

Application in terms of Threatened or Protected Marine Species Regulations: NEW ENTRANT

APPLICATION FOR A PERMIT TO CONDUCT A WHITE SHARK CAGE DIVING OPERATION

| APPLICANT NAME | <u>:</u> |
|---------------------------------|----------|
| IDENTIFICATION/ REGISTRATION NO | <u>:</u> |
| INTENDED AREA OF OPERATION | <u>:</u> |

| | IMPORTANT INFORMATION | | Tick block if | required docun | nents are attached |
|--------------------------|---|----------|---------------|----------------|--------------------|
| Section/ Sub section | Documents or Information Required | Annexure | Applicant | Official 1 | Official 2 |
| 1.1 | Certified true copy of the representative 's identify document | 1A - 1 | | | |
| 4.0 | Company registration documents | 1A - 2 | | | |
| 1.2 | Original valid South African Revenue Services (SARS) Tax clearance certificate | 1A - 2 | | | |
| 2.1 | If no, provide explanation to accessing a suitable vessel(s) | 2A | | | |
| 2.2.1 | Proof of vessel ownership detailing shareholding in the vessel(s) | · | | | |
| | South African Maritime Safety Authority (SAMSA) certificate | | | | |
| | Vessel(s) specification documents | 2A - 1 | | | |
| | Motivation supporting nominated vessel(s) as suitable for WSCD | | | | |
| 2.2.2 | Copy of charter lease agreement | | | | |
| | South African Maritime Safety Authority (SAMSA) certificate | | | | |
| | Vessel(s) specification documents | 2A - 2 | | | |
| | Motivation supporting nominated vessel(s) as suitable for WSCD | | | | |
| 2.2.3 | Copy of a vessel(s) purchase agreement | | | | |
| | Vessel(s) specification documents | 2A - 3 | | | |
| | Motivation supporting nominated vessel(s) as suitable for WSCD | | | | |
| 2.3 | If no, provide motivation for cages not approved by SAMSA | 2A - 4 | | | |
| | Certificate from registered engineer for cage(s)to be used | 2A - 5 | | | |
| | Colour photos of the cage(s) | 2A - 6 | | | |
| 3.1 | Broad-Based Black Economic Empowerment (BBBEE) Certificate | 3A - 1 | | | |
| 3.2 - 3.2.1 | Confirmation of shareholding/ownership from registered auditors | 3A - 2 | | | |
| | Attach most recent employment equity plan including workforce profile | | | | |
| 3.3 - 6 | submitted to the Department of labour, if available | 3A - 3 | | | |
| | If yes, provide confirmation of programs to support transformation in the area | | | | |
| 3.4.1 | of operation | 3B - 1 | | | |
| 4.1 | If yes, provide details and any documentation regarding the offence | 4A - 1 | | | |
| 4.2 | If yes, provide details and any documentation any criminal matter pending? | 4A - 2 | | | |
| | If yes, provide details and any documentation giving rise to enforcement action | | | | |
| 4.3 | for contravention in terms of any environmental legislation. | 4A - 3 | | | |
| | If yes, provide details and any documentation regarding the admission of guilt | | | | |
| 4.4 | fine paid | 4A - 4 | | | |
| 5.2 | Provide proof of investment or other investments made to WSCD | 5B | | | |
| 5.3.1 | Provide proof of public liability insurance purchased | 5C | | | |
| 7.1 | If yes, provide an Operational Plan | 7A | | | |
| TAL NUMBER OF PAGES | 1 * ** | | | | |
| sclaimer: Tick by the re | eceiving official or personnel does not confirm the authenticity of the information submitted with the appl | ication. | 1 | 1 | |

1

INSTRUCTIONS

1. General

- 1.1 Applicants are strongly encouraged to read the Policy on White Shark Cage Diving as well as Threatened or Protected Marine Species Regulations enacted at the time of the allocation process.
- 1.2. The Policy are available through the Department's Customer Service Centre, Ground Floor, Environment House, 473 Steve Biko and Soutpansberg Road, Arcadia, Pretoria, 0083 as well as on the Department's website: www.environment.gov.za
- 1.3. The Policy guides the Minister or his/her delegate in considering permit applications.
- 1.4 Handwritten application forms should be completed in **BLOCK LETTERS** and in black ink.

