



AFRICAN GRAVE RELOCATION SPECIALISTS

VAT 4950212979 CC 2007/153460/23 Trading as Martin's Funerals

46 Vosloo Street
Birchleigh
Kempton Park
1619

Tel: 073 192 9390
Fax: 086 515 1178

Email: aludik@telkomsa.net

APPENDIX A

GRAVE RELOCATION PERMISSION FORM

PERMISSION FOR THE RELOCATION OF FAMILY GRAVES

PLEASE NOTE: ONLY MAIN OR RESPONSIBLE MEMBER OF FAMILY TO FILL IN DOCUMENTS

SITE NUMBER: 67 GRAVE NUMBER 85
I Phillip Tabara Identity Number: 521209 5530 081

(Hereafter referred to as the Relative) declare that I am related to the deceased whose name(s) appear in Schedule A. And that the nature of the relationship is as indicated in Schedule A. Following consultation with other family members, I hereby permit Tshedza Mining Resources (PTY) Ltd Manungu Colliery and its agents to relocate the grave(s) of the aforementioned

Deceased from their current location on the farms: Weilaagte 271 IR Portion 5 Delmas and Welgevonden 272 IR Delmas

To David

I understand that the full cost of the relocation of the graves will be met by Manungu Colliery and that the grave relocation process will be carried out in accordance with my instructions that are contained in Schedule B attached hereto and within the time period indicated herein. I further understand that this permission will be forwarded to the South African Heritage Resources Agency (SAHRA) for their approval and that any additional requirements SAHRA might have will be included in the process contained in Schedule B.

SIGNED AT: on this 10 day of November 2018

Witnessed at: Delmas

Full Name of Signatory: Phillip Tabara

Physical Address of Signatory: David No 541 Dube Street Dawn

Contact details of Signatory: PLEASE NOTE at least 2 contact numbers
073419 3349

DATE: 10/11/2019 Signature Kevin C. [Signature]

AGRS CONSULTANT PLEASE PRINT YOUR NAME Kevin C. [Signature]



AFRICAN GRAVE RELOCATION SPECIALISTS

VAT 4950212979 CC 2007/153460/23 Trading as Martin's Funerals

46 Vosloo Street
Birchleigh
Kempton Park
1619

Tel: 073 192 9390
Fax: 086 515 1178

Email: aludik@telkomsa.net

Grave Relocation sign off document and Indemnity form

Old site number: 6

New grave site: Devon

Old grave number: 455

New grave number: _____

I Phillip Mabera Identity number 521209 5530 081

Declare that I am happy with the exhuming and relocation of our family graves. I hereby indemnify African Grave Relocation Specialists and Tshedza Mining Resources (PTY) Ltd Manungu Colliery from any further claims and legal costs.

Name and Surname of family member

Phillip Mabera

Signature of family member

Phillip Mabera

Signed on this day the 16 November
(The date)

2018, at Johannesburg

Signature of Witness

Name and surname of witness

African Grave Relocation Specialists representative signature

Name and Surname of African Grave Relocation Specialist Representative

Kevin Gwebu

THANK YOU FOR YOUR SUPPORT DURING THE RELOCATION PROCESS

THE AFRICAN GRAVE RELOCATION SPECIALISTS TEAM

1

I.D. No. 521209 5530 08 1



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

VAN/SURNAME

MABENA

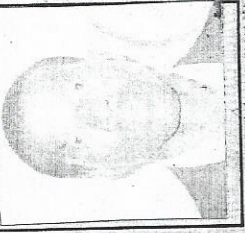
VOORNAME/FORENAMES

MBUDUMA PHILIP

GEBORTEDISTRIK OF -LAND/
DISTRICT OR COUNTRY OF BIRTH

SOUTH AFRICA

GEBORTE DATUM/DATE OF BIRTH 1952-12-09



DATUM UITGEREIK
DATE ISSUED

1986-07-01

Uitgereik op gesag van die
Direkteur-generaal:
Binnelandse Sake

Issued by authority of the
Director-General: Home Affairs

GEREGISTREERDE WOON- EN POSADRES

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

Indien u van adres verander het, of indien besonderhede van u
nuwe adres, bv. straatnaam en/of -nommer, ens. verander het,
of u woon- of posadres WENNIGSEWING VAN ADRESVERANDERING, wat
die sakkie agter in die identiteitsdokument is, gebruik word om die
verandering aan te meld en moet dit ingedien word by of gepos word
by die naaste streek-distrikkantoor van die DEPARTEMENT VAN
BINNELANDE SAKE.

