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

GRAVE NUMBER / 8 /6 5
I Nehemiah Identity Number: 59003015406025
(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 Delmas and Welgevonden 272 IR Delmas
To Sandra
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 124 day of Clugest. 2018
Witnessed at: Delmas
Full Name of Signatory: Nehemiah Kulumela
Physical Address of Signatory: 442 Darmboka Ste Delmas
Contact details of Signatory: PLEASE NOTE at least 2 contact numbers
0720613588
DATE: 04/08/2018. SignatureX N
AGRS CONSULTANT PLEASE PRINT YOUR NAME A Lychic

## q A1 49502

AFRICAN GRAVE RELOCATION SPECIALISTS
VAI 4502/1979 CC 2007/150400/3 Triding as Methyle Finerals

African Street

VAT 4950212979 CC 2007/153460/23 Trading as Martin's Funerals 46 \( \)

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

## APPENDIX B

## GRAVE SURVEY FORMS

PORTION NUMBER: FARM NAME **PORTION 5** Weilaagte 271 IR DATE PROJECT 2018

	POSTAL ADDRESS	Nehem	Kuturcla	NEXT-OF-KIN		John Man	inghin 5	8 Minguri	1 Adola	No of Remains	Ref Surname
144	ADDRESS		\	NEXT-OF-KIN		auri Max	7	(2)	6	of Remains	First Name
1442 Marebaka Street	SS	Dehemio		NEXT-OF-KIN		naxaleni Petrus	aniel Raba	agubelo) Mini Kabe	homas		
Shreet		•						se.		Birth	Date of
	TELEPHONE NUMBER		580 3054208083	ID NUMBERS		14/2/65	03/11/65	07/05/60			Date of
	X 2 MIN		15408 085					4			Nationality
			,	RELATION	1						Culture
		20	8	GRAVE NO						(	Religion

DATE

SIGNITURE X.

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•	Blanket and reetmat	YES	NO
•	New Cemetery Sundia		A SAN SAN SAN SAN SAN SAN SAN SAN SAN SA
•	New Cemetery Sundia.  Night Vigil Private.	YES	NO
•	What is required for night vigil		
•	Where can night vigil be held		
•	How many people will be expected at the night vigil		
•	Transport to and from night vigil is family responsibility		
•	Language and tradition of deceased		
•	Language and tradition of family members		
•	OTHER REQUIREMENTS NOT MENTIONED		
•	Banking details		
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## 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:	Syndra
Old grave number: $22, 24+3$ .	New grave number :	
I Maphale Ling Kuta.	Identity number _	4811260499088
Declare that I am happy with the exhuming African Grave Relocation Specialists and Ts further claims and legal costs.	and relocation of our fami shedza Mining Resources	ily graves. I hereby indemnify (PTY) Ltd Manungu Colliery from any
Name and Surname of family member  Signature of family member $\gamma$	Maphule Lin	Ja Kula
Signed on this day the(The date)	<i>D</i>	Delmas
Signature of Witness		
Name and surname of witness	EVERT GR	COLEX
African Grave Relocation Specialists represe	entative signature	a Luclet
Name and Surname of African Grave Reloca	ation Specialist Representa	ative Odenolek

VAT 4950212979 CC 2007/153460/23

10 Umlaas Street Aero Rand 1055 013 244 1812 Tel: 073 192 9390 Fax: 086 515 1178

Email: aludik@telkomsa.net

APPENDIX A

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## **GRAVE RELOCATION PERMISSION FORM**

101

PERMISSION FOR THE RELOCATION OF FAMILY GRAVES

109.1

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

\_ 111

SITE NUMBER 6 GRAVE NUMBER 126, 124, 123

R126,124,123,125,122,1124,113

I Samson Maguni

Identity Number: 35/006 5/02084

(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 Delmas) and its agents to relocate the grave(s) of the aforementioned

Deceased from their current location on the farm: Weilaagte 271 and Welgevonden 272 IR Delmas Mpumalanga

To	5	100
10	Ounc	4701

I understand that the full cost of the relocation of the graves will be met by Tshedza Mining Resources (Pty) Ltd 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: DELMAS /// day of July 2018	
Witnessed at: Delmas	
Full Name of Signatory: Samson Minguri	
Physical Address of Signatory: Delmas	
Contact details of Signatory: PLEASE NOTE at least 2 contact numbers	
076 5247855	
DATE: 1/4/07/2018 Signature x S.M. g.	
AGRS CONSULTANT PLEASE PRINT YOUR NAME GLucht	

