



## KWAZULU-NATAL PROVINCE

HEALTH  
REPUBLIC OF SOUTH AFRICA

### DIRECTORATE:

Postal Address: Private Bag X 9051, Pietermaritzburg, 3200  
Physical Address: 1 Hsylvop Road, Townhill Office Park, Block  
Tel: 033- 940 2456 Email address: Babongile.mhlongo@kznhealth.gov.za  
www.kznhealth.gov.za

Environmental Health Services, Malaria & CDC

### National Department of Health

Chief Directorate: Environmental Health and port Health  
Civitas Building  
Pretoria

Dear Sir/Madam

### REQUEST ISSUING OF HAZARDOUS SUBSTANCES LICENSES

The attached applications for premises selling hazardous substances have been inspected and found to be complying with Hazardous Substances Act, 15 of 1973. It is requested that these applications be processed and licenses be issued as can be seen in the attached documentation. All the documentation is attached.

**MS B MHLONGO**  
**DIRECTOR: ENVIRONMENTAL HEALTH & CDC**

06/04/2021  
DATE



## KWAZULU-NATAL PROVINCE

HEALTH  
REPUBLIC OF SOUTH AFRICA

DIRECTORATE

Physical Address: 1 Hsylop Road, Townhill Office Park, Block 2  
Postal Address: Private Bag X 9051, Pietermaritzburg, 3200  
Tel: 033- 940 2456 Fax: : Email: Zamokuhle.zondi@kznhealth.gov.za  
www.kznhealth.gov.za

Environmental Health Services

<b>Date: 01 April 2021</b>	<b>File No: 16/24</b>
<b>To: Ms B. Mhlongo: Director – Environmental Health &amp; CDC</b>	<b>From: Mr ZPK Zondi: Environmental Health (Hazardous substances)</b>

**Subject : Hazardous substances dealers inspections Report**

### 1. Objective

To inform the Director –Environmental Health& CDC of the outcome on inspections of hazardous substances dealers conducted over the month of March 2021.

### 2. Background

In terms of section 4(1) Hazardous Substances Act, 1973 (Act 15 of 1973) it is the responsibility of the Director General: Health to issue Group 1 Category A and B hazardous substances licenses for all hazardous substances dealers in the country, however this function is rendered by the Provincial Departments of Health as delegated by the Chief Director: Environmental Health and Port Health at the National Department of Health.

The said licenses issued are valid for a period of 1 calendar year (January 1-December 31) and shall be renewed on yearly basis. The KZN has a significant number of facilities/dealers requiring inspections and issuing of the certificate in order for them to comply with legislation.

### 3. Discussion

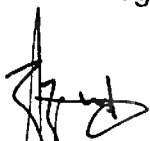
Attached is the list of hazardous substances dealers that were inspected as part of the annual routine program. Dealers applied for renewal of license to carry on business as suppliers /possessor of group 1 hazardous substances applied using the Annexure A as stated in DOH guidelines on licensing of group 1 Hazardous substances in South Africa and inspections conducted using the national evaluation tool-Annexure B of the same guidelines were found to be in an acceptable state.

**Subject:** hazardous substances dealers inspections report

**Conclusion**

Following inspections conducted in facilities as per attached list/applications and evaluation forms, findings were satisfactory and reflected acceptable practice as required.

Kind Regards



**ZPK ZONDI**  
**ENVIRONMENTAL HEALTH & CDC**

**Approved/NOT Approved**

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**Ms B MHLONGO**  
**Director: ENVIRONMENTAL HEALTH & CDC**

**DATE:**

ANNEXURE A



health

Department of Health  
REPUBLIC OF SOUTH AFRICA

GES.6/13

HAZARDOUS SUBSTANCES ACT, 1973 (ACT 15 OF 1973)