REGISTERED RESIDENTIAL AND POSTAL ADDRESS

1. Keep this 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 OF ADDRESS form in 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.



SOUTH AFRICAN POLICE SERVICE

AFFIDAVIT

FULL NAMES AND SURNAME Mbuyung Phillip Mabera

ID NUMBER 5212095530081 RACE/GENDER Afrikaanse AGE 48

RESIDENTIAL ADDRESS 90541, Jube Street Devon

CELL NUMBER _____ WORK NUMBER _____

STATE UNDER OATH IN ENGLISH THAT:

I am the above mentioned person, the father of the late Sophie Mabera and I give person that, the grave of my daughter can be removed.

SOUTH AFRICAN POLICE SERVICES
STATION COMMANDER DELMAS
2018 -11- 10
- COMMUNITY SERVICE CENTRE
SUID - AFRIKAANSE POLISIEDIENS

I know and understand the contents of the above declaration.

I have no objection to taking the prescribed oath.

I consider the above statement to be binding on my conscience.

Phillip

Signature of deponent

I certify that the deponent knows and understands the contents of the above declaration. The Statement was taken down in my presence and the deponent's signature was placed thereon by the deponent at:

PLACE : DELMAS SAPS
DATE : 2018.11.10
TIME : 11:00

8945533614
[Signature]
Commissioner of oath
Stuurman Tsou

Full Names & Surname
S A POLICE SERVICE
1 LAWA STREET, Delmas, 2210



AFRICAN GRAVE RELOCATION SPECIALISTS

VAT 4950212979 CC 2007/153460/23 Trading as Martin's Funerals

46 Vosloo Street
Birchleigh
Kempton Park
1619

Tel: 073 192 9390

Fax: 086 515 1178

Email: aludik@telkomsa.net

APPENDIX A

GRAVE RELOCATION PERMISSION FORM

PERMISSION FOR THE RELOCATION OF FAMILY GRAVES

PLEASE NOTE: ONLY MAIN OR RESPONSIBLE MEMBER OF FAMILY TO FILL IN DOCUMENTS

SITE NUMBER: _____ GRAVE NUMBER 30 / 70

I Desi Cathrenah Nhlapo Identity Number: 530510 0273 083

(Hereafter referred to as the Relative) declare that I am related to the deceased whose name(s) appear in Schedule A. And that the nature of the relationship is as indicated in Schedule A. Following consultation with other family members. I hereby permit Tshedza Mining Resources (PTY) Ltd Manungu Colliery and its agents to relocate the grave(s) of the aforementioned Deceased from their current location on the farms: Weilaagte 271 IR Portion 5 Delmas and Welgevonden 272 IR Delmas

To Sundia

I understand that the full cost of the relocation of the graves will be met by Manungu Colliery and that the grave relocation process will be carried out in accordance with my instructions that are contained in Schedule B attached hereto and within the time period indicated herein. I further understand that this permission will be forwarded to the South African Heritage Resources Agency (SAHRA) for their approval and that any additional requirements SAHRA might have will be included in the process contained in Schedule B.

SIGNED AT: on this 10 day of November 2018

Witnessed at: Delmas

Full Name of Signatory: Desi Cathrenah Nhlapo

Physical Address of Signatory: Stand 1117 Tweespruit B2

Contact details of Signatory: PLEASE NOTE at least 2 contact numbers

DATE: 10/11/2018 Signature x SC nhlapo

AGRS CONSULTANT PLEASE PRINT YOUR NAME Aludike



AFFIDAVIT

FULLNAMES AND SURNAME SESI CATHREANAH NYHAPHO
ID NO/D.O.B. 530510 0273 083 RACE AFRICAN SEX FEMALE AGE
RESIDENTIAL ADDRESS STAND 117 TWEEFONTEIN B2
WORK ADDRESS n/a
CELL NO 0727133941 TEL NO.(H) n/a (W) n/a

STATE UNDER OATH : THAT

I AGREE THAT THE GRAVES OF MY RELATIVES BURIED AT KHLAAGIE FARM AT DELMAS, MAY BE MOVED FROM WHERE THEY ARE TO ANOTHER PLACE.