# AFRICAN GRAVE RELOCATION SPECIALISTS 46 Vosloo Street 47 Vosloo Street 48 Vosloo Street 48

## **GRAVE SURVEY FORMS**

EARM NAME			107 701	7		
	Wellagge x	27/	PROJECT	CIRALE	Kelasa	hon
PORTION NUMBER:	Pohs 5		DATE	14/07	Store!	
Ref Surname	First Name	Date of	Date of	Nationality	Culture	Religion
No of Remains	of Remains	Birth	Death			(
101						
102						
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107						
108						
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110						
(11)						
SURNAME OF	FIRST NAME OF		ID NUMBERS	RS	RELATION	GRAVE NO
NEXT-OF-KIN	NEXT-OF-KIN					
POSTAL ADDRESS	PHYSICAL		TELEPHONE	Æ		
	ADDRESS		NUMBER X2MIN	X 2 MIN		
	of the deliberation of the					

DATE

SIGNITURE

# AFRICAN GRAVE RELOCATION SPECIALISTS VAT 4950212979 CC 2007/153460/23 Trading as Martin's Funerals 46 Vosioo Street

PORTION NUMBER :

DATE PROJECT

4/07/2018

FARM NAME

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

## GRAVE SURVEY FORMS

DATE 14/07/2018	×			POSTAL ADDRESS		NEXT-OF-KIN	SURNAME OF	125	124	123	122	120	1/4	113	112	No of Remains	Ref Surname	
8/0			ADDRESS	PHYSICAL		NEXT-OF-KIN	FIRST NAME OF									of Remains	First Name	
SIGNITURE																Birth	Date of	
			NUMBER X2 MIN	TELEPHONE			ID NUMBERS									Death	Date of	
			XXMIN	Zm m			RS									,	Nationality	
							RELATION										Culture	
							GRAVE NO									C	Religion	

# AFRICAN GRAVE RELOCATION SPECIALISTS 46 Vosioo Street Birchleigh Kempton Park 1619 Tel: 073 192 9390 Fax: 086 515 1178 Email: aludik@telkomsa.net

## **GRAVE SURVEY FORMS**

				Address Children by Janes Anderson (1984) Children and Children by Children and Chi		
FARM NAME	Weiland 271	27/1	PROJECT			
PORTION NUMBER:	50		DATE	14/0	7/2018	
Ref Surname	First Name	Date of	Date of	Nationality	Culture	Religion
331						
127						
128						
143						
144						
SURNAME OF NEXT-OF-KIN	FIRST NAME OF NEXT-OF-KIN		ID NUMBERS	RS	RELATION	GRAVE NO
Maguai	Samson		35/00	35100651026		
POSTAL ÄDDRESS	PHYSICAL ADDRESS		TELEPHONE NUMBER X 2 MIN	NE X 2 MIN		

DATE

SIGNITURE

		1	
•	Blanket and reetmat	YES	NO-
•	New Cemetery Sundra		
•	New Cemetery Sundra  Night Vigil Prode	YES	NO
•	What is required for night vigil		
•	Where can night vigil be held		
•	How many people will be expected at the night vigil		
•	Transport to and from night vigil is family responsibility		
•	Language and tradition of deceased		
•	Language and tradition of family members		
•	OTHER REQUIREMENTS NOT MENTIONED		
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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: Weilaugh 27/ JR New grave site: Sundra
Old grave number: New grave number :
I Samson Maguni Identity number 35/006 5/02 084
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  **Signature of family member**  **Signature of family member**
Signed on this day the 14th July 2018, at Delmas. (The date)
Signature of Witness
Name and surname of witness  Well Grotter
African Grave Relocation Specialists representative signature  9 Links
Name and Surname of African Grave Relocation Specialist Representative

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## 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 GRAVE NUMBER 45 onan, Identity Number: 43 1113 5266 085 (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 Delmas and Welgevonden 272 IR Delmas 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 Witnessed at: Delmas Full Name of Signatory: Physical Address of Signatory: Contact details of Signatory: PLEASE NOTE at least 2 contact numbers AGRS CONSULTANT PLEASE PRINT YOUR NAME

# AFRICAN GRAVE RELOCATION SPECIALISTS VAT 4950212979 CC 2007/153460/23 Trading as Martin's Funerals 46 Vosloo Street

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## APPENDIX B

## **GRAVE SURVEY FORMS**

PORTION NUMBER: **FARM NAME** DATE PROJECT *O*2018

	POSTAL ADDRESS	Mbonani	SURNAME OF NEXT-OF-KIN		9	277	N es	7
	ODRESS		OF (IN		N DOWN	when.	of Remains	5
Delms.	PHYSICAL ADDRESS	Wyn Paulus	FIRST NAME OF NEXT-OF-KIN		NOT NOT !	K.A.	of Remains	11.
					11/3/1/18.	11/2/1910	Birth	7
	TELEPHONE NUMBER	431113	ID NUMBERS		2010/17/2	2/1/102	Date of Death	
	X 2 MIN	4311135266085					Nationality	2 41 14
			RELATION				Culture	)
			GRAVE NO				Religion	