2. Assistance

- 2.1. Applicants may not communicate with the Minister, the Delegated Authority or Officials of the Department regarding their application other than through a service email: wscd@environment.gov.za and at +2721 819 2510 between 08H00-12H00 and 14H00- 16H00. Moreover, no reliance may be placed on any information given or obtained in any other manner.
- 2.2. Applicants will be given an opportunity to submit queries regarding the completion of the form and the annexures. Queries may be submitted until the application closing date at wscd@environment.gov.za. Responses will be emailed to applicants who registered with the Department during road-shows held by the Department at the various application centres. Responses will also be regularly published on the Department's website.

3. Completion and Submission of Application form

- 3.1. Applicants are strongly advised to read the attached explanatory notes when completing the application form. All sections of the application must be completed in full. If a section does not apply to the applicant, it must be marked "N/A".
- 3.2. The application fee payabale in respect of an application for a permit to conduct white shark cage diving is **R9 123,00** as indicated in the Threatened or Protected Marine Species Regulations. Payment must be made to the Department using the Reference

Number: 06399420 and the Company Name to:

Banking details:

Bank: ABSA Branch: Pretoria

Account Name: Department of Environmental Affairs

Branch Code: 632005 Account No: 4079816531 Account: Cheque Account

Proof of payment must be attached to the application form submitted. If proof of payment is not submitted, the application will not be processed.

3.3. Applicants are required to submit one original application including annexures and one copy of the application. The document must be clearly marked marked: ORIGINAL and COPY. Applications must be hand-delivered at the dates, times and venues stipulated in the invitation notice. An application not submitted in accordance with the notice will not be considered.

FAXED OR SCANNED APPLICATIONS WILL NOT BE CONSIDERED.

4. Signing and attensting to the declaration

The applicant or its authourised representative is required to sign the application form and attest to the declaration. If the form is not signed and the declaration is not attested, the application will not be accepted for consideration.

5. Date of Information

Unless otherwise indicated, all questions should be answered with reference to the information as at the date of application.

THE PURPOSE OF THE EXPLANATORY NOTES IS TO ASSIST APPLICANTS IN COMPLETING A NUMBER OF SECTIONS IN THE APPLICATION FORM. SOME SECTIONS ARE CONSIDERED TO BE SELF-EXPLANATORY AND ARE NOT COVERED IN THESE EXPLANATORY NOTES.

SECTION 1: PARTICULARS OF APPLICANT

Section 1.1

The authorised representative is a person appointed by the Applicant to sign all documentation, including the application form, and to receive all communications from the Department relating to the application for a permit. Please note: the Department will only communicate with the authourised representative. The Department will not deal with employees or persons claiming to represent the Applicant.

Section 1.2

Provide the particulars of the Applicant entity. Annexure should contain a operation profile demonstating, inter alia, that the Applicant has the capacity to commence with a WSCD operation within a short period of time. The operation profile should cover the following aspects:

- (i) Origins of entity (e.g when was the entity established and by whom);
- (ii) Organogram (explaining the division or responsibility);
- (iii) Involvement in other tourist-related activities, such as tour operator or guest house proprietor; and
- (iv) Empowerment and skills transfer initiatives.

SECTION 2: ACCESS TO A SUITABLE VESSEL

Applicants are advised to consider Regulation 6(1)(a) which requires the Department to consider whether the Applicant has access to a suitable WSCD vessel. The requirements for vessels are further set out in Regulation 69(2)(b)(ii), Regulation 72(a)(ii)(bb) and in paragraph 8 of the WSCD policy. Applicants must note that they are not required to nominate two vessels. The Department appreciates that New Entrants may not be in a position to nominate vessels which have been certified by SAMSA as safe and suitable for WSCD operations. The two vessels are the maximum provided for in terms of the WSCD policy paragraph 8. Applicants are restricted to two vessels per permit. Vessels may not be used simultaneously. New Entrants must however demonstrate that, if granted a permit, they will have access to a vessel which is likely to be certified (even if alterations still have to be made).

Applicants are advised to consider requirements for the cages to be used in the WSCD operation. Applicants are required to include in the respective annexure, a certificate from a registered Engineer stating that each cage to be used is suitable for WSCD Operations. Applicants are also required to include colour photographs of the top and side views of the cage(s) as annexure.

