

## 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: LUCAS MZONDI Surname: MBOYANG

Id Number: 610801 6404 085

Relationship to the deceased: FAMILY

Names: SOPHIA SIPHO Surname: MBOYANG

Id Number: 640914 0299 089

Relationship to the deceased: FAMILY

Names: LEONARD FREDDY Surname: HLATSHWAYO

**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 (0)15 291 2265. Fax: +27 086 608 3013.

R.M  
R.R  
M.M

Grave Relocation Consent Form

Relationship to the deceased GRANDFATHER

Id Number: 730422551 3083

3.1 Contact Details: Lucas Mzondi MBOYANE

Address: 7097 EXT. 11 EMALARLENI Code 1039

Tel: 076413 0263 / Fax: ..... / Cell: 076413 0263

E-mails: N/A

4. Consent:

I/We Lucas MBOYANE representatives of MBOYANE 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 (KRAMARARI 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 |
|-----------|------------------|-----|---------------|---------------|-------------------|
|           |                  |     |               |               |                   |

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*M.M. A.M.  
R.D.*

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|  |                          |        |      |      |
|--|--------------------------|--------|------|------|
|  | PATAICK Vusi MBOYANE     | MALE   | 1979 | Soil |
|  | Joyce Solumisa MBOYANE   | FEMALE | 1976 | Soil |
|  | Solomon Mabusizi MBOYANE | MALE   | 1984 | Soil |
|  | Josephine Ntombi NKOZI   | FEMALE | 1985 | Soil |
|  | Zoliswa Solumisa NKOZI   | FEMALE | 1986 | Soil |

Signature of the custodian  Date: 15.1.2021

Witness 1 Sophia Sipho MBOYANE (Name & Surname)

Signature  Date: 15.1.2021

Witness 2 Leonard Fradley Hlatshwayo (Name & Surname)

Signature  Date: 15.1.2021

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 MBOYANE family (custodians of the above mentioned graves). I have clearly stated our intention to interred/alter/exhume and relocate remains of FIVE (5) graves from their current place of burial to the proposed new cemetery at KROMDRAAI. The grave(s) custodians have no objections to

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A.M  
R.R  
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

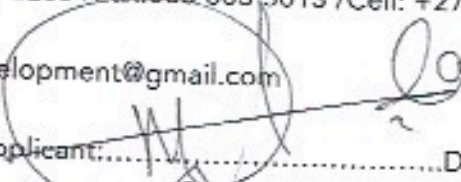
Name of the Company: **MULAIFA DEVELOPMENT PROJECTS**

Contact Details:


Address: Box 415, Bendor Park, 0713

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

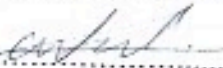
E-mail: Mulaifadevelopment@gmail.com

Signature of the Applicant:  Date: 15/09/2021

Witness1: Rudrani R. Mnyai (Name & Surname)

Signature:  Date: 28/09/2021

Witness2: M. A. M. Madabane (Name & Surname)

Signature:  Date: 28/09/2021

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A.M  
M.M  
R.D

AFFIDAVIT


|                     |                |                      |      |
|---------------------|----------------|----------------------|------|
| NAME AND SURNAME    |                | MBOYANE LUCAS MZONDI |      |
| ID NR               | 6108015404 085 | GENDER               | MALE |
| RESIDENTIAL ADDRESS |                | WORK ADDRESS         | RACE |
| EMALAHLENI: WITBANK |                |                      |      |
| TEL NR              | 076 413 0263   | TEL NR               | -    |

STATE UNDER OATH:

I, Lucas M. Mboyane, ID: 6108015404 085 of 7097 Ezi II Emalahlan WTB. Want to confirm that I am a legal representative of Mboyane family. I am deposing this affidavit freely and to the best of my knowledge of the intentions by the mine to relocate graves of my family or relatives - from Uasinbithi mine in Woodedfontain Belfast to Kromdagan Cemetery. I further want to give consent to the Consultant appointed by Uasinbithi Mine to exhume and relocate the graves of my relatives as identified below: ① Patrick Vusi Mboyane, ② Japel Selamisa Mboyane, ③ Solomon Mduzuzi Mboyane, ④ Josephus Ntombi Ngesi, ⑤ Zacharia Selamisa Ngesi. I further want to indicate the Consultant had explained to me and my family members of the process to be followed during exhumation, and wish to indicate that I have no objection to the exhumation. I want to request the authorities to grant the grave exhumation permit to the consultant.