·.,

DATE

SIGNITURE X 1/04100

•	Blanket and reetmat	YES	NO
•	New Cemetery Surdres  Night Vigil Rock.		
•	Night Vigil Frenk.	YES	NO
•	What is required for night vigil		na proposition de la constanta
•	Where can night vigil be held	andrawes promotoristic dependencies	
•	How many people will be expected at the night vigil		
•	Transport to and from night vigil is family responsibility		
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## AFRICAN GRAVE RELOCATION SPECIALISTS VAT 4950212979 CC 2007/153460/23 Trading as Martin's Funerals 46 Vosloo Street

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: Sundia
Old grave number: 45	New grave number :
I Wyn Paulus Mbonani	Identity number 43 ///35266085
Declare that I am happy with the exhuming a	and relocation of our family graves. I hereby indemnify hedza Mining Resources (PTY) Ltd Manungu Colliery from any
Name and Surname of family member	Pares
Signature of family member	Paruos
Signed on this day the	July 2018, at Delmas
Signature of Witness	
Name and surname of witness	EVELT CROBLES
African Grave Relocation Specialists represe	ntative signature Clacalik
Name and Surname of African Grave Reloca	tion Specialist Representative C1 Ludik

AFRICAN GRAVE VAT 4950212979 CC 2007/153460/23

AGRS CONSULTANT PLEASE PRINT YOUR NAME

10 Umlass Street Aero Rand 1055 013 244 1812 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 GRAVE NUMBER 140, 141, Jabulani Identity Number: 6609 (Increafter 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 Delmas) and its agents to relocate the grave(s) of the aforementioned Deceased from their current location on the farm: Weilaagte 271 and Welgevonden 272 IR Delmas Mpumalanga I understand that the full cost of the relocation of the graves will be met by Tshedza Mining Resources (Pty) Ltd 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: DELMAS Witnessed at: Delmas Full Name of Signatory: Physical Address of Signatory: Contact details of Signatory: PLEASE NOTE at least 2 contact numbers



46 Vosloo Street Birchleigh Kempton Park 1619

Tel: 073 192 9390 Fax: 086 515 1178 Email: aludik@telkomsa.net

## **GRAVE SURVEY FORMS**

	I A STATE HAT WELLING	Weilaagte 271		PRO IECT	PROJECT Maningii Colliery Delmos	lion Dolmoo	
FARM NAME	1ME	Welgevonden 272 IB		DATE I	individuo O	Allici y Delitias	Anna de la constante de la company de la com
		DELMAS MPUMALANGA		מאמ	14/07	14107/2018	
No Ref	Surname of Remains	First Name of Remains	Date of Birth	Date of Death	Nationality	Culture	Religion
140	Sibanyani	M991/e					
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136	Siboryon						
135	Sibanioni		2				
							MAMAGA
SURNAME OF NEXT-OF-KIN	E OF -KIN	FIRST NAME OF NEXT-OF-KIN		ID NUMBERS	RS	RELATION	GRAVE NO
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SIGNITURE

DATE

•	Blanket and reetmat	YES	NO
•	New Cemetery Sundia.		
•	Night Vigil	YES	NOF
•	What is required for night vigil		
•	Where can night vigil be held		
•	How many people will be expected at the night vigil		and the second second
•	Transport to and from night vigil is family responsibility		
•	Language and tradition of deceased		
•	Language and tradition of family members	unterface and one through the second	missionatoriotelen
•	OTHER REQUIREMENTS NOT MENTIONED		
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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: 140, 141, 134, 136	New grave number :
I Jubulani Abram Tshakangy	New grave number :
Declare that I am happy with the exhuming	and relocation of our family graves. I hereby indemnify shedza Mining Resources (PTY) Ltd Manungu Colliery from any
Name and Surname of family member  Signature of family member	Jabulan Abram Tahabangu
Signed on this day the	2018, at
(The date)	10
Signature of Witness	1: 0.
Name and surname of witness	ENERT CROSLEL
African Grave Relocation Specialists represe	entative signature ————————————————————————————————————
Name and Surname of African Grave Reloca	ation Specialist Representative Chudh

