



**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)(m) 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)(m) 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.

**Other laws**

A licence issued under the National Forests Act, 1998, does not exempt you from the provisions of other laws.

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

### 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>

*(If possible, provide a map of the State forest showing the area in which the activity is to be exercised)*

### For what period is a licence required?

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

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

### If a Community, is the community a party to a Community Forestry Agreement (CFA)?

<i>Mark with X</i>	Yes	No
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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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a) Is this an application for a license under a granted servitude?

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

<i>Mark with X</i>	Yes	No
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<b>C</b>	<b>DESCRIPTION OF ACTIVITY (THE USE OF A STATE FOREST FOR ANY OTHER PURPOSE, IF IT IS CONSISTENT WITH THE SUSTAINABLE MANAGEMENT OF THE FOREST) TO BE LICENSED</b>
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a) 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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c) Describe as much as possible the activity to be conducted, including the method and machinery to be used where applicable:

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d) How many people will enter the State forest at which frequency?

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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:**