SIGNED AT TWEEFONTEIN SAPS ON [DATE] 2018-11-08 AT [TIME] 13:00

I know and understand the contents of the above declaration and I have no objections to take the prescribed oath and consider it is binding on my conscience.

Signature of Sesi Cathreanah Nyhapho

I certify that the above statement was taken by me and the deponent has acknowledge that he knows and understand the contents of this statement. This statement was affirmed. Sworn to before me and the deponent's was place thereon in my presence at [place]

[PLACE] TWEEFONTEIN on [DATE] 2018-11-08 at [time] 13:00

Commissioner of Oath: R.M. MORGAN
FULL NAMES AND SURNAME
CAPACITY/RANK: SGT

SOUTH AFRICAN POLICE SERVICE
SUPPLY CHAIN MANAGEMENT
08 NOV 2018
VOORSIENINGSLYN BESTUUR TWEEFONTEIN
SUID-AFRIKAANSE POLISIEDIENS



AFRICAN GRAVE RELOCATION SPECIALISTS

VAT 4950212979 CC 2007/153460/23 Trading as Martin's Funerals

46 Vosloo Street
Birchleigh
Kempton Park
1619

Tel: 073 192 9390

Fax: 086 515 1178

Email: aludik@telkomsa.net

Grave Relocation sign off document and Indemnity form

Old site number: 6

New grave site: Sandra

Old grave number: 30/70

New grave number: _____

I Desi Catherine Nhlapo Identity number 530510 0273 083

Declare that I am happy with the exhuming and relocation of our family graves. I hereby indemnify African Grave Relocation Specialists and Tshedza Mining Resources (PTY) Ltd Manungu Colliery from any further claims and legal costs.

Name and Surname of family member Desi Catherine Nhlapo

Signature of family member _____

Signed on this day the 10/11 2018, at Delmas
(The date)

Signature of Witness x sc nhlapo

Name and surname of witness _____

African Grave Relocation Specialists representative signature A Ludik

Name and Surname of African Grave Relocation Specialist Representative Aludik

THANK YOU FOR YOUR SUPPORT DURING THE RELOCATION PROCESS

THE AFRICAN GRAVE RELOCATION SPECIALISTS TEAM



AFRICAN GRAVE RELOCATION SPECIALISTS

VAT 4950212979 CC 2007/153460/23 Trading as Martin's Funerals

46 Vosloo Street
Birchleigh
Kempton Park
1619

Tel: 073 192 9390
Fax: 086 515 1178

Email: aludik@telkomsa.net

APPENDIX A

GRAVE RELOCATION PERMISSION FORM

PERMISSION FOR THE RELOCATION OF FAMILY GRAVES

PLEASE NOTE: ONLY MAIN OR RESPONSIBLE MEMBER OF FAMILY TO FILL IN DOCUMENTS

SITE NUMBER: 6 GRAVE NUMBER 25, 26, 29, 36
I Amos Ndlovu Identity Number: 8705808 6122 022

(Hereafter referred to as the Relative) declare that I am related to the deceased whose name(s) appear in Schedule A. And that the nature of the relationship is as indicated in Schedule A. Following consultation with other family members. I hereby permit Tshedza Mining Resources (PTY) Ltd Manungu Colliery and its agents to relocate the grave(s) of the aforementioned

Deceased from their current location on the farms: Weilaagte 271 IR Portion 5 Delmas and Welgevonden 272 IR Delmas

To Kikungula

I understand that the full cost of the relocation of the graves will be met by Manungu Colliery and that the grave relocation process will be carried out in accordance with my instructions that are contained in Schedule B attached hereto and within the time period indicated herein. I further understand that this permission will be forwarded to the South African Heritage Resources Agency (SAHRA) for their approval and that any additional requirements SAHRA might have will be included in the process contained in Schedule B.