APPLICATION FOR A LICENSE TO CARRY ON BUSINESS AS A SUPPLIER OF GROUP I HAZARDOUS SUBSTANCES

1. (a) Full name (in block letters) Mathew Dylan Maragan.
- (b) Full business address (identifying locality where business will be conducted) Coastal Farms 35 Berg Road MANSBURG
- (c) Name under which business will be conducted LSC PAC (PTY) LTD.
- (d) Capacity in which the application is made Director
2. What category or items of Group I hazardous substances do you desire to supply? Category B
3. Is a separate room, cupboard or enclosure available in which the hazardous substances can be kept under lock and key? Yes
4. Has an application by you for a certificate authorizing the sale of poisons under the Medical, Dental and Pharmacy Act, 1928 (Act 13 of 1928) been refused at any time? No  
If so, furnish reasons: N/A
5. Are you conversant with the provisions of Act 15 of 1973 and the regulations regarding Group I hazardous substances? Yes
6. Have you previously been granted a license in terms of Act 15 of 1973? If so, please quote the number and date of issue thereof and your address at the time. HSLDC 21/04/2017

26/04/2021  
Date

[Signature]  
Signature of applicant

Revenue Stamp  
R20

- 2.7 Are fire extinguishers and hoses available?
- 2.8 Are fire extinguishers and hoses serviced?
- 2.9 Are responsible person/s for hazardous substances trained in using the fire extinguisher and hose?
- 2.10 Is proof of training regarding the above provided?

Yes	<input checked="" type="checkbox"/>
Yes	<input checked="" type="checkbox"/>
Yes	<input checked="" type="checkbox"/>
Yes	<input checked="" type="checkbox"/>

Comments:-----  
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**3. SECTION C: CONDITIONS OF SALE OR SUPPLY OF GROUP 1 HAZARDOUS SUBSTANCES**

- 3.1 Does the sale of hazardous substance/s take place only at the address mentioned in the licence/application and under the control of the person mentioned therein?
- 3.2 Are the hazardous substance/s?
  - 3.2.1 Licence number endorsed on relative invoices if substances are supplied to other licensees?
  - 3.2.2 Sold over any counter or table used in connection with the handling, preparation or sale of any article of food or drink?
  - 3.2.3 Containers securely closed, free from leaks and of sufficient strength to withstand rough usage and preclude any loss of the contents?
  - 3.2.4 Kept in the unbroken, original container as supplied by the manufacturer or wholesale dealer?
  - 3.2.5 Sold to persons under the age of 16 years except on a written order?

Yes	<input checked="" type="checkbox"/>	No	
Yes		No	
Yes		No	<input checked="" type="checkbox"/>
Yes	<input checked="" type="checkbox"/>	No	
Yes	<input checked="" type="checkbox"/>	No	
Yes		No	<input checked="" type="checkbox"/>

Comments:-----  
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**4. SECTION D: RECORDS TO BE KEPT**

4.1 Type of record keeping:

Book	Computer <input checked="" type="checkbox"/>	Cardex	None	Other (specify):
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4.2 Is the hazardous substance book / register kept in proper order and up to date?

4.3 Is the book/register balanced regularly showing clearly the quantity of each substance remaining in stock at the last day of April and September of each year?

Yes	<input checked="" type="checkbox"/>
Yes	<input checked="" type="checkbox"/>

4.4 Is the balancing completed within three (3) days following each of the said dates above?

4.5 Does the book/register contain the following information?

4.4.1 Date of the sale or supply.

4.4.2 Name and quantity of the substance.

4.4.3 Trade name of the product containing the substance.

4.4.4 Full name and address of the purchaser or recipient.

4.4.5 Purpose for which the substance required is to be stated.

4.4.6 Signature of the purchaser or recipient.

4.4.7 Name of the active ingredient.

4.4.8 Quantity of the active ingredient.

4.6 Is the book/register, invoices or orders retained for a period of not less than three (3) years from the date of the last entry therein?

4.7 Is every substance stocked provided with a Safety Data Sheet (SDS)?

4.8 Are procedures and plans in place for accidental spillages?

Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>

Comments:-----  
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### 5. SECTION E: LABELLING OF HAZARDOUS SUBSTANCE/S

5.1 Group 1 Category A – substances: Does the label contain the following if imported, manufactured or packed in the Republic?