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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:6GRAVE NUMBER 98 93
I Maria Grand Lubbe Mentity Number: 6406150329087
(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 Delmas and Welgevonden 272 IR Delmas  To
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 04 day of Olugust 2018
Witnessed at: Delmas
Full Name of Signatory: Baria Granh Lukhele
Physical Address of Signatory: Wilhark
Contact details of Signatory: PLEASE NOTE at least 2 contact numbers
0781965201 0715168098
DATE: 04/08/2018 Signature Medicines
AGRS CONSULTANT PLEASE PRINT YOUR NAME Of Luchk

# AFRICAN GRAVE RELOCATION SPECIALISTS 46 Vosioo Street Birchleigh Kempton Park 1619 Tel: 073 192 9390 Fax: 086 515 1178 Email: aludik@telkomsa.net

**GRAVE SURVEY FORMS** 

FARM NAME		Weilaagte 271	٠	PROJECT Manu	Manungu Coll	ngu Colliery Delmas	
FARM NAME		Welgevonden 272 IR		DATE	80/10	4/08/2018	
		DELMAS MPUMALANGA					
Ref Surname	ne	First Name	Date of	Date of	Nationality	Culture	Religion
No of Remains	nains	of Remains	Birth	Death			
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_	Mahlangu	Ogethide		1985			
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SURNAME OF		FIRST NAME OF		ID NUMBERS	RS	RELATION	GRAVE NO
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				64061	640615032908	7	
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		AUURESS		NOMBER X 2 MIN	NIW 2 X		
		a chambana		078/965201	65201.		
		Wilbert					
	AND ASSOCIATION OF THE PROPERTY OF THE PROPERT			Section of the Contract of the		The state of the s	Contract of the Contract of th

DATE

SIGNITUREX

	Blanket and reetmat	YES	NO
•	New Cemetery Sunda		
•	Night Vigil Prate	YES	NO
•	What is required for night vigil		
•	Where can night vigil be held		
•	How many people will be expected at the night vigil		
•	Transport to and from night vigil is family responsibility		
•	Language and tradition of deceased		
•	Language and tradition of family members		
•	OTHER REQUIREMENTS NOT MENTIONED		
•	Banking details		
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9	FNB Maria Lukhele		
•	62338840285		
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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: 98 93 New grave site: Sundra
Old grave number: New grave number :
I Naria Canah Lukhele Identity number 6406150329087
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 an further claims and legal costs.
Name and Surname of family member  Signature of family member  Mana Gunah Lukhele.
Signed on this day the O4/08 2018, at Odnas.  (The date)
Signature of Witness
Name and surname of witness With Chilles
African Grave Relocation Specialists representative signature  G Luck
Name and Surname of African Grave Relocation Specialist Representative

	AFFIDAVIT
I, (Full names) MARIA AN	INAH LUIZHELE
with ID no. 7 h 0 6 157329007 see	ndon & F. M.O. 2. F. C.
Residing at 4210 JOHNSON	nder <u>FEMALE</u> , age 54, Cell no.0781965201/0715168098 DRIVE ACKERVILLE 1039
State under oath,	
1 MARIA ANNAH	WULHELE 10 NO 640615 0329
08 T. I HERBY	PERMIT AGRS TO RELOCATE
MY FAMILY SPAVES	
I SANDRA CEMETRY	FROM WEILAASTE 271TD
DELMAS	TO THE WILL WAS
)	SU.D FRIKEANSE POLISIEDIENS
	COMMUNITY SERVICE CENTRE
	2018 -08- 1.8
	P. O. SOX 457 WITBANK 1034
	VOSAN
	SOOTT AFRICAN POLICE SERVICE
The above statement was made by me at	the place, date and time as indicated.
I know and understand the contents of this state	ement"
"I have on objection to taking the prescribed oat "I consider the prescribed oath to be binding on	h"
on the presented oath to be billiang on	my conscience"
	H. H. H.
Secretify that the deponent has columnial and	(Signature of deponent)
nich was sworn to before me and the deponent	t he/she knows and understands the contents of this statement
SIGNED AND SWORN TO IN MY PRESENCE	S signature was placed thereon in my presence.
AT COSMO AND AT 6	P9: 30 (Time) DAY OF 08 (25)
	3
	Commissioner of Oaths
	Full names the
	Capacity Server
	Business address Pton Pton OR
	1 20000