SECTION 3: ENTITY TRANSFORMATION DETAILS

Applicants are advised to consider paragraph 6.2 and Annexure A to the WSCD policy as well as Regulation 71(1)(c).

Section 3.1

It is important to note that all Applicants must obtain a vertification certificate from an accredied verification provider. Applicants must submit the original and valid B-BBEE Status Level Verification Certificate or certified copies thereof issued by verification agencies accredited by SANAS or registered auditors approved by IRBA or SWORN Affidavit signed by the Commissioner of Oath to substantiate their B-BBEE rating claims. This section must be completed with reference to the contributor level and score as stated in the verification certificate.

Section 3.2

Applicants should retain a record of the names of the shareholders as well as the percentages shareholding at application date.

Section 3.3

Section 3.3 merely requires the Applicant to complete the number of top salary earners and the percentages of black and female salary earners.

Section 3.4

Applicants are advised to consider the definition of "corporate social investment" ("CSI") in the Codes of Good Practice on Broad-Based Black

Economic Empowerment (B-BBEE) Act 53 of 2003 and the Amended Tourism Sector Code (as amended). Applicants should, in particular describe any

CSI initiatives in the local community of operation. The details should be provided in the applicable annexures.

Section 3.5

A "learnership program" is a SETA accredited structured training programme that combines theoretical training with practical experience at a workplace.

SECTION 4: COMPLIANCE AND ENFORCEMENT RECORDS

Applicants are advised to consider Annexure A, paragraph 3.4 of the WSCD policy and Regulation 71(2)(b). Applicants who were convicted of

serious offences in terms of any environmental laws will not be allocated permits unless a satisfactory explanation can be provided. It must be noted that the Applicant should list all transgressions in this section and not only serious transgressions.

SECTION 5: INVESTMENT AND FINANCIAL INFORMATION

Section 5.1

This section is self explanatory. The financial information provided must relate to all the Applicant entity's activities and not only its WSCD operations. If possibe, the information should be drawn from the Applicants financial statements for the relevant years. Applicants are advised to consider the WSCD policy, Annexure A regarding investment, as well as Regulation 71(2)(c).

Section 5.2

Applicants are advised to have regard to the WSCD policy, Annexure A, paragraph 2.4 relating to public liability insurance as well as Regulation 69(2)(d). A copy of the cover page of the insurance policy may be annexed as proof of public liability insurance.

SECTION 6: EMPLOYMENT/ JOB CREATION

Section 6.1

Applicants are advised to consider the WSCD policy, Annexure A, paragraph 3.3 relating to jobs, as well as Regulation 71(2)(d).

Section 6.2

Applicants are advised to consider the WSCD policy, Annexure A as well as Regulation 69(2)(c)(iii) and Regulation 72(a)(iv). It is a requirement of the policy as well as the Regulations that the skipper must be certified by SAMSA as capable of operating the nominated vessel.

Section 6.3

Applicants are advised to consider the WSCD policy, Annexure A, paragraph 2.2 as well as Regulation 69(2)(c)(i) and Regulation 72(a)(iii). Applicants should note that the policy was amended to provide that a qualification and training with a CATHSSETA accredited service provider will be considered. For example, Applicants may submit proof that the tour guide obtained a certificate of registration and badge issued by the Provincial Registrar: Tourist Guides.

Section 6.4

Describe all employment benefits, including medical aid, pension, leave, maternity benefits, etc.

Section 6.5

Applicants should focus, in particular, on training opportunities provided to employees. These could consist of training to be a skipper, a deckhand, a tour guide or an administrative assistant.

SECTION 7: OPERATIONAL PLAN

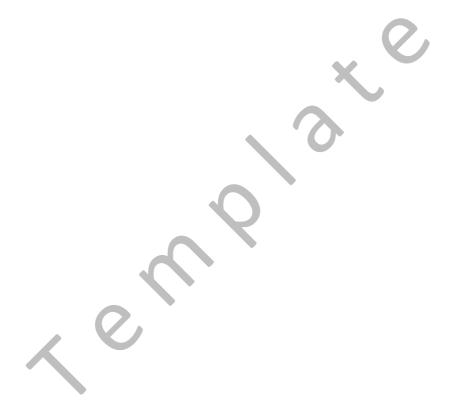
Applicants are advised to have regard to the WSCD policy, Annexure A, paragraph 2.1 and Regulation 69(2)(a) relating to the operational plan. It is stated there that education provided to tourists will, in particular, be assessed. It is further stated that a reputation for safety, experience in tourism and knowledge of local sea and weather conditions will be taken into account. Applicants are further encouraged to attach copies of brochures pamphlets and fliers relating to their operations.