- 5.1.1 Name of the product.
- 5.1.2 Name and address of supplier/manufacturer.
- 5.1.3 Chemical name of the specific hazardous substance/s contained therein.
- 5.1.4 A skull and crossbones symbol, together with the words "Poison" and "Vergif." Symbol cover at least one-tenth of surface area of label and at least 1 cm<sup>2</sup> in size.
- 5.1.5 The words "Act 15 of 1973: Group 1."
- 5.1.6 The words "Keep out of reach of children" and "Hou buite bereik van kinders."
- 5.1.7 Active ingredient/s
- 5.1.8 Label placed on one or more surfaces and can be read horizontally when set down normally
- 5.1.9 Does outer package containing one or more inner containers has:
- skull & crossbones symbol
  - words "Poison" and "Vergif"
  - chemical name of substance/s

Yes	<input checked="" type="checkbox"/>
Yes	<input checked="" type="checkbox"/>
Yes	<input checked="" type="checkbox"/>
Yes	<input checked="" type="checkbox"/>

Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>

5.2. Group 1 Category B – substances: Does the label contain the following?

- 5.2.1 imported into the Republic: Labelling same as for Group 1 Category A
- 5.2.2 manufactured or packed in Republic: Label approved by Department of Agriculture under Act 36 of 1947
- 5.2.3 Includes directions for disposal of empty containers.

Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>

Comments:-----  
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**6. SECTION F: DISPOSAL OF EMPTY CONTAINERS**

6.1 How are empty containers disposed off?



- 6.1.1 Is returned to the supplier provided it is securely closed?
- 6.1.2 Is perforated and flattened and then buried in the ground or disposed of in any other safe manner?
- 6.1.3 Is not used for any foodstuff or cosmetic as defined by the Foodstuffs, Cosmetics and Disinfectants Act, 1972 (Act 54 of 1972)?
- 6.1.4 Are empty containers containing foodstuff or cosmetic as defined by the Foodstuffs, Cosmetics and Disinfectants Act, 1972 (Act 54 of 1972), used as a container for any Group I hazardous substance?

Yes
Yes
Yes
Yes

Comments: ENVIRONMENTAL CLEANING DISPOSE

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**7. SECTION G: MANAGEMENT PRACTICE**

- 13.4 Does the dealer have copies of the following?
  - 13.4.1 Hazardous Substance Act, 1973 (Act No: 15 of 1973) and Regulations
  - 13.4.2 SANS Code 10228
  - 13.4.3 SANS Code 10229
  - 13.4.4 Occupational Health and Safety Act, 1993 (Act No: 85 of 1993) and Regulations
  - 13.4.5 National Road Traffic Act, 1996 (Act No: 93 of 1996)
  - 13.4.6 Fertilizers, Farm Feeds, Agricultural Remedies and Stock Remedies Act, 1947 (Act No: 36 of 1947)

<del>Yes</del>	N
<del>Yes</del>	N
<del>Yes</del>	N
<del>Yes</del>	N
<del>Yes</del>	N
<del>Yes</del>	N

Comments:-----

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**8. GENERAL/ADDITIONAL COMMENTS**

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23/04/21

DATE OF EVALUATION

Z.M.C Zandi

NAME OF EHP



SIGNATURE OF DEALER

23.4.21.

SIGNATURE OF EHP

# ANNEXURE A



health

Department  
Health  
REPUBLIC OF SOUTH AFRICA

GES.6/13

## HAZARDOUS SUBSTANCES ACT, 1973 (ACT 15 OF 1973)

### APPLICATION FOR A LICENSE TO CARRY ON BUSINESS AS A SUPPLIER OF GROUP I HAZARDOUS SUBSTANCES

1. (a) Full name (in block letters) MANICKUM CHINIAH (MANNIE)  
(b) Full business address (identifying locality where business will be conducted) 30 UMGANU RD CORNUBIA RIDGE LOGISTICS PARK  
(c) Name under which business will be conducted UPL - LTD  
(d) Capacity in which the application is made MANAGER
2. What category or items of Group I hazardous substances do you desire to supply?  
A - B
3. Is a separate room, cupboard or enclosure available in which the hazardous substances can be kept under lock and key?  
YES
4. Has an application by you for a certificate authorizing the sale of poisons under the Medical, Dental and Pharmacy Act, 1928 (Act 13 of 1928) been refused at any time?  
NO  
If so, furnish reasons: N/A
5. Are you conversant with the provisions of Act 15 of 1973 and the regulations regarding Group I hazardous substances?  
YES
6. Have you previously been granted a license in terms of Act 15 of 1973? If so, please quote the number and date of issue thereof and your address at the time.  
YES

