

For office u	ise only
Permit Application code	
Date received	
Date referred to Province	
Permit / Rejection number	

# PERMIT APPLICATION FORM

Application for the permit/s in terms of Chapter 7 of the National Environmental Management: Biodiversity Act, 2004 (Act No. 10 of 2004), as amended

## ALIEN AND INVASIVE SPECIES REGULATIONS

## PLEASE NOTE

- Application forms must be completed in legible block letters.
- The application for a permit to carry out a restricted activity involving an alien and listed invasive species must be accompanied by a risk assessment report in compliance of the Alien and Invasive Species Regulations (NEMBA 2004) in general and with sections 16 to19 of these regulations in particular. The risk assessment report must be compiled by an environmental assessment practitioner (as per section 17) and must specifically provide accurate location and extent of proposed activity.
- A risk assessment report done by Certificated Natural Scientist or Candidate Natural Scientist can ONLY be accepted if signed off by a Professional Natural Scientist.
- Should the risk assessment report and other permit application documentation need to be reviewed by a scientific expert; the
  applicant will bear any cost associated with this review.
- If applying for a renewal, the application must be accompanied by a copy of a CURRENT permit, proof of payment; made at least 60 working days before the expiry of the period for which the permit was issued.
- If applying for an amendment, the application must be accompanied by a copy of a CURRENT permit indicating and highlighting items to be amended. If necessary, please attach additional pages should more space be required.
- The application process may take up to 60 working days or more; subject to the inclusion and submission of all the information required.
- Any additional information, which the applicant deems necessary, should be attached to this application as an addendum. This
  could include any certifications the applicant may have been awarded (e.g., Forest Certification, Fairtrade, etc.)
- This application must be addressed to: The Issuing Authority, Department of Forestry, Fisheries and the Environment: Branch Environmental Programmes, 4<sup>th</sup> Floor, 14 Loop Street, Cape Town, 8000. Alternatively, applications may be posted to: The Issuing Authority, Department of Forestry, Fisheries and the Environment, Private Bag X4390, Cape Town, 8000 or emailed to: <u>AlSpermits@environment.gov.za or faxed to 086 604 4080.</u>
- The Department may request the applicant to submit further information or make representations before a decision is made on the permit application.
- The Department cannot be held liable for the loss of a permit in the post if requested to be posted.
- Failure to provide the information requested herein may result in the application not being processed or delayed.
- Failure to provide the information requested within the stipulated time frame may also constitute non-compliance.
- The applicant will have a right to appeal the decision should the Department decline or reject the application for a permit.

PART A: KIND OF PERMIT APPLIED FOR	(Mark relevant box "Y")	
FARTA, KIND OF FERMIT AFFLIED FOR	(WAIN TELEVALLE DUX A)	

New Permit

Renewal

Amendment

Current Permit No. (For Renewal or Amendment only) .....

Application is required for: (Please circle the appropriate restricted activities - more than one may be selected)

	Restricted Activities as defined in the Act
a.	Importing into the Republic, including introducing from the sea, any specimen of a listed invasive species. Complete PART A, B, C, D
b.	Having in possession or exercising physical control over any specimen of a listed invasive species. Complete PART A, B, C, E
C.	Growing, breeding or in any other way propagating any specimen of a listed invasive species, or causing it to multiply. Complete PART A, B, C, E
d.	Conveying, moving, or otherwise translocating any specimen of a listed invasive species. Complete PART A, B, C, D
e.	Selling or otherwise trading in, buying, receiving, giving, donating, or accepting as a gift, or in any way acquiring or disposing of any specimen of a listed invasive species. Complete PART A, B, C, D
f.	Carry out restricted activities for research purposes. Complete PART A, B, C, D, E, F
	Restricted Activities as defined in Regulation 6
g.	Spreading or allowing the spread of any specimen of a listed invasive species. Complete PART A, B, C, D, E, F

- h. Releasing any specimen of a listed invasive species. Complete PART A, B, C, D, E, F
- i. The transfer or release of a specimen of a listed invasive fresh-water species from one discrete catchment system in which it occurs, to another discrete catchment system in which it does not occur; or, from within a part of a discrete catchment system where it does occur to another part where it does not occur as a result of a natural or artificial barrier. Complete PART A, B, C, D, E, F
- j. Discharging of or disposing into any waterway or the ocean, water from an aquarium, tank or other receptacle that has been used to keep a specimen of an alien or a listed invasive species. Complete PART A, B, C, D, E, F

## PART B 1: APPLICANT'S DETAILS

Full name or Company name
Identity or company registration number (Attach a certified copy):

Physical Address		Postal		
-		Address		
	Postal Code		Postal Code	
Tel No. (work)		Tel No.		
		(home)		
Fax No.				
Cell No.				
E-mail address				

PART B 2: APPLICANT'S DETAILS (Duly Authorized Representativ	– if applicable)

Title:	Representative full	Name(s):			
Surname:					
Identity or Passport	No. (Attach a certified	l copy)			
Physical Address			Postal		
-			Address		
	Postal Code			Postal Code	
Tel No. (work)			Tel No.		
			(home)		
Fax No.					
Cell No.					
E-mail address					

## PART C: SPECIE(S) INFORMATION

SCIENTIFIC NAME (GENUS & SPECIES)	COMMON NAME	QUANTITY (INCL. UNITS)	COUNTRY OF ORIGIN

Please attach additional pages if you require more space to complete this.