SIGNED AT: on this 10 day of November 2018

Witnessed at: Delmas

Full Name of Signatory: Amos Ndlovu

Physical Address of Signatory: 1235 Section F, Kikungula

Contact details of Signatory: PLEASE NOTE at least 2 contact numbers

066 395 8513

DATE: 2018-10-10 Signature: [Signature]

AGRS CONSULTANT PLEASE PRINT YOUR NAME KIMBER GRADUAT



AFRICAN GRAVE RELOCATION SPECIALISTS

VAT 4560212979 CC 2007/153460/23 Trading as Merith's Funerals
 48 Vosloo Street
 Birchleigh
 Kemplon Park
 1619
 Tel: 073 192 9390
 Fax: 086 515 1178
 Email: aludik@telkomsa.net

GRAVE SURVEY FORMS

FARM NAME		Weilaagte 271		PROJECT		Manungu Colliery Delmas	
FARM NAME		Welgevonden 272 IR		DATE		2018-11-10	
DELMAS MPUMALANGA							
Ref No	Surname of Remains	First Name of Remains	Date of Birth	Date of Death	Nationality	Culture	Religion
25	Nkomo	AMOS (Grandchild)					
26	Nkosi	JOHN (Uncle)					
29	Mutshali	MANGWENI (Brother)					
30	Nkosi	FRANCIS (Nephew)					
SURNAME OF NEXT-OF-KIN		FIRST NAME OF NEXT-OF-KIN		ID NUMBERS		RELATION GRAVE NO	
Amos Nkomo		Section F Ekangala		8708086122081			
POSTAL ADDRESS		PHYSICAL ADDRESS		TELEPHONE NUMBER X 2 MIN			
1235		Section F Ekangala		066 595 8513			

SIGNATURE 

DATE 2018-11-10



AFRICAN GRAVE RELOCATION SPECIALISTS

VAT 4950212979 CC 2007/153460/23 Trading as Martin's Funerals

46 Vosloo Street
Birchleigh
Kempton Park
1619

Tel: 073 192 9390
Fax: 086 515 1178

Email: aludik@telkomsa.net

Grave Relocation sign off document and Indemnity form

Old site number: 6 New grave site: Ekangala

Old grave number: 25, 26, 29, 36 New grave number: _____

I Amos Ndlovu Identity number 870205 6122 052

Declare that I am happy with the exhuming and relocation of our family graves. I hereby indemnify African Grave Relocation Specialists and Tshedza Mining Resources (PTY) Ltd Manungu Colliery from any further claims and legal costs.

Name and Surname of family member Amos Ndlovu

Signature of family member [Signature]

Signed on this day the 10 November 2018, at Johannesburg
(The date)

Signature of Witness _____

Name and surname of witness _____

African Grave Relocation Specialists representative signature [Signature]

Name and Surname of African Grave Relocation Specialist Representative Wendy G. G. G.

THANK YOU FOR YOUR SUPPORT DURING THE RELOCATION PROCESS

THE AFRICAN GRAVE RELOCATION SPECIALISTS TEAM

NDZUNDRZA MABHOKO TRADITIONAL COUNCIL

OFFICE NO 302
Stand no 673 T/Fontein B2

ENO: M.K Mawangu
073 9058 794
M. Mawangu : 0765202795

PERMISSION TO REBURY THE REMAINS.

I, Kleeinbooi M Mawangu ID no 511211 5378 083 the
Chief of Tweefontein B2 grant the permission
to Mr Manolla Moses Masilela ID no 710203 5668 083
to bury the remains of his father in Tweefontein B2
Cemetery

Mr Masilela resides at site no 689 Tweefontein B2

Your assistance of this person will be highly appreciated

Yours faithfully
M Mawangu



30 JUL 2018



AFRICAN GRAVE RELOCATION SPECIALISTS

VAT 4950212979 CC 2007/153460/23 Trading as Martin's Funerals

46 Vosloo Street
Birchleigh
Kempton Park
1619

Tel: 073 192 9390

Fax: 086 515 1178

Email: aludik@telkomsa.net

APPENDIX A

GRAVE RELOCATION PERMISSION FORM

PERMISSION FOR THE RELOCATION OF FAMILY GRAVES

PLEASE NOTE: ONLY MAIN OR RESPONSIBLE MEMBER OF FAMILY TO FILL IN DOCUMENTS

SITE NUMBER: 6 GRAVE NUMBER 56.57
I Moses Mkhuli Identity Number: 6701305259 087

(Hereafter referred to as the Relative) declare that I am related to the deceased whose name(s) appear in Schedule A. And that the nature of the relationship is as indicated in Schedule A. Following consultation with other family members. I hereby permit Tshedza Mining Resources (PTY) Ltd Manungu Colliery and its agents to relocate the grave(s) of the aforementioned

Deceased from their current location on the farms: Weillaagte 271 IR Portion 5 Delmas and Welgevonden 272 IR Delmas

To Juneloa

I understand that the full cost of the relocation of the graves will be met by Manungu Colliery and that the grave relocation process will be carried out in accordance with my instructions that are contained in Schedule B attached hereto and within the time period indicated herein. I further understand that this permission will be forwarded to the South African Heritage Resources Agency (SAHRA) for their approval and that any additional requirements SAHRA might have will be included in the process contained in Schedule B.

