



**forestry, fisheries  
& the environment**

Department:  
Forestry, Fisheries and the Environment  
**REPUBLIC OF SOUTH AFRICA**

For office use only:

File Reference Number:	Date Received:

**APPLICATION FOR A LICENCE REGARDING  
ACTIVITIES CONDUCTED IN A STATE FOREST  
[SECTION 23 (1)(g) OF THE NATIONAL FORESTS ACT, 84 of 1998, AS  
AMENDED]**

*PLEASE READ CAREFULLY*

**Complete this form**

If you want to –

- (a) Conduct any activities that may be licensed in a State forest in terms section 23 (1)(l) of the National Forests Act, 1998.

The form must be completed in PRINTED LETTERS and BLACK INK and sent or delivered to the nearest Forestry office of the Department of Forestry, Fisheries and the Environment.

**Exemptions from licensing**

Certain of the abovementioned activities, or parts of a protected tree or its products, may from time to time be exempted from licensing, as published in the Government Gazette Notice number: 30947, 11 April 2008. Enquiries regarding exemptions can be made at the nearest Forestry office of the Department of Forestry, Fisheries and the Environment.

**Fees**

A license fee may be levied for certain activities; the fee is to be guided by the Departmental tariffs. Enquiries regarding tariffs can be made at the nearest Forestry office of the Department of Forestry, Fisheries and the Environment.

**Please mark the applicable box with “x”**

<b>New application</b>	<b>Renewal provide licence number Licence No.:</b>	<b>Amendment/ cancellation</b>
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**A PARTICULARS OF APPLICANT AND GENERAL INFORMATION**

Name of applicant										
ID Number / Passport Number										
Postal address										
Residential address										
Fax number										
Telephone number										
Cellular phone number										
E-mail address										
Gender (For statistical purposes): (Mark with X)	M	F	Race: (Mark with X)	Black	White	Coloured	Indian			
† ATTACH A CERTIFIED COPY OF YOUR IDENTITY DOCUMENT / PASSPORT TO THIS APPLICATION FORM										



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## Describe the forest where the activity will be conducted:

Supply as much as possible, detailed information about the State forest affected

<b>State Forest:</b>
<b>District:</b>
<b>Local municipality:</b>
<b>Town:</b>
<b>Province:</b>

For what period is a licence required?

Who will be the beneficiaries of this license? *(indicate with an X below please)*

Applicant Only	
A Community	
Organization	
Other <i>(specify)</i>	

If applicable, name the community or organisation that will benefit from the proposed activity or project.

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<b>B</b>	<b>DESCRIPTION OF THE ACTIVITY</b>
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a) For what purpose is a licence required?

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Give a brief description of the area prior to the commencement of the activity (e.g. grassland, natural forest or plantation).

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- b) Describe the anticipated environmental impacts and proposed mitigation measures

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- d) Is this an application for a license under a granted servitude?

Mark with X	Yes	No
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- e) Has authorization been granted in terms of other applicable legislation (e.g. NWA, NEMA, CARA, MPRDA, etc.) *Please attach proof of authorization.*

Mark with X	Yes	No
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<b>C</b>	<b>DESCRIPTION OF ACTIVITY (THE MOVING OF WATER, ELECTRICITY, GAS, FUEL AND ANY OTHER THING ACROSS A STATE FOREST) TO BE LICENSED</b>
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- a) What type of activity to be carried out?

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- b) Please describe the mining method to be used (opencast or underground).

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- c) Please describe how your activities will affect the environment including soil, vegetation and landscape.

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- d) Please explain the rehabilitation process you will carry out at the end of your activities. (*Attach Supporting Documents and also include the Site Layout Plan*).

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e) Describe the anticipated environmental impacts of the activity.

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f) Is there a proposed mitigation measures put in place? (Attach a detailed document of a proposed mitigation plan).

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### **DECLARATION BY APPLICANT**

I, the undersigned, declare that all the particulars furnished by me in this application form are true and correct.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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#### **RECOMMENDATIONS BY DAFF OFFICIAL:**



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**Signature:**

**Date:**

**APPROVED/NOT APPROVED:**

**Signature:**

**Date:**