24/03/2021  
Date

Revenue Stamp  
R20

Signature of applicant

# NATIONAL EVALUATION TOOL FOR HAZARDOUS SUBSTANCES (GROUP 1: CATEGORY A AND B)

(TICK BLOCKS WHERE APPLICABLE)

## 1. SECTION A: DETAILS OF HAZARDOUS SUBSTANCE DEALER

1.1 Name of hazardous substance dealer: UPL - Ltd

1.2 Name of person or alternative person/s in charge: CHINIAH MANUKUM

1.3 Type of hazardous substance application:

New	
Renewal	X
Other (specify):	

1.4 Type of Dealer:

Importer	Manufacturer	Wholesale Distributor	Registered Pharmacist	Bona Fide Laboratory	Research Institution
Teaching Institution	General Dealer	Co-operative Trading Society	Co-operative Agricultural Society or Company	Other (specify):	

1.5 Hazardous Substance/s kept on premises:

Group 1, Category:

A	
B	
A & B	X

1.6 Intended use of hazardous substance/s:

Mining or Industrial purposes	Retail Trade	Control of Problem Animals & Insects	Sale or supply to a Teaching Institution	Other (specify):
Export	Import	Sale or supply to a Wholesale Distributor	Sale or supply to a Government Department	
Sale or supply to Registered Pharmacist in possession of a licence	Sale or supply to a Bona fide laboratory	Sale or supply to a Research Institution	Sale or supply to a Provincial Department	

1.6 Details of previous licence:

1.6.1 Licence No: ND01-K2NP 59/2020

1.6.2 Date issued: 2020/06/01

1.7 Address: Postal: Same as physical address

: Physical: 30 UMNGANU Road CORNUBIA, Logistic PARK

1.8 Telephone number: 0

1.9 Fax number: \_\_\_\_\_

1.10 E-mail address: mannie.chimiah@uph-td.com

1.11 Cellphone number: 082 801 79 35

**2. SECTION B: STORAGE**

2.1 How are hazardous substances kept?

2.1.1 Securely under lock and key at all times except when stocks are added or removed?

2.1.2 Under proper care and control?

2.1.3 Entirely separate from articles of food and drink?

2.1.4 Either in a warehouse, cupboard, enclosure or separate room reserved solely for this purpose?

2.1.5 Substances kept for sale or supply in unbroken, original container as supplied by the manufacturer or wholesale dealer?

2.2 Are containers in direct contact with the floor?

2.3 Is storage area labeled?

2.4 Is adequate lighting and ventilation provided?

2.5 Are floors and walls smooth and non-porous?

2.6 Is the roof impermeable / waterproof and firm?

Yes	No
<input checked="" type="checkbox"/>	<input type="checkbox"/>
Yes	No
<input checked="" type="checkbox"/>	<input type="checkbox"/>
Yes	No
<input checked="" type="checkbox"/>	<input type="checkbox"/>
Yes	No
<input checked="" type="checkbox"/>	<input type="checkbox"/>
Yes	No
<input checked="" type="checkbox"/>	<input type="checkbox"/>
Yes	No
<input checked="" type="checkbox"/>	<input type="checkbox"/>
Yes	No
<input checked="" type="checkbox"/>	<input type="checkbox"/>
Yes	No
<input checked="" type="checkbox"/>	<input type="checkbox"/>

2.7 Are fire extinguishers and hoses available?

2.8 Are fire extinguishers and hoses serviced?

2.9 Are responsible person/s for hazardous substances trained in using the fire extinguisher and hose?

2.10 Is proof of training regarding the above provided?

Yes	<input checked="" type="checkbox"/>
Yes	<input checked="" type="checkbox"/>
Yes	<input checked="" type="checkbox"/>
Yes	<input checked="" type="checkbox"/>

Comments:-----  
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**3. SECTION C: CONDITIONS OF SALE OR SUPPLY OF GROUP 1 HAZARDOUS SUBSTANCES**

3.1 Does the sale of hazardous substance/s take place only at the address mentioned in the licence/application and under the control of the person mentioned therein?