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

---- GRAVE NUMBER 65 61 34

I Diveni Joseph Mgidi Identity Number: 430405 5152 088
(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 Delmas and Welgevonden 272 IR Delmas
To Delmas -
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 O4 day of Cangust 2018
Witnessed at: Delmas
Full Name of Signatory: Neeni Joseph Mgrdi
Full Name of Signatory: Neni Joseph Mygreli  Physical Address of Signatory: Stand 354 Kwagga fanker A MKobola  Contact details of Signatory: PLEASE NOTE at least 2 contact numbers  Siyaby Swa.
Contact details of Signatory: PLEASE NOTE at least 2 contact numbers
0830759816
DATE: 04 108 12016 Signature x : Mails (1 )3. 5
AGRS CONSULTANT PLEASE PRINT YOUR NAME AMY Luchk

# AFRICAN GRAVE RELOCATION SPECIALISTS 46 Vosloo Street 46 Vosloo Street Birchleigh Kempton Park 16 19 Tel: 073 192 9390 Fax: 086 515 1178 Email: aludik@telkomsa.net

## APPENDIX B

## **GRAVE SURVEY FORMS**

PORTION NUMBER: FARM NAME **PORTION 5** Weilaagte 271 IR DATE PROJECT

2018

7			Name and Address of the Owner, where	The state of the s			
No d	of Remains	of Remains	Date of	Date of	Nationality	Culture	Religion
. 68	Rosemola	Maria		47.61			
61	Maidi	Ossaniel		1980			
34	Worksow	Vivoi Siskus et	child				
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SURNAME OF NEXT-OF-KIN	S OF	PIRST NAME OF NEXT-OF-KIN		ID NUMBERS	·	RELATION	GRAVE NO
E	gidi	Dueni Joseph.		4304055	4304055752020	Children	19
POSTAL ADDRESS	DDRESS	PHYSICAL ADDRESS		TELEPHONE NUMBER	X 2 MIN		
		Kwaasalonder		0830759816	816		
		100					

DATE

SIGNITURE X

•	Blanket and reetmat	YES	NO
•	New Cemetery		
•	Night Vigil Qui	YES	MO
•	What is required for night vigil		
•	Where can night vigil be held		
•	How many people will be expected at the night vigil		
•	Transport to and from night vigil is family responsibility		
•	Language and tradition of deceased		
•	Language and tradition of family members		ma tanàna palana dalah
•	OTHER REQUIREMENTS NOT MENTIONED		
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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: Delmas - Sundra ?
Old grave number: <u>65, 61, 34</u>	New grave number :
	Identity number <u>4304 05 5152 088</u>
	and relocation of our family graves. I hereby indemnify shedza Mining Resources (PTY) Ltd Manungu Colliery from any
further claims and legal costs.	shedza winning Resources (FTT) Etd Wandingd Comery from any
3	
Name and Surname of family member	Dueni Joseph Agidi
Signature of family member X	maisi-95.5
Signed on this day the 04 /08	2018, at Dolmas.
(The date)	
Signature of Witness	
Name and surname of witness	ENERT GROBLER
African Grave Relocation Specialists represe	entative signature Ochcedk
Name and Surname of African Grave Reloca	ation Specialist Representative

### GEREGISTREERDE WOON- EN POSADRES

- 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, bv. straatnaam en of nommer, ens. 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 gepos word aan die naaste streek-idistrikkantoor van die DEPARTEMENT VAN BINNELANDSE SAKE.

### REGISTERED RESIDENTIAL AND POSTAL ADDRESS

...

- .4. 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.

## I.D.No. 430405 5152 08 8

S.A.BURGER/S.A.CITIZEN

VAN/SURNAME

MGIDI

VOORNAME/FORENAMES

DWENI JOSEPH

GEBOORTEDISTRIK OF-LAND/ DISTRICT OR COUNTRY OF BIRTH

SOUTH AFRICA

GEBOORTEDATUM/ DATE OF BIRTH

1943-04-05

DATUM UITGEREIK DATE ISSUED

1994-03-21

UITGEREIK OP GESAG VAN DIE DIREKTEUR-GENERAAL: BINNELANDSE SAKE

ISSUED BY AUTHORIT® OF THE DIRECTOR GENERAL: HOME AFFAIRS





## SOUTH AFRICAN POLICE SERVICE

FULL NAMES AND SURNAME ID NUMBER 430405 5152 088 RESIDENTIAL ADDRES 354 CELL NUMBER 083475981 STATE UNDER OATH IN ENGLISH THAT: Mais; CSCP44 AN THE ATE JEREMIAH Maio AWA-MART LINDEP THE CIRAUE MADE JEREMAH MG, DI my CUPFY DHA 15

344.17. 31

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 SADS

DATE

2018/08/04

TIME

11/20

Commissioner of oath

Mosenone Gullwa

Full Names & Surname

S A POLICE SERVICE

1 LAWA STREET, Delmas, 2210

STATION COMMANDER
DELMAS

2018 -08- U4

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.