SECTION 8: DECLARATION

The declaration should be signed in the presence of a Commission of Oaths. There is a Commissioner of Oaths available at police stations. Practising attorneys, bank managers and chartered accountants are also Commissioners of Oath.

ADDITIONAL PAGES/ANNEXURES

Applicants should carefully assess whether they have provided the required documentation and applicable annexures. The total number of pages submitted with the application should be completed.



1 PARTICULARS OF APPLICANT 1.1. Details of Authorised Representative (if applicable) (Please submit documents as annexure 1A - 1) Title Ms Other Initials Full name: Identity number: Type of Representation 1.2. APPLICANT DETAILS (Please submit documents as annexure 1A - 2) Type of Entity (Please tick): Individual Private Company Close Coorporation Trust Public Company Sole owner Other **Applicant Name** Trading name **Identity Number or** Company Reg. No.: VAT No.: Income Tax No. Street address **Contact Details** Code Work Code Postal code Home Code Postal address Fax Cell Postal code E-mail

Area of operation applying for:

Name of preferred Launching site

2 ACCESS TO A SUITABLE VESSEL (please attach SAMSA Certificate(s)) 2.1 Do you have access to a suitable vessel? Yes (If no, please submit explanation for this in Annexure 2A) 2.2 Please indicate method of accessing a suitable vessel: (Please attach (i) full description of the vessel (s) including SAMSA Licence Certificate(s), if available; (ii) motivation indicating why the vessel nominated will be more desirable and suitable for WSCD operation. Motivation should include, if applicable, any plans for vessel refurbishment. Annexure should include proof of access of vessel(s) (i.e. proof of ownership, charter agreement or purchase agreement). 2.2.1 I have ownership (Please submit documents as annexure 2A - 1) 2.2.2 I have/ will have a charter lease agreement (Please submit documents as annexure 2A - 2) 2.2.3 I intend to purchase (Please submit documents as annexure 2A - 3) Name of: Vessel 1 SAMSA Reg. No: Max. Passenger **Vessel Length** meters Capacity Type of vessel Grt Radio call sign Vessel Monitoring System (VMS) VMS Make and Model **VMS Serial Number** Vessel 2 SAMSA Reg. No: Max. Passenger Crew **Vessel Length** meters Capacity Type of vessel Grt Radio call sign Vessel Monitoring System (VMS) VMS Make and Model

VMS Serial Number

| Equipments to be used in the v | essel(s) | | | | |
|--|-----------------------|--------------------------------|----------------------------|-------------------------------|---------------------|
| | | | | | |
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| BENTITY TRANSFORMAT | ION DETAIL | .S | | | |
| 1. State the Broad-Based Bla | ick Economic | : Empowerment con | tributor level as determin | ed in terms of | |
| | | | in terms of the Broad-Bas | sed Black Economic | |
| Empowerment Amendm (Please submit documents as | | | | | |
| (Flease submit documents as | annexure SA - | '') | | | |
| 2. Shareholding Details | d a few and a data as | | | | |
| (Who are the shareholders/intede of shareholding in each category | | • • | | | |
| (Please submit documents as ani | | Š | | 7, | , , |
| Name | Race | Gender | Identity Number | | Shareholding % |
| | | | | — | |
| | | | | | |
| | | | | | |
| | | | | | |
| 3.2.1. Shareholding distribution | ı | | | | |
| Development of the Control of the Co | | | | | |
| Percentage Ownership by HDI (Black, Coloured, Indians) | Percentage Ow | nership by Female Persons | Percentage Ownership t | by Foreign Nationals (if any) | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| 3. Details of Manager(s) | CA C' | | | | |
| (Please submit documents as an | nexure 3A - 3) | | | | |
| Name | Management Lo | evel (Director, Fiancial Manag | Race | Gender | Years of employment |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