3.2 Are the hazardous substance/s?

3.2.1 Licence number endorsed on relative invoices if substances are supplied to other licensees?

3.2.2 Sold over any counter or table used in connection with the handling, preparation or sale of any article of food or drink?

3.2.3 Containers securely closed, free from leaks and of sufficient strength to withstand rough usage and preclude any loss of the contents?

3.2.4 Kept in the unbroken, original container as supplied by the manufacturer or wholesale dealer?

3.2.5 Sold to persons under the age of 16 years except on a written order?

Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>

Comments:-----  
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**4. SECTION D: RECORDS TO BE KEPT**

4.1 Type of record keeping:

SAP SYSTEM

Book	Computer <input checked="" type="checkbox"/>	Cardex	None	Other (specify):
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4.2 Is the hazardous substance book / register kept in proper order and up to date?

Yes	<input checked="" type="checkbox"/>
Yes	<input checked="" type="checkbox"/>

4.3 Is the book/register balanced regularly showing clearly the quantity of each substance remaining in stock at the last day of April and September of each year?

4.4 Is the balancing completed within three (3) days following each of the said dates above?

4.5 Does the book/register contain the following information?

4.4.1 Date of the sale or supply.

4.4.2 Name and quantity of the substance.

4.4.3 Trade name of the product containing the substance.

4.4.4 Full name and address of the purchaser or recipient.

4.4.5 Purpose for which the substance required is to be stated.

4.4.6 Signature of the purchaser or recipient.

4.4.7 Name of the active ingredient.

4.4.8 Quantity of the active ingredient.

4.6 Is the book/register, invoices or orders retained for a period of not less than three (3) years from the date of the last entry therein?

4.7 Is every substance stocked provided with a Safety Data Sheet (SDS)?

4.8 Are procedures and plans in place for accidental spillages?

Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>

Comments:-----  
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### 5. SECTION E: LABELLING OF HAZARDOUS SUBSTANCE/S

5.1 Group 1 Category A – substances: Does the label contain the following if imported, manufactured or packed in the Republic?



5.1.1 Name of the product.

Yes	<input checked="" type="checkbox"/>
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5.1.2 Name and address of supplier/manufacturer.

Yes	<input checked="" type="checkbox"/>
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5.1.3 Chemical name of the specific hazardous substance/s contained therein.

Yes	<input checked="" type="checkbox"/>
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5.1.4 A skull and crossbones symbol, together with the words "Poison" and "Vergif." Symbol cover at least one-tenth of surface area of label and at least 1 cm<sup>2</sup> in size.

Yes	<input checked="" type="checkbox"/>
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5.1.5 The words "Act 15 of 1973: Group 1."

5.1.6 The words "Keep out of reach of children" and "Hou buite bereik van kinders."

Yes	<input checked="" type="checkbox"/>
No	<input type="checkbox"/>

5.1.7 Active ingredient/s

Yes	<input type="checkbox"/>
No	<input type="checkbox"/>

5.1.8 Label placed on one or more surfaces and can be read horizontally when set down normally

Yes	<input checked="" type="checkbox"/>
No	<input type="checkbox"/>

5.1.9 Does outer package containing one or more inner containers has:

- skull & crossbones symbol
- words "Poison" and "Vergif"
- chemical name of substance/s

Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
Yes	<input type="checkbox"/>	No	<input type="checkbox"/>

5.2. Group 1 Category B – substances: Does the label contain the following?

5.2.1 imported into the Republic: Labelling same as for Group 1 Category A

Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>

5.2.2 manufactured or packed in Republic: Label approved by Department of Agriculture under Act 36 of 1947

Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
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5.2.3 Includes directions for disposal of empty containers.

Comments:-----  
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### 6. SECTION F: DISPOSAL OF EMPTY CONTAINERS

6.1 How are empty containers disposed off?



- 6.1.1 Is returned to the supplier provided it is securely closed?
- 6.1.2 Is perforated and flattened and then buried in the ground or disposed of in any other safe manner?
- 6.1.3 Is not used for any foodstuff or cosmetic as defined by the Foodstuffs, Cosmetics and Disinfectants Act, 1972 (Act 54 of 1972)?
- 6.1.4 Are empty containers containing foodstuff or cosmetic as defined by the Foodstuffs, Cosmetics and Disinfectants Act, 1972 (Act 54 of 1972), used as a container for any Group I hazardous substance?