AFRICAN GRAVE | VAT 4950212979 CC 2007/153460/23

10 Umlaas Street Aero Rand 1055 013 244 1812 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 **GRAVE NUMBER** Identity Number: 6206205658088 (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 Delmas) and its agents to relocate the grave(s) of the aforementioned Deceased from their current location on the farm: Weilaagte 271 and Welgevonden 272 IR Delmas Mpumalanga I understand that the full cost of the relocation of the graves will be met by Tshedza Mining Resources (Pty) Ltd 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: DELMAS Witnessed at: Delmas Full Name of Signatory: Physical Address of Signatory: Contact details of Signatory: PLEASE NOTE at least 2 contact numbers Signature AGRS CONSULTANT PLEASE PRINT YOUR NAME

# AFRICAN GRAVE RELOCATION SPECIALISTS VAT 4950212979 CC 2007/153460/23 Trading as Martin's Funerals 46 Vosioo Street

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

## GRAVE SURVEY FORMS

	POSTAL	Ms	NEXT-OF-KIN	O IONIANA			9	No	Ref		FARM NAME	FARM NAME	
	POSTAL ADDRESS	Mtsweni	-KIN				Samona	of Remains	Surname		ME	ME	
Deneyb-	PHYSICAL ADDRESS	Shadack	NEXT-OF-KIN				Merchi	of Remains	First Name	DELMAS MPUMALANGA	Weigevonden 272 IR	Weilaagte 271	(
								Birth	Date of				
8614801100	TELEPHONE NUMBER X 2 MIN	belobed	I NOMBERO				1967	Death	Date of		DATE	PROJECT	
8614	X 2 MIN	620620565808	ž					•	Nationality			PROJECT Manungu Colliery Delmas	
			Siske.						Culture			lliery Delmas	
			GRAVE NO					(	Religion				
					 LL.	لــــــــــــــــــــــــــــــــــــــ	 	-		L			

DATE

SIGNITURE &

Witness

•	Blanket and reetmat	YES	NO
•	New Cemetery Daveyton.		arteneneni/verselmin
•	New Cemetery Davey for. Night Vigil Privak.	YES	NO
•	What is required for night vigil		
•	Where can night vigil be held Privat		
•	How many people will be expected at the night vigil		
•	Transport to and from night vigil is family responsibility		
•	Language and tradition of deceased		negatan degradas
•	Language and tradition of family members		
•	OTHER REQUIREMENTS NOT MENTIONED		
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## 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: Pumlane Daney four.
Old grave number:	New grave number :
I Shadlack Mbueni	Identity number 6206205658688
	nd relocation of our family graves. I hereby indemnify nedza Mining Resources (PTY) Ltd Manungu Colliery from any
Name and Surname of family member	Shadiack Mbueni
Signature of family member	+ Notness C
Signed on this day the	July 2018, at Delmas.
Signature of Witness	
Name and surname of witness	EVEKT CRODISK
African Grave Relocation Specialists represen	ntative signature Oder of t
Name and Surname of African Grave Relocat	tion Specialist Representative A Ludire.

## NOTICE OF PERSONAL PARTICULARS

 Any changes to the personal particulars in your ID Book must be communicated to all relevant parties.

## NOTICE OF CHANGE OF ADDRESS

- Keep the NOTICE OF CHANGE OF ADDRESS form in this pocket to report a change of address or a change in particular of your present address e.g. name of street and/or street number etc.
- Hand in at or post to the nearest regional/district office of the DEPARTMENT OF HOME AFFAIRS