SIGNED AT: on this 10 day of November 2018

Witnessed at: Delmas

Full Name of Signatory: _____

Physical Address of Signatory: 2401 W. Manket. Street, Bextancy, Delmas

Contact details of Signatory: PLEASE NOTE at least 2 contact numbers

076 3854364

DATE: 10/11/2018 Signature [Signature]

AGRS CONSULTANT PLEASE PRINT YOUR NAME Kwame Mkhulisi



AFRICAN GRAVE RELOCATION SPECIALISTS
 VAT 4950212979 CC 2007/153460/23 Trading as Martin's Funerals

46 Vosloo Street
 Birchleigh
 Kempton Park
 1619
 Tel: 073 192 9390
 Fax: 086 515 1178
 Email: aludik@telkomsa.net

APPENDIX B
GRAVE SURVEY FORMS

FARM NAME: Wellaagte 271 IR PROJECT: Manungu Colliery
 PORTION NUMBER: 5 DATE: 2018

Ref No	Surname of Remains	First Name of Remains	Date of Birth	Date of Death	Nationality	Culture	Religion
56	of Remains	of Remains	1988-09-09	1983-03-04	BOA		
57	of Remains	of Remains	1982-10-19	1982-08-26	BOA		

SURNAME OF NEXT-OF-KIN	FIRST NAME OF NEXT-OF-KIN	ID NUMBERS	RELATION	GRAVE NO
<u>Ukuli</u>	<u>Ukuli</u>	<u>6701920 5859 051</u>		

PHYSICAL ADDRESS: 4409 Jank. Street
Botswana, Belmora

TELEPHONE NUMBER: X 2 MIN

DATE: 10 November 2018 SIGNATURE: _____



AFRICAN GRAVE RELOCATION SPECIALISTS

VAT 4950212979 CC 2007/153460/23 Trading as Martin's Funerals

46 Vosloo Street
Birchleigh
Kempton Park
1619

Tel: 073 192 9390
Fax: 086 515 1178

Email: aludik@telkomsa.net

Grave Relocation sign off document and Indemnity form

Old site number: 6 New grave site: _____

Old grave number: 56, 57 New grave number: _____

I Moses Nkuli Identity number 670130 5259 081

Declare that I am happy with the exhuming and relocation of our family graves. I hereby indemnify African Grave Relocation Specialists and Tshedza Mining Resources (PTY) Ltd Manungu Colliery from any further claims and legal costs.

Name and Surname of family member

Moses Nkuli

Signature of family member

Signed on this day the

(The date)

10 November

2018, at

Jelmas

Signature of Witness

Name and surname of witness

African Grave Relocation Specialists representative signature

Name and Surname of African Grave Relocation Specialist Representative

Robert G'bole

THANK YOU FOR YOUR SUPPORT DURING THE RELOCATION PROCESS

THE AFRICAN GRAVE RELOCATION SPECIALISTS TEAM



SOUTH AFRICAN POLICE SERVICE

AFFIDAVIT

FULL NAMES AND SURNAME Masego Mtuli
 ID NUMBER 67 01 30529904 RACE/GENDER _____ AGE _____
 RESIDENTIAL ADDRESS 2409 Mqwanathi Street
Ext 3 Botlong
 CELL NUMBER 0763254364 WORK NUMBER _____

STATE UNDER OATH IN ENGLISH THAT:

I want to Give a permission
to Remove a Grave of my
Father Petros Mtuli, Grave
no, 56 and my Brother
Geel Boy Mtuli, no, 57 is all
I can say according my
Statement

I know and understand the contents of the above declaration.
 I have no objection to taking the prescribed oath.
 consider the above statement to be binding on my conscience.