<del>Yes</del>
Yes
Yes
Yes

Comments:-----  
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**7. SECTION G: MANAGEMENT PRACTICE**

13.4 Does the dealer have copies of the following?

- 13.4.1 Hazardous Substance Act, 1973 (Act No: 15 of 1973) and Regulations
- 13.4.2 SANS Code 10228
- 13.4.3 SANS Code 10229
- 13.4.4 Occupational Health and Safety Act, 1993 (Act No: 85 of 1993) and Regulations
- 13.4.5 National Road Traffic Act, 1996 (Act No: 93 of 1996)
- 13.4.6 Fertilizers, Farm Feeds, Agricultural Remedies and Stock Remedies Act, 1947 (Act No: 36 of 1947)

<del>Yes</del>	N
<del>Yes</del>	N
Yes	N
<del>Yes</del>	N
<del>Yes</del>	No
Yes	No

Comments:-----  
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**8. GENERAL/ADDITIONAL COMMENTS**

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24/03/21

DATE OF EVALUATION

Z Zombi

NAME OF EHP

[Signature]

SIGNATURE OF DEALER

[Signature]

SIGNATURE OF EHP

ANNEXURE A



health

Department  
Health  
REPUBLIC OF SOUTH AFRICA


GES.6/13

HAZARDOUS SUBSTANCES ACT, 1973 (ACT 15 OF 1973)

APPLICATION FOR A LICENSE TO CARRY ON BUSINESS AS A SUPPLIER OF  
GROUP I HAZARDOUS SUBSTANCES

1. (a) Full name (in block letters) JACQUE CUNNINGHAM  
(b) Full business address (identifying locality where business will be conducted) 3A, CANTON WALK, KRIT LANE, MAZUREN  
(c) Name under which business will be conducted ALPHA PHARM (QUEENSBURG)  
(d) Capacity in which the application is made PHARMACY P.P.
2. What category or items of Group I hazardous substances do you desire to supply?  
A
3. Is a separate room, cupboard or enclosure available in which the hazardous substances can be kept under lock and key?  
YES
4. Has an application by you for a certificate authorizing the sale of poisons under the Medical and Pharmacy Act, 1928 (Act 13 of 1928) been refused at any time?  
NO  
If so, furnish reasons: \_\_\_\_\_
5. Are you conversant with the provisions of Act 15 of 1973 and the regulations regarding Group I hazardous substances?  
YES
6. Have you previously been granted a license in terms of Act 15 of 1973? If so, please quote the number and date of issue thereof and your address at the time.  
YES

25/3/2021  
Date

  
Signature of applicant

Revenue Stamp  
R20

# NATIONAL EVALUATION TOOL FOR HAZARDOUS SUBSTANCES (GROUP 1: CATEGORY A AND B)

(TICK BLOCKS WHERE APPLICABLE)

## 1. SECTION A: DETAILS OF HAZARDOUS SUBSTANCE DEALER

1.1 Name of hazardous substance dealer: ALPHA PHARM QUEENSBURGH

1.2 Name of person or alternative person/s in charge: JACKIE CUNNINGHAM

1.3 Type of hazardous substance application:

New	
Renewal	X
Other (specify):	

1.4 Type of Dealer:

Importer	Manufacturer	Wholesale Distributor	Registered Pharmacist X	Bona Fide Laboratory	Research Institution
Teaching Institution	General Dealer	Co-operative Trading Society	Co-operative Agricultural Society or Company	Other (specify):	

1.5 Hazardous Substance/s kept on premises:

Group 1, Category:

A	X
B	
A & B	

1.6 Intended use of hazardous substance/s:

Mining or Industrial purposes	Retail Trade	Control of Problem Animals & Insects	Sale or supply to a Teaching Institution	Other (specify): <b>NOT INTENDED FOR USE / AWAITING DISPOSAL</b>
Export	Import	Sale or supply to a Wholesale Distributor	Sale or supply to a Government Department	
Sale or supply to Registered Pharmacist in possession of a licence	Sale or supply to a Bona fide laboratory	Sale or supply to a Research Institution	Sale or supply to a Provincial Department	