PART D: IMPORTING, CONVEYING/MOVING /TRAN ACQUIRING/ DISPOSING DETAILS	SLOCATING; SELLING/TRADING/BUYING; GIVING/ RECEIVING/	Donating;
Exporting/Trading/Translocating from:	Importing/Trading/Translocating to:	
Name	Name	
I.D No.	I.D No.	
Type of facility (e.g., residential, research)	Type of facility (e.g., residential, research)	
Physical Address	Physical Address	
District	District	
Country/Province	Province	
Port of entry into RSA (if		
applicable)		
Expected date of		
activity		
Purpose or reason of activity		
Means of	Flight / Vehicle	
Transportation	Registration / IMO	
	no.	

Please note: A permit for the import into the Republic, including introduction from the sea, of an alien or listed invasive species is valid for one consignment. Please attach additional pages if you require more space to complete this.

#### PART E: FOR POSSESSING OR GROWING/BREEDING/PROGRAGATING

Full name or Con	npany name				•
Identity or compa	ny registration num	ber			
Type of facility (re	esidential, nursery, a	aquarium etc.)			
Physical			Postal		
Address			Address		
(where					
restricted					
activity is to	Postal Code			Postal Code	
be carried out					
Tel No. (work)			Tel No.		
			(home)		
Fax No.					
Cell No.					
E-mail address					

Please attach additional pages if you require more space to complete this.

#### PART F: ALL RESTRICTED ACTIVITIES – UNDER REGULATION 6

Full name or Company name ..... Identity or company registration number ..... Type of facility (residential, nursery, aquarium etc.) .....

Physical Address (where prescribed activity is to be carried out)				
carried outj	Postal Code	1		
Tel No. (work)	1 03(0) 0000	1	Tel No. (home)	
Fax No.				
Cell No.				
E-mail address				
Brief description of the	e activity to be co	nducted		
	,			

Please attach additional pages if you require more space to complete this.

PART G: Payment Details: Applications not accompanied by proof of payment will not be processed

 Payment method is via direct deposit or EFT

 Bank:
 ABSA Bank

 Account Name:
 Department of Forestry, Fisheries, and the Environment

 Account Number:
 40-7981-6531

 Branch Name:
 Pretoria

 Branch Code:
 632005

- Please use initials and surname as reference number on the bank deposit slip or EFT payment. The following should be included as your reference number:
  - Reference number for Flora applications: 35142401

OR

- Reference number for Fauna applications: 35142101
- Please attach proof of payment to the application form
- Application processing fees: (Not refundable)
- No cash or cheques will be accepted at the Department's offices

PART H: APPROVED PERMIT		
Please indicate your preference	Collect permit Receive permit by post	
To receive permit by post, please indicate the address to which the permit should be posted		

#### Checklist (This document checklist should be submitted with your application)

Please check that, where applicable you have.

- Attached a copy of the current permit (only if requesting a renewal or amendment)
- Attached a certified copy of the identity document
- Attached a Risk Assessment Report
- Attached all required supporting documentations (where applicable)
- Attached proof of payment
- Signed and dated the application declaration form before a commissioner of oaths

#### PART I: APPLICANT'S DECLARATION (To be completed in the presence of a Commissioner of Oaths)

I / We.....solemnly swear / affirm that the information provided in this application is true and accurate to the best of my / our knowledge;

agree to pay the permit fee, regardless of issue status, and all costs associated with the permit application of the species listed on this application; and

agree to indemnify the Department against all costs, whether commission, legal fees or otherwise incurred by the Department or the Department's duly authorised agents relating to the recovery of any monies, goods or services owed by me / us to the Department.

Signature of Deponent: ...... Date: .....

I certify that before administering the oath / affirmation I asked the deponent the following questions and wrote his / her answers in his / her presence hereunder.

a) Do you know and understand the contents of the oath/declaration?

Answer:

b) Do you have any objection in taking the prescribed oath/declaration?

Answer: .....

c) Do you consider the prescribed oath/declaration as binding on your conscience?

Answer: ..... I have satisfied myself as to the identity of the deponent.

I certify that the deponent has acknowledged that he / she knows and understands the contents of the declaration / affidavit.

The above signature / mark of the deponent is affixed to the declaration / affidavit in my presence.

#### Signed and sworn to / affirmed before me at .....

This day of	Official stamp
Signature of Commissioner of Oaths Area for which appointed:	

# NOTE

Your application can either be posted, hand-delivered, faxed or emailed as indicated above on page 1. The application should be addressed to the Department of Forestry, Fisheries and the Environment.

## PLEASE DO NOT BIND OR STAPLE THIS FORM TO ANY OTHER DOCUMENTS