[Signature]
 Signature of deponent

I certify that the deponent knows and understands the contents of the above declaration. The Statement was taken down in my presence and the deponent's signature was placed thereon by the deponent at:

PLACE : DELMAS SAPS
 DATE : 13/11/10
 TIME : 11:00

02506286
[Signature]

SOUTH AFRICAN POLICE SERVICES
 STATION COMMANDER
 DELMAS
 2018 -11- 10
 COMMUNITY SERVICE CENTRE
 SUID - AFRIKAANSE POLISIEDIENS

Commissioner of oath
Petros Mtuli
 Full Names & Surname
 S A POLICE SERVICE
 1 LAWA STREET, Delmas, 2210



AFRICAN GRAVE RELOCATION SPECIALISTS

VAT 4950212979 CC 2007/153460/23 Trading as Martin's Funerals

46 Vosloo Street
Birchleigh
Kempton Park
1619
Tel: 073 192 9390
Fax: 086 515 1178
Email: aludik@telkomsa.net

APPENDIX A

GRAVE RELOCATION PERMISSION FORM

PERMISSION FOR THE RELOCATION OF FAMILY GRAVES

PLEASE NOTE: ONLY MAIN OR RESPONSIBLE MEMBER OF FAMILY TO FILL IN DOCUMENTS

SITE NUMBER: 6 GRAVE NUMBER 66

I Jacky Sikhosana Identity Number: 9410115746085

(Hereafter referred to as the Relative) declare that I am related to the deceased whose name(s) appear in Schedule A. And that the nature of the relationship is as indicated in Schedule A. Following consultation with other family members. I hereby permit Tshedza Mining Resources (PTY) Ltd Manungu Colliery and its agents to relocate the grave(s) of the aforementioned

Deceased from their current location on the farms: Weilaagte 271 IR Portion 5 Delmas and Welgevonden 272 IR Delmas

To Ehlangeni Tembisa.

I understand that the full cost of the relocation of the graves will be met by Manungu Colliery and that the grave relocation process will be carried out in accordance with my instructions that are contained in Schedule B attached hereto and within the time period indicated herein. I further understand that this permission will be forwarded to the South African Heritage Resources Agency (SAHRA) for their approval and that any additional requirements SAHRA might have will be included in the process contained in Schedule B.

SIGNED AT: on this 28/08 day of August 2018

Witnessed at: Delmas

Full Name of Signatory: Jacky Sikhosana

Physical Address of Signatory: 4020 Vusi Musi Dechoni

Contact details of Signatory: PLEASE NOTE at least 2 contact numbers

082 831 8587

DATE: 28/08/2018 Signature _____

AGRS CONSULTANT PLEASE PRINT YOUR NAME A Ludik



AFRICAN GRAVE RELOCATION SPECIALISTS
 VAT 4950212879 CC 2007/1153460/23 Trading as Martin's Funerals
 46 Vosloo Street
 Birchleigh
 Kempton Park
 1619
 Tel: 073 192 9390
 Fax: 086 515 1178
 Email: aludik@telkomisa.net

APPENDIX B

GRAVE SURVEY FORMS

M NAME	Weilaagte 271 IR	PROJECT	Manungu Colliery
IDENTIFICATION NUMBER:	5	DATE	10/11/2018
			2018

Surname of Remains	First Name of Remains	Date of Birth	Date of Death	Nationality	Culture	Religion
666						

NAME OF NEXT-OF-KIN	FIRST NAME OF NEXT-OF-KIN	ID NUMBERS	RELATION	GRAVE NO
AL ADDRESS	PHYSICAL ADDRESS	TELEPHONE NUMBER X 2 MIN		
Ehlangeni Tembiso	Jacky	0828318587		

SIGNATURE See affidavit

SIGNATURE 10/11/2018

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 indien besonderhede van u huidige adres, bv. straatnaam en/of nommer, ens. verander het, moet die vorm KENNISGEWING VAN ADRESVERANDERING, wat in die sakke agter in die identiteitsdokument is, gebruik word om die verandering aan te meld en moet dit ingedien word by of gepos 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 OF ADDRESS form in 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. 941011 5746 08 5