I KNOW AND UNDERSTAND THE CONTENTS OF THIS AFFIDAVIT  
 I HAVE NO OBJECTION IN TAKING THE PRESCRIBED OATH  
 I CONSIDER THE PRESCRIBED OATH TO BE BINDING ON MY CONSCIENCE

15/04/21  
 DATE


  
 SIGNATURE

I CERTIFY THAT THE DEPONENT HAS ACKNOWLEDGED THAT HE KNOWS AND UNDERSTANDS THE CONTENT OF THIS AFFIDAVIT. THE ABOVE MENTIONED AFFIDAVIT WAS SWORN TO BEFORE ME AND SIGNED BY THE DEPONENT IN MY PRESENCE/NOT IN MY PRESENCE.


AT (PLACE) WORMAN DAPS ON (DATE) 2021. 04. 15 AT (TIME) \_\_\_\_\_


COMMISSIONER OF OATHS  
 SURNAME AND INITIALS  
 RESIDENCE ADDRESS  
 BLOCK

Mahomeda T b  
 SOUTH AFRICAN POLICE SERVICE, WORMAN  
 East

 **REPUBLIC OF SOUTH AFRICA**  
NATIONAL IDENTITY CARD

Surname  
**HLATSHWAYO**  
Names  
**LEONARD FREDDY**  
Sex  
**M**  
Nationality  
**RSA**  
Identify Number  
**7304225513010**  
Date of Birth  
**22 APR 1973**  
Country of Birth  
**RSA**  
Status  
**CITIZEN**

  
Signature  
*Leonard Freddy Hlatshwayo*



**SUID-AFRIKAANSE POLISIEDIENS**  
COMMUNITY SERVICE CENTRE  
2021-09-15  
37 WITBANK  
SOUTH AFRICAN POLICE SERVICE

Conditions:  
This card has been issued by the  
Department of Home Affairs in terms of the  
Identification Act, Act 68 of 1997

Date of Issue:  
02 JUN 2016

 102194973


If you have queries to the Department of Home Affairs  
Please enquiry at 011 234 2000 or visit www.dha.gov.za

I hereby declare that the information provided on this card is true and correct to the best of my knowledge and belief.

Signature: *Leonard Freddy Hlatshwayo*  
Name: **LEONARD FREDDY HLATSHWAYO**  
Date of Issue: **02 JUN 2016**



REPUBLIC OF SOUTH AFRICA  
NATIONAL IDENTITY CARD

Surname  
MBOYANE  
Name  
LUCAS MZONDI  
Sex  
M  
Race/ethnicity  
KSA  
ID Number  
6101016404086  
Date of Birth  
01 AUG 1961  
Country of Birth  
RSA  
Status  
CITIZEN

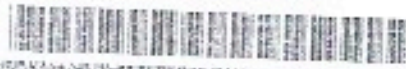


Signature

SUID-AFRIKAANSE POLIS "IN" S  
COMMUNITY SERVICES CENTRE  
2021-09-15  
P. O. BOX 457 WITBANK  
VONMAN  
SOUTH AFRICAN POLICE SERVICE

2021-09-15  
0

112946572



112946572  
P.D.N. 7/11  
9101

I hereby declare that the information furnished in this form is true and correct to the best of my knowledge and belief and that I am not aware of any circumstances which would render it false or misleading.

Signature: *[Handwritten Signature]*

Police Number: *80770007*

Name in print: *P. D. N. 19101*

**NOTICE OF PERSONAL PARTICULARS**

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

**NOTICE OF CHANGE OF ADDRESS**

1. 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.
2. Hand in at or post to the nearest regional/district office of the DEPARTMENT OF HOME AFFAIRS

I.D. No. 640914 0299 089



S.A. CITIZEN

SURNAME  
**MBOYANE**



FORENAMES  
**SIPHO SOPHIA**

COUNTRY OF BIRTH  
**SOUTH AFRICA**



DATE OF BIRTH  
**1964-09-14**

DATE ISSUED  
**2011-10-24**



ISSUED BY AUTHORITY OF  
THE DIRECTOR GENERAL  
HOME AFFAIRS

**SUID-AFRIKAANSE POLISIEDIENS**  
COMMUNITY SERVICE CENTRE

**2021-09-15**

P.O. BOX 1000 WILBANK  
NORTH WITWATERSRAND

**SOUTH AFRICAN POLICE SERVICE**