I.D. No. 620620 5658 088

S.A.CITIZEN

SURNAME MTSHWENI

FORENAMES SHADRACK

COUNTRY OF BIRTH SOUTH AFRICA DATE OF BIRTH 1962-06-20

DATE ISSUED 2011-01-19

ISSUED BY AUTHORITY OF THE DIRECTOR-GENERAL HOME AFFAIRS



## AFFIDAVIT

FULL NAME CHADRACK MITSHWEN?	
IDENTITY NUMBER: 620620 5658 088	
RESIDING AT 15896 MANDEZA EXT 8 ETWATOWA	
EMPLOYED AS MEMPIOTED	
TEL. NO. (H)(W)CELL 07110574193	
STATES UNDER OATH IN ENGLISH	
This serve to conferm qued smomo	
Mtshweni born 1964 and passed away	
during 1967 is my sister and was 1	/
burried allelagdel Delmes Cemetry. Ho	V
parrents pensed curvey as well. I/as me	0
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Grave Relocation Specialist tel 073 192 9390	
Phumaleur Semetry 10m to the mesey	1
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declared to be a mining Place	
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know and traderstand the contents of this declaration.	
have become decision in taking the prescribed oath.  consider the prescribed oath to be binding on my conscience.  BIGN TREE DEPONENT  certify that the above statement was taken by me and that the deponent has acknowledged that he/she knows and understands the ontents of this statement. This statement was sworn/affirmed to before me and deponents gionestration in taking the prescribed oath.	e
laced thereon in my presence at Etwatwa S.A.P.S. on	
I maleur	
OUTH AFRICAN FOLICE SERVICE COMMISSIONER OF OATHS	
CLIENT SERVICE CENTRE	
2018 -08- 0 1 (FULL NAMES)	
SOUTH AFRICAN POLICE SERVICE	
SUID AFRIKAANSE POLISIEDIENS 65 GIDEON NKOMO AVENUE ETWATWA	
907	

AGRS VAT 49

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
CAN
IN DOCUMENTS
in the second of the
SITE NUMBER:6
1 Sipho 5 & hlamini Identity Number: 7801085798084
(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
grave(s) of the aforementioned  Deceased from their current location on the farms: Weillaagte 271 IR Delmas and Welgevonden 272 IR Delmas
To Daveypon.
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 OH day of Chergust 2018
Witnessed at: Delmas  Full Name of Signatory: Sipho S. Dhlamini  Physical Address of Signatory: Daveybox.
Physical Address of Signatory: Xaveybon.
Contact details of Signatory: PLEASE NOTE at least 2 contact numbers
079 073 0277 / 076/80 8/96
DATE: 04 /08 / 2018 Signature / Signature
AGRS CONSULTANT PLEASE PRINT YOUR NAME C Luck.

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

## APPENDIX B

## GRAVE SURVEY FORMS

PORTION NUMBER: FARM NAME Weilaagte 271 IR **PORTION 5** 46 Vosloo Street Birchleigh Kempton Park 1619 Tel: 073 192 9390 Fax: 086 515 1178 Email: aludik@telkomsa.net DATE PROJECT /2018

	POSTAL ADDRESS	& Jamini	SURNAME OF		No or Remails	
Daveyton.	PHYSICAL	Sipho S	FIRST NAME OF NEXT-OF-KIN		á	First Name Date of Bernains Birth
0761808196	TELEPHONE NUMBER X2 MIN	780108578884	ID NUMBERS		13/6/82	Date of Nationality Death
			RELATION			Culture
			GRAVE NO	-		Religion

DATE

04/08/2018

SIGNITURE X

	Blanket and reetmat	YES	MO
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•	New Cemetery Daveyh.  Night Vigil Rock	YES	NO
D	What is required for night vigil		
9	Where can night vigil be held		200000000000000000000000000000000000000
•	Where can night vigil be neight vigil		
•	How many people will be expected at the night vigil		
•	Transport to and from night vigil is family responsibility		
•	Language and tradition of deceased		
•	Language and tradition of family members		-
•	OTHER REQUIREMENTS NOT MENTIONED		
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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: Lauryton
Old grave number: #6 ///	New grave number :
1 Sipho S Dhlamini	Identity number 780/08 5 798084
Declare that I am happy with the exhuming African Grave Relocation Specialists and I further claims and legal costs.	g and relocation of our family graves. I hereby indemnify Tshedza Mining Resources (PTY) Ltd Manungu Colliery from any
Name and Surname of family member  Signature of family member	Sipho 5 Dhlamini
Signed on this day the	108 2018, at <u>DeImas</u>
(The date)	6
Signature of Witness  Name and surname of witness	ENELI CACRET
African Grave Relocation Specialists repre	esentative signature On Luclike
Name and Surname of African Grave Rele	

## SOUTH AFRICAN POLICE SERVICE SUID-AFRIKAANSE POLISIEDIENS

NAME AND SURNAME:	SIPNO STEPHEN WHLAMIN
ID NUMBER/PASSPORT:	7801085798084
RESIDENTIAL ADDRESS:	2887 Etwertwa Cast
	Doveyton.
WORK ADDRESS :-	n/va
	0790730277
CELL-PHONE NUMBER /	0780899917
TELEPHONE NUMBER:	
\$ \$334455234444444444444444444444444444444	
Maria Mugus	2
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To the state of th	
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	***************************************
	SOUTH AFRICAN POLICE SERVICES
least and understand the contents (	DAVEYTON

I have no objection into taking the prescribed oath.

consider the prescribed oath to be binding on my conscience.