S. A. BURGER/S. A. CITIZEN

VAN/SURNAME
SIKHOSANA

VOORNAME/FORENAMES
JACKY

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

**GEBORTE DATUM/
DATE OF BIRTH**
1994-10-11



**DATUM UITGEREIK
DATE ISSUED**
2010-05-04

**UITGEREIK OF GESAG VAN DIE
DIREKTEUR-GENERAAL:
BINNELANDSE SAKE**

ISSUED BY AUTHORITY OF THE
DIRECTOR-GENERAL:
HOME AFFAIRS

SOUTH AFRICAN POLICE SERVICE

TEMBISA SOUTH

2018 -08- 2 8

CLIENT SERVICE CENTRE

SOUTH AFRICAN POLICE SERVICE

DRIVING LICENCE

S.A.S.C. SOUTH AFRICA

KARTAGHE/DRIVER
J SIKHOSANA

ID No: 02/9410115746085 **NLS:**

W/No: 11/10/1994ZA **Restriction:** 8 8

Licence Number: A1020002890 **No. 1**

Valid: 14/08/2017 - 30/08/2022

Issued: ZA


Code: EC

Vehicle restriction: 0

Expiry: 8/8/2017

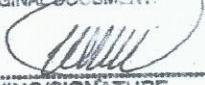
Handwritten: 10/10/2017

Handwritten: 25/08/2018



*** BERTIFISEER DAT HIERDIE DOKUMENT 'N WAARE AFDRUK (AFSKRIF) IS VAN 'N OORSPONKLIKE DOKUMENT WAT AAN MY W/ WAARNEMING VOORGELAAT IS. VERDER DAT, VOLGENS MY WAARNEMINGS, DAAR NIE 'N VERANDERING OP DIE OORSPONKLIKE DOKUMENT AANGEKOMEN IS.**

I CERTIFY THAT THIS DOCUMENT IS A TRUE REPRODUCTION (COPY) OF THE ORIGINAL DOCUMENT WHICH WAS HANDLED TO ME FOR AUTHENTICATION. I FURTHER CERTIFY THAT, FROM MY OBSERVATIONS, NO AMENDMENT OR CHANGE WAS NOT MADE TO THE ORIGINAL DOCUMENT.



HANDTEKENING/SIGNATURE

MAGSNOMMER / FORCE NUMBER 029410115746085 **RANG / RANK** W/O

NAAM IN DRUKSKRIF / NAME IN PRINT M. J. M. M. M.



AFRICAN GRAVE RELOCATION SPECIALISTS

VAT 4950212979 CC 2007/153460/23 Trading as Martin's Funerals

46 Vosloo Street
Birchleigh
Kempton Park
1619

Tel: 073 192 9390

Fax: 086 515 1178

Email: aludik@telkomsa.net

Grave Relocation sign off document and Indemnity form

Old site number: _____

New grave site: _____

Old grave number: _____

New grave number: _____

I _____ Identity number _____

Declare that I am happy with the exhuming and relocation of our family graves. I hereby indemnify African Grave Relocation Specialists and Tshedza Mining Resources (PTY) Ltd Manungu Colliery from any further claims and legal costs.

Name and Surname of family member _____

Signature of family member _____

Signed on this day the _____ 2018, at _____
(The date)

Signature of Witness _____

Name and surname of witness _____

African Grave Relocation Specialists representative signature _____

Name and Surname of African Grave Relocation Specialist Representative _____

THANK YOU FOR YOUR SUPPORT DURING THE RELOCATION PROCESS

THE AFRICAN GRAVE RELOCATION SPECIALISTS TEAM



SUID-AFRIKAANSE POLISIEDIENS

SOUTH AFRICAN POLICE SERVICE

AFFIDAVIT

(FULL NAMES): JACKY SIKHOSANA

IDENTITY NUMBER: 9410115746095

OCCUPATION:

CELLPHONE NUMBER: 082 831 85 87

RESIDENTIAL ADDRESS WORK ADDRESS

CC20 VUUSIMUZU SECTION
EHLANZENI TEMBISA
1632

STATES UNDER OATH IN ENGLISH.

I the above mentioned person residing at the above address writing this on behalf of my both parents to give Africa Grave Relocation Specialist a Full permit to relocate a grave we identified together at Colliery Weilaagte mine grave with number 66 Site 6 inside the mine yard where the grave needs to shift according to the mine and the meeting we had, so that the mine will carry on with their work and relocate the grave to where I am residing.

