**SMALL-SCALE FISHING COMMUNITY EXPRESSION OF INTEREST FORM**

|  |  |
| --- | --- |
|  NAME |  |
| SURNAME |  |
| CELL NUMBER |  |
| TEL NUMBER |  |
| E-MAIL ADDRESS |  |
| FISHING COMMUNITY NAME |  |
| PROVINCE WHERE FISHING COMMUNITY IS LOCATED |  |
| ESTIMATE OF HOW MANY FISHERS IN COMMUNITY |  |
| DATE SUBMITTED |  |
| SIGNATURE OF APPLICANT |  |

**Note: It only takes one person from a community to register an expression of interest with the Department. After the expression of interest process (60 days) the Department will make contact with the community to arrange for a meeting date where the Department will verify all the fishers in the community. NB Submission of expression of interest does not render the applicant a leader or representative of the community.**

**For telephonic enquiry: 086 000 3474**

**Forms can either be e-mailed to** **expressionofinterest@daff.gov.za** **or faxed to 021 402 3622 or hand delivered to the local compliance office or Ezemvelo KZN Wildlife office (the latter is applicable to KZN only).**

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**RECEIPT FOR WHEN EXPRESSION OF INTEREST FORM IS HAND DELIVERED TO A**

**LOCAL FISHERIES OFFICE OR CUSTOMER SERVICE CENTRE**

DATE SUBMITTED:

OFFICE WHERE FORM WAS SUBMITTED:

NAME OF DAFF OFFICIAL RECEIVING FORM:

SIGNATURE OF DAFF OFFICAL RECEIVING FORM:

DEPARTMENTAL STAMP: