



SOUTH AFRICAN HERITAGE RESOURCES AGENCY
 111 HARRINGTON STREET, CAPE TOWN, 8001
 PO BOX 4637, CAPE TOWN, 8000
 TEL: 021 462 4502 FAX: 021 462 4509

<p>FOR OFFICIAL USE ONLY:</p> <p>File No.:</p> <p>Date received:</p> <p>Date approved:</p> <p>Applicant:</p> <p>Site / Object:</p>

**APPLICATION FOR PERMIT:
 HERITAGE OBJECTS**

(including export of archaeological and palaeontological material and meteorites)

Please note: Permit Applications expire one year after the date of receipt.

In terms of the National Heritage Resources Act of 1999 (Act No.25 of 1999), this application form must be completed by anyone applying for a permit to:

- (a) destroy, damage, disfigure or alter a heritage object or disperse a collection of heritage objects; or
- (b) carry out any work of restoration or repair of a heritage object; or
- (c) export a heritage object listed in the register of heritage objects held by SAHRA; or
- (d) export a type of heritage object as listed in the register of heritage objects and declared in the Government Gazette; or
- (e) trade in or sell for private gain:
 - (i) any category of wreck material or object; or
 - (ii) any other category of archaeological or palaeontological material or object; or
 - (iii) any meteorite.

Applicants are advised that without full details no permit may be issued.

A. APPLICANT'S DETAILS

1. Name and address of applicant* :

Johann Neveling

Council for Geoscience, Pretoria Street 280, Silverton, Pretoria

**In the case of items accessioned in a museum collection, if the applicant is not the curator/scientific research officer in the related field, written approval must be obtained from the institution.....*

Phone: (H) 082-929 8314 (W) 012-841 1388 (C) 082-929 8314

Fax: 086- 680 4947 E-mail: jneveling@geoscience.org.za

Identity number of applicant (or passport): 7209025078080

2. Capacity of applicant. *Please circle the appropriate position :*

Museum curator

Archaeologist / Palaeontologist / Geologist

Owner

Agent for sale or auction

Other*

** Please furnish extra relevant details on a separate sheet of paper (if new applicant)*

3. Name and address of owner/ custodian

Council for Geoscience

Pretoria Street 280

Silverton, Pretoria

Phone: (H)n/a (W) 012 841 1072 (C)

Fax E-mail: sonjave@geoscience.org.za (Acting Unit Manager)

Identity number of owner/ custodian:6304250129087.....

.B. DETAILS OF HERITAGE OBJECT(S)

4. Description and number of objects*: See attached

One specimen (R 300, humerus), for more detail see attached documentation

** Please supply full description & motivation on a separate sheet of paper. For archaeological and palaeontological materials please include comment from the scientific officer in the related field and details of the project and project manager.*

5. Era / period / age / date of object(s) : Late Permian

 6. Museum or University accession number: R 300

 7. Museum or University loan number : F-5-2012

8. For palaeontological and archaeological materials and meteorites give geographical situation of site / object:
 Province: Not known
 Magisterial district: Not known 1: 50 000 Map no. & name (or SAN chart):
 Latitude & Longitude: Not known Recording method (GPS, Trig., Other) :
 Farm Name and No.: Not known / Town :
 Nearest Town: Not known / Street address & Erf # :

9. If it is a listed type or declared heritage object, the number and date of the notice in the Government Gazette: N/A

10. If it is a listed type or declared heritage object, the number of the object or type of object in the register of heritage objects: N/A

11. Present location of object(s): CGS fossil collection, Pretoria Office, 280 Pretoria Road, Silverton

12. Please supply a photograph or drawing of object(s) destined for permanent export with a suitable scale.
Please see attached documentation

C. DETAILS FOR APPLICATION TO EXPORT

13. Name and address of person/institution to whom it is being exported :
Adam Huttenlocker and Christian Sidor
Department of Biology, University of Washington, P.O.Box 351800, Seattle, United States

 Phone: (H) N/A (W) +1 206 685 8241 (C)
 Fax: E-mail: huttenla@uw.edu

14. Please indicate whether for permanent or temporary export and reasons for export:
Temporary Export: For: Identification Analysis Dating Restoration Exhibition² Sale Other¹
Permanent Export: For: Identification Analysis Dating Restoration Exhibition Sale Other¹
1 Please circle relevant words and supply full description on a separate sheet of paper.

2 In the case of significant heritage objects travelling overseas for exhibition please supply copy of loan agreement.

15. Please supply documentation indicating the present condition of the object.

Please see attached documentation

16. Please supply written undertaking of South African cultural institution that the object will be returned in the same condition.

17. In the case of temporary export, for what period will the object be exported?

From: . .20 Sept.2012 To: 19 Sept.2013.

D. DETAILS FOR APPLICATION TO DESTROY, DAMAGE, DISFIGURE, ALTER OR DISPERSE

18. Reason for application (Please supply full motivation): See attached document

19. Name and address of person who will do the work : Mr Adam Hutterlocher, Department of Biology, PO Box University of Washington, PO Box 351800, Seattle, W.A, 98195-1801

20. Destination of objects to be dispersed: Department of Biology, University of Washington, United States

21. For what period will the permit be required?:
From 20 Sept. 2012 To 19 Sept. 2013

E. DETAILS FOR APPLICATION TO TRADE IN OR SELL FOR PRIVATE GAIN

22. Reason for application (Please supply full motivation):

23. Address from which items will be sold or traded:

24. Destination of items to be traded or sold : N/A

25. For what period will the permit be required?:
From To

I,

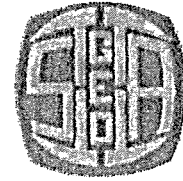
undertake strictly to observe the terms, conditions, restrictions, regulations and guidelines under which the Council may issue the permit to me.

Signature: [Signature] (Applicant) Place: Pretoria.....
Date: 13 Sept. 2012

Where the object(s) reside in a public institution:

I, Sonja van Eck (Acting) Head of Information and Collections Management (South African institution or responsible department) where the applicant is based, hereby state that I support the application.

Signature: [Signature] Date: 13/09/2012



Council for Geoscience

Private Bag X112 Pretoria 0001 SOUTH AFRICA 280 Pretoria Street Silverton Pretoria
Reception: +27 (0)12 841 1911 Internet: <http://www.geoscience.org.za>

Enquiries: Dr Abraham Thomas
Tel.: (012) – 841 1024
Email: athomas@geoscience.org.za

Date: 28 August 2012

Mrs S van Eck
Council for Geoscience
PRETORIA

Dear Mrs van Eck

I would like to inform you that I will be away from the office for the period 29 August to 7 September 2012, inclusive. I may be a bit later than this, but it is depending on the Doctor's instructions, since I am undergoing a cornea transplant on 29 August 2012.

I hereby delegate all responsibilities to you and authorize you to act on my behalf by signing all documents and approvals within the policy of the Council for Geoscience during the above period.

Please note that it is your responsibility to ensure that you only authorize expenditure and the provision of services to clients in accordance with the regulations of the Council for Geoscience and on the provision that funds for the expenditure are available.

Signature

Date

28 August 2012

DJ Barnardo
Manager: Information & Collections Management

Signature

Date

28/08/2012

Mrs S van Eck
Acting Manager: Information & Collections Management