I know and understand the contents of this declaration

I have no objection in taking the prescribed oath

I consider the prescribed oath to be binding/not binding on my conscience

SIGNATURE OF DEPONENT:

The above statement was taken by me and that the deponent has acknowledge that he/she knows and understand the contents thereof. This declaration was sworn/affirmed in my presence and the deponent's signature was placed thereon in my presence. TEMBISA SOUTH ON THIS: 28 day

Of August 2018 AT 11:00 TIME

[Signature of Commissioner of Oaths]

SOUTH AFRICAN POLICE SERVICE
TEMBISA SOUTH
2018 -08- 28
CLIENT SERVICE CENTRE
SOUTH AFRICAN POLICE SERVICE

COMMISSIONER OF OATHS

[Signature of Commissioner of Oaths]

(FULL NAMES)

[Signature]

RANK

One of the Global One money management products or services

Savings Account Statement



Capitec Bank Limited
1 Quantum Street
Techno Park
Stellenbosch
7600

Capitec Bank
21/08/2018
Branch: 470010
Device: 7796

Tax Invoice

VAT Registration Number
4680173723

From Date: 20/07/2018
To Date: 21/08/2018
Print Date: 21/08/2018

Personal Details

Mr Jacky Sikhosana
Erf Number 626
Tweefontein G
Empumalanga - 0458

Account Number: 1425719749

Posting Date	Transaction Date	Description	Money In (R)	Money Out (R)	Balance (R)
23/07/2018	23/07/2018	*Self-service Statement Print Fee		-2.52	673.08
24/07/2018	24/07/2018	USSD Beneficiary Payment Payment To 1526068948		-250.00	423.08
24/07/2018	24/07/2018	*Payment Fee (Capitec to Capitec)		-1.60	421.48
24/07/2018	24/07/2018	*SMS Notification Fee		-0.40	421.08
26/07/2018	25/07/2018	USSD Prepaid Purchase VODACOM		-12.00	409.08
26/07/2018	25/07/2018	USSD Prepaid Purchase ELECTRICITY		-50.00	359.08
28/07/2018	28/07/2018	*SMS Notification Fee		-0.40	358.68
29/07/2018	29/07/2018	Banking App Payment Received T Sikhosana	300.00		658.68
29/07/2018	28/07/2018	Transfer	150.00		808.68
29/07/2018	29/07/2018	*SMS Notification Fee		-1.20	807.48
30/07/2018	28/07/2018	Purchase & Cash (R100.00): Shoprite Jhb (Card 9470)		-112.00	695.48
30/07/2018	30/07/2018	*Till Cash Withdrawal Fee		-1.61	693.87
31/07/2018	31/07/2018	Interest Received	2.93		696.80
31/07/2018	31/07/2018	*SMS Notification Fee		-0.40	696.40
31/07/2018	31/07/2018	*Monthly Account Admin Fee		-5.80	690.60
01/08/2018	29/07/2018	Superspar Tembisa (Card 9470)		-130.52	560.08
01/08/2018	29/07/2018	Roots Tembisa Tembisa (Card 9470)		-26.40	533.68
02/08/2018	31/07/2018	Cash Withdrawal Shoprite Tembisa (Card 9470)		-100.00	433.68
02/08/2018	02/08/2018	*Till Cash Withdrawal Fee		-1.61	432.07
03/08/2018	03/08/2018	USSD Prepaid Purchase VODACOM		-12.00	420.07
03/08/2018	03/08/2018	Banking App Payment Received A Janse Van Rensburg	200.00		620.07
03/08/2018	03/08/2018	*SMS Notification Fee		-0.80	619.27
05/08/2018	03/08/2018	Cash Withdrawal Shoprite Tembisa (Card 9470)		-200.00	419.27
05/08/2018	05/08/2018	*Till Cash Withdrawal Fee		-1.61	417.66
07/08/2018	07/08/2018	USSD Prepaid Purchase VODACOM		-12.00	405.66
08/08/2018	07/08/2018	ATM Cash Withdrawal Tembisa 2 (Card 9470)		-100.00	305.66
08/08/2018	07/08/2018	*ATM Cash Withdrawal Fee		-6.56	299.10
08/08/2018	08/08/2018	*SMS Notification Fee		-0.40	298.70
13/08/2018	11/08/2018	Shoprite Jhb (Card 9470)		-29.99	268.71
14/08/2018	14/08/2018	USSD Prepaid Purchase VODACOM		-12.00	256.71
15/08/2018	15/08/2018	*SMS Notification Fee		-0.40	256.31
17/08/2018	15/08/2018	Cash Withdrawal Shoprite Tembisa (Card 9470)		-100.00	156.31
17/08/2018	17/08/2018	*Till Cash Withdrawal Fee		-1.61	154.70

End

Transactions not yet processed on your account up to 21/08/2018
There are no Unprocessed Transaction Items