3.3.1. Income levels of Employees

| | Gross Monthly Income (Total Cost to Company) | No. of Employees | No. of HDI (Black, Coloured, Indians) | No. of Females | No. of Youth (<35) |
|---|--|------------------|---------------------------------------|----------------|--------------------|
| 1 | < R 3500 | | | | |
| 2 | from R 3 500 to R 6 500 | | | | |
| 3 | from R 6 501 to R 12 500 | | | | |
| 4 | from R 12 501 to R20 500 | | | | |
| 5 | from R 20 501 to R 26 000 | | | | |
| 6 | from R 26 001 to R 30 000 | | | | |
| 7 | from R 30 0001 to R 40 000 | | | | |
| 8 | > R40000 | | | | |
| | TOTAL | | | | |

| | 5 1 | from R 20 501 to R 26 000 | | | | | | |
|-------------|-------|---|----------------|---|---|---------------|-----------------------------|------------------------|
| | 6 1 | from R 26 001 to R 30 000 | | | | | | |
| | 7 1 | from R 30 0001 to R 40 000 | | | | | | |
| L | 8 | > R40000 | | | | | | |
| L | - | TOTAL | | | | | | |
| | | | | | | | | |
| 3 4 | Co | orporate Social Investment | | | | | | |
| | | | | | | | | |
| 3.4.1 | . Do | oes the applicant have program(s |) in place to | o support, in any way, t | ransformation in the area of o | peration? | | |
| | | Yes | | No | | 0 | | |
| | | (Please list below and attach releva | nt documen | t(s) as annexure 3B - 1) | | | | |
| | Γ | 1 | | | | | | |
| | - | 2 | | | | | | |
| | f | 3 | | | | | | |
| | | | | | | | | |
| 3.5. | На | s the applicant provided or i | ntend to p | rovide learnership p | programme to youth (<35 y | ears old): | | |
| | | | | | | | | |
| | | Yes | | No | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | If yes, please provide the following: | | | 9 | | | |
| | Г | | | | 8 | N | ame of Higher Edu | ication Institution of |
| | Г | If yes, please provide the following: Area of Expertise | No. of individ | luals | Duration of Learnership/Internst | | ame of Higher Edu earner | ucation Institution of |
| | Г | | No. of individ | luals | Duration of Learnership/Internsh | | | ucation Institution of |
| | Г | | No. of individ | luals | Duration of Learnership/Internsh | | | ucation Institution of |
| | Г | | No. of individ | luals | Duration of Learnership/Internsh | | | ucation Institution of |
| | Г | | No. of individ | luals | Duration of Learnership/Internsh | | | ucation Institution of |
| | Г | | No. of individ | luals | Duration of Learnership/Internsh | | | ucation Institution of |
| 4 (| | | Q | | Duration of Learnership/Internsh | | | ucation Institution of |
| | CO | Area of Expertise OMPLIANCE AND ENFORCE | EMENT I | RECORDS | | le le | arner | |
| 4.1. | CO | Area of Expertise OMPLIANCE AND ENFORCE This you or any of the company | EMENT I | RECORDS rs/shareholders/mer | nbers ever been convicted | l of an offen | nce in terms (| |
| 4.1. | CO | Area of Expertise OMPLIANCE AND ENFORCE | EMENT I | RECORDS rs/shareholders/mer | nbers ever been convicted | l of an offen | nce in terms (| |
| 4.1. | CO | Area of Expertise OMPLIANCE AND ENFORCE This you or any of the company | EMENT I | RECORDS rs/shareholders/mer | nbers ever been convicted | l of an offen | nce in terms (| |
| 4.1. | CO | OMPLIANCE AND ENFORCE This you or any of the company or ironmental legislation or the | EMENT I | RECORDS rs/shareholders/merons, or a contraventi | nbers ever been convicted | l of an offen | nce in terms (| |
| 4.1. | Haenv | Area of Expertise DMPLIANCE AND ENFORCE as you or any of the company vironmental legislation or the Yes es, please list all offences and attack | EMENT I | RECORDS rs/shareholders/mer ons, or a contraventi No s as annexure 4A - 1) | nbers ever been convicted on of any permit or exem | d of an offen | nce in terms o | of an |
| 4.1. | Haenv | Area of Expertise DMPLIANCE AND ENFORCE as you or any of the company vironmental legislation or the Yes es, please list all offences and attack | EMENT I | RECORDS rs/shareholders/merons, or