1.6 Details of previous licence:

1.6.1 Licence No: NDOH-KZNP 52/2020

1.6.2 Date issued: 2020/06/01

1.7 Address: Postal SAME AS physical address.

: Physical 3A CORONATION WALK, PURITY LANE, MALVERN

1.8 Telephone number: /

1.9 Fax number: /

1.10 E-mail address: gpham@interkam.co.za

1.11 Cellphone number: 082 967 5371

**2. SECTION B: STORAGE**

2.1 How are hazardous substances kept?

2.1.1 Securely under lock and key at all times except when stocks are added or removed?

2.1.2 Under proper care and control?

2.1.3 Entirely separate from articles of food and drink?

2.1.4 Either in a warehouse, cupboard, enclosure or separate room reserved solely for this purpose?

2.1.5 Substances kept for sale or supply in unbroken, original container as supplied by the manufacturer or wholesale dealer?

2.2 Are containers in direct contact with the floor?

2.3 Is storage area labeled?

2.4 Is adequate lighting and ventilation provided?

2.5 Are floors and walls smooth and non-porous?

2.6 Is the roof impermeable / waterproof and firm?

Yes <input checked="" type="checkbox"/>	No
Yes <input checked="" type="checkbox"/>	No
Yes <input checked="" type="checkbox"/>	No
Yes <input checked="" type="checkbox"/>	No
No <input checked="" type="checkbox"/>	
Yes <input type="checkbox"/>	No <input type="checkbox"/>
Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Yes <input checked="" type="checkbox"/>	No
Yes <input type="checkbox"/>	No <input type="checkbox"/>
Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

- 2.7 Are fire extinguishers and hoses available?
- 2.8 Are fire extinguishers and hoses serviced?
- 2.9 Are responsible person/s for hazardous substances trained in using the fire extinguisher and hose?
- 2.10 Is proof of training regarding the above provided?

Yes	X
Yes	X
Yes	X
Yes	

Comments:-----  
 -----  
 -----  
 -----

**3. SECTION C: CONDITIONS OF SALE OR SUPPLY OF GROUP 1 HAZARDOUS SUBSTANCES**

- 3.1 Does the sale of hazardous substance/s take place only at the address mentioned in the licence/application and under the control of the person mentioned therein?
- 3.2 Are the hazardous substance/s?
  - 3.2.1 Licence number endorsed on relative invoices if substances are supplied to other licensees?
  - 3.2.2 Sold over any counter or table used in connection with the handling, preparation or sale of any article of food or drink?
  - 3.2.3 Containers securely closed, free from leaks and of sufficient strength to withstand rough usage and preclude any loss of the contents?
  - 3.2.4 Kept in the unbroken, original container as supplied by the manufacturer or wholesale dealer?
  - 3.2.5 Sold to persons under the age of 16 years except on a written order?

Yes	No
Yes	No
Yes	No
Yes	No
Yes	No

Comments: **NOT FOR SALE**  
 -----  
 -----  
 -----

**4. SECTION D: RECORDS TO BE KEPT**

4.1 Type of record keeping:

Book <input checked="" type="checkbox"/>	Computer	Cardex	None	Other (specify):
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4.2 Is the hazardous substance book / register kept in proper order and up to date?

4.3 Is the book/register balanced regularly showing clearly the quantity of each substance remaining in stock at the last day of April and September of each year?

Yes	<input checked="" type="checkbox"/>
Yes	<input checked="" type="checkbox"/>

4.4 Is the balancing completed within three (3) days following each of the said dates above?

4.5 Does the book/register contain the following information?

4.4.1 Date of the sale or supply.

4.4.2 Name and quantity of the substance.

4.4.3 Trade name of the product containing the substance.

4.4.4 Full name and address of the purchaser or recipient.

4.4.5 Purpose for which the substance required is to be stated.

4.4.6 Signature of the purchaser or recipient.

4.4.7 Name of the active ingredient.

4.4.8 Quantity of the active ingredient.

4.6 Is the book/register, invoices or orders retained for a period of not less than three (3) years from the date of the last entry therein?