	8
SIGNATURE:	

RANK:

2018 -08- 11 7 SAP 6 STORE ID AFRIKAANSE POLISIEDIENS

I certify that the above mentioned statement was taken by me, and the deponent acknowledged that he/she knows and understand the contents of the statement which was swom / affirmed before me and deponent's signature / right thumb print / mark was placed in my presence at DAVEYTON SAPS DATE: 2018-08-07

al Jaral Rank

COMMISSIONER OF OATH: PP Maingars NAME AND SURNAME: Primore Maling &

AGRS VAT 49

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 GRAVE NUMBER Identity Number: \_ (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 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 Witnessed at: Delmas Full Name of Signatory:\_ Physical Address of Signatory: Contact details of Signatory: PLEASE NOTE at least 2 contact numbers AGRS CONSULTANT PLEASE PRINT YOUR NAME

# AFRICAN GRAVE RELOCATION SPECIALISTS VAT 4950212879 CC 2007/153460/23 Trading as Martin's Funerals AR VALLEY

46 Vosloo Street Birchleigh Kempton Park 1619

Tel: 073 192 9390 Fax: 086 515 1178 Email: aludik@telkomsa.net

## APPENDIX B

## GRAVE SURVEY FORMS

			DRO IFCT	Manungu Colliery	iery	and the same of th	_
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SIGNITURE 1 JOHN DELIGIORINI

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	Blanket and reetmat		
•	New Cemetery Daveyto  Night Vigil  Own	YES	NO
•	Night Vigil Our	163	140
•	What is required for night vigil		
•	Where can night vigil be held		
•	How many people will be expected at the night vigil		
•	Transport to and from night vigil is family responsibility		
	Language and tradition of deceased		
	Language and tradition of family members		
	OTHER REQUIREMENTS NOT MENTIONED		
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•	Standard Bank		
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46 Vosloo Street Birchleigh Kempton Park 1619 Tel: 073 192 9390

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: Laveyfor
Old grave number: 89, 43	New grave number :
	Identity number 6403/35459089  and relocation of our family graves. I hereby indemnify shedza Mining Resources (PTY) Ltd Manungu Colliery from any
Name and Surname of family member	Buti Jan. Dlamini  Jan DHLAMINI  2018, at Delmas.
Signature of family member  Signed on this day the ///08	2018, at Delmas.
(The date) Signature of Witness	
Name and surname of witness	ENERT BROBLEK
African Grave Relocation Specialists repres	sentative signature <u>A Luclife</u>
Name and Surname of African Grave Reloc	eation Specialist Representative

## NOTICE OF PERSONAL PARTICULARS

Any changes to the personal particulars in your ID Book must be communicated to all relevant parties.

## NOTICE OF CHANGE OF ADDRESS

- Keep the NOTICE OF CHANGE OF ADDRESS form in this pocket to report a change of address or a change in particular of your present address e.g. name of street and/or street number etc.
  - Hand in at or post to the nearest regional/district office of the DEPARTMENT OF HOME AFFAIRS

I.D. No. 640313 5459 089

SURNAME DHLAMINI

BUTI JAN

COUNTRY OF BIRTH SOUTH AFRICA DATE OF BIRTH 1964-03-13

2011-05-16

ISSUED BY AUTHORITY OF THE DIRECTOR-GENERAL HOME AFFAIRS



## SUID-AFRIKAANSE POLISIEDIENS



## SOUTH AFRICAN POLICE SERVICE

NAME AND SURNAME:	BUTY SANDHLAMINI
ID NUMBER/PASSPORT:	6403135459 089
RESIDENTIAL ADDRESS:	28230 Mgkoba Barce
	long Daveyton
WORK ADDRESS:-	
CELL-PHONE NUMBER / TELEPHONE NUMBER:	0826393908
Betty Mknats	ang 9 - 89
	canin 43
	ve pennission to Relocate
the grove AGR	8 to Removit to
Doweyton Epl	
1 saveg for Ggv	
	***************************************
I know and understand the contents of the	south African Police Services
I have no objection into taking the prescr	ribed oath. DAVEYTON
I consider the prescribed oath to be bind	2018 -08- n 7
	2010 00 11 1
SIGNATURE: Dair	SAP 6 STORE
	SUID AFRIKAANSE POLISIEDIENS
lamous and understand the contents of the	ent was taken by me, and the deponent acknowledged that he/she e statement which was sworn / affirmed before me and deponent's laced in my presence at DAVEYTON SAPS
	71704
COMMISSIONER OF OATH:	lalingaist
NAME AND SURNAME: PHUMDIC	5 Manuel.
RANK: (St	