10- 04**

**P. O. BOX 457 WITGRAN  
VOISMAN**

**SOUTH AFRICAN POLICE SERVICE**

This document is a true reproduction thereof as the original thereof was handed to me for authentication.

**Signature:** *[Handwritten Signature]*

**Police Number:** *042 2323*

**Issued in print:** *04/10/2021*