4.7 Is every substance stocked provided with a Safety Data Sheet (SDS)?

4.8 Are procedures and plans in place for accidental spillages?

Yes	<input type="checkbox"/>
Yes	<input type="checkbox"/>
Yes	<input type="checkbox"/>
Yes	<input type="checkbox"/>
Yes	<input type="checkbox"/>
Yes	<input type="checkbox"/>
Yes	<input type="checkbox"/>
Yes	<input type="checkbox"/>
Yes	<input type="checkbox"/>
Yes	<input type="checkbox"/>
Yes	<input type="checkbox"/>
Yes	<input type="checkbox"/>
Yes	<input type="checkbox"/>
Yes	<input type="checkbox"/>
Yes	<input type="checkbox"/>

Comments: N/A

5. SECTION E: LABELLING OF HAZARDOUS SUBSTANCE/S

5.1 Group 1 Category A - substances: Does the label contain the following if imported, manufactured or packed in the Republic?



5.1.1 Name of the product.

<del>Yes</del>	
Yes	
Yes	
<del>Yes</del>	

5.1.2 Name and address of supplier/manufacturer.

5.1.3 Chemical name of the specific hazardous substance/s contained therein.

5.1.4 A skull and crossbones symbol, together with the words "Poison" and "Vergif." Symbol cover at least one-tenth of surface area of label and at least 1 cm<sup>2</sup> in size.

5.1.5 The words "Act 15 of 1973: Group 1."

5.1.6 The words "Keep out of reach of children" and "Hou buite bereik van kinders."

<del>Yes</del>	N
<del>Yes</del>	N

5.1.7 Active ingredient/s

Yes	N
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5.1.8 Label placed on one or more surfaces and can be read horizontally when set down normally

Yes	N
<input checked="" type="checkbox"/>	

5.1.9 Does outer package containing one or more inner containers has:

- skull & crossbones symbol
- words "Poison" and "Vergif"
- chemical name of substance/s

Yes	No
<del>Yes</del>	No
Yes	No

5.2. Group 1 Category B – substances: Does the label contain the following?

5.2.1 imported into the Republic: Labelling same as for Group 1 Category A

5.2.2 manufactured or packed in Republic: Label approved by Department of Agriculture under Act 36 of 1947

5.2.3 Includes directions for disposal of empty containers.

Yes	No
Yes	No
Yes	No

Comments:-----  
-----  
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### 6. SECTION F: DISPOSAL OF EMPTY CONTAINERS

6.1 How are empty containers disposed off?

6.1.1 Is returned to the supplier provided it is securely closed?

Yes
Yes
Yes
Yes

6.1.2 Is perforated and flattened and then buried in the ground or disposed of in any other safe manner?

6.1.3 Is not used for any foodstuff or cosmetic as defined by the Foodstuffs, Cosmetics and Disinfectants Act, 1972 (Act 54 of 1972)?

6.1.4 Are empty containers containing foodstuff or cosmetic as defined by the Foodstuffs, Cosmetics and Disinfectants Act, 1972 (Act 54 of 1972), used as a container for any Group 1 hazardous substance?

Comments: W/A

**7. SECTION G: MANAGEMENT PRACTICE**

13.4 Does the dealer have copies of the following?

13.4.1 Hazardous Substance Act, 1973 (Act No: 15 of 1973) and Regulations

13.4.2 SANS Code 10228

13.4.3 SANS Code 10229

13.4.4 Occupational Health and Safety Act, 1993 (Act No: 85 of 1993) and Regulations

13.4.5 National Road Traffic Act, 1996 (Act No: 93 of 1996)

13.4.6 Fertilizers, Farm Feeds, Agricultural Remedies and Stock Remedies Act, 1947 (Act No: 36 of 1947)

<del>Yes</del>	N
<del>Yes</del>	N
Yes	N
<del>Yes</del>	N
<del>Yes</del>	N
Yes	N

Comments: \_\_\_\_\_

**8. GENERAL/ADDITIONAL COMMENTS**

SUBSTANCES NOT FOR SALE - PACKED AND AWAITING DISPOSAL

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
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\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2/3/2021

DATE OF EVALUATION

[Signature]

SIGNATURE OF DEALER

Z. Zordi

NAME OF EHP

[Signature]

SIGNATURE OF EHP