

Gauteng Directorate of Nature Conservation Permits Office

590 Madiba & Government Street, Pretoria Postal Address: P.O. Box 8769, Johannesburg, 2000 Tel (012) 316 1638 & Fax 086 420 2099/ 012 316 1834

APPLICATION FOR A PERMIT TO PLACE OR RELEASE FISH INTO WATERS (CPE3)

Please note:

- Application forms must be completed in legible block letters.
- It is the applicant's responsibility to confirm receipt of an application form.
- **Fifteen working days** are required to process a permit application.
- Where the space provided is not adequate the information should be attached as an addendum.
- Any additional information, which the applicant deems necessary, should be attached to this application.
- The Department cannot be held responsible for the loss of a permit in the post, if requested to be posted.
- Permits will not be faxed, as faxed copies are invalid.

APPLICANT'S DETAILS (Landowner must apply)							
Surname		Mongalo / consultant (Philip Barnard)					
Additional Names & Title		Company: Larostar (Pty) Ltd					
Residential Status		SA citizen XXX					
(Tick appropriate option)		Permanent Resident					
		Foreigner					
ID Number (Passport number in the			per in the case of non-Sou	the case of non-South Africans) 6			225313083
Telephone (work)			Telephon	e (ho	e (home)		
Cell Phone 0847		130272 / 0823358029	Fax	Fax			
E-mail mong		als.mm@gmail.com / philip@fish		ct.co	<u>za</u>		
Physical	Plot 19 Boschkop Road, Pretoria East,			Postal	N/A	ı	
Address	0001, South Africa / Portion 691 of			Address			
portion 23 of farm Boschkop 369 JR							
	(25°51'15.14" S / 28°27'10.20" E).		1				
			1				
				1			

PERMIT HOLDER'S DETAILS						
(i.e. person who will be releasing fish on behalf of the landowner if not the landowner)						
Surname		Tata Mongalo				
Additional Names & Title		Company: Larostar (Pty) Ltd				
Residential Status		SA citizen XXX				
(Tick appropriate option)		Permanent Resident				
		Foreigner				
ID Number (passpor	t numb	per in the case of non-South Africans)		6806225313083		
Telephone (work) N/A		Telephone (ho	ome)			
Cell Phone	0847130272 / 0823358029		Fax			
E-mail mongals.mm@gmail.com / piusmokg@gmail.com / philip@fishdirect.co.za			ohilip@fishdirect.co.za			

Physical	Plot 19 Boschkop Road, Pretoria East,	Postal		
Address	0001, South Africa (25°51'15.14" S / 28	Address		
	°27'10.20" E). / Portion 691 of portion 23			
	of farm Boschkop 369 JR			
	FISH TO BE RELEA	ASED – Bre	eading Fish	
Quantity	Common Name	Scientific	Name	
20tons/a	Rainbow Trout	Oncorhynchus mykiss		
nnum				
Note	No Broodstock onsite – eggs and			
	Fingerlings to be supplied from Local			
	Hatcheries			

			A	ADDITIONA	L INFORMATI	ION
Supplier's Name - Eggs		Local : Lunsklip Beleggings T/A Trova Trout				
Supplier's Telephone No.		083 277 32	08			
Supplier's		m Sabieshoek Trout,			Supplier's	N/A
Physical		00 ptn 4 of 4, Lydenburg rd,			Postal	
Address Sabie, 1260.		ru,		Address		
Please indicate (by ticking the		he	Wild caught			
appropriate option) whether fish		fish are:	Captive bred - Aquaculture Production and Management			
Waters and place The fish will be re		sh will be rel	leased into a recirculation aquaculture system (RAS) which will be			
of release Build and		and Managed as a 100% bio-secure facility.				

In addition please provide the following information to facilitate processing your application:

I will complete this info

- The type (is it artificial, natural or closed system?) and size of stocking facility 20ton / annum facility.
- Description of the measures to be taken to prevent the fish escaping e.g. during floods (if relevant).
- Source or supply of water for the stocking facility Borehole.
- The fish species present in the stocking facility Rainbow Trout.
- A certificate of triploidy (if necessary).
- The reason for releasing the fish Aquaculture.

PERMIT COLLECTION				
Please indicate (by ticking the	Collect your permit			
appropriate box) whether you will:	Receive it by post			

posted (If it is to be posted)	
	DECLARATION
I declare that all the information provided that any false information supplied could	is complete and correct to the best of my knowledge. I understand lead to my application being disqualified.
Signature:	Date: 18/7 (2574

Application processing fees: (Not refundable): R65.00 per application

Banking details

Please contact **Tel:** (012) 316 1638 for further details

Bank: FNB (First National Bank)Bank Account Name: AGRIC&RURAL DEV-CONS.SERV.Bank Account Number: 62567280939Account Type: Cheque Account;Branch: Commercial Account Services;Branch Code: 210-

554; Permit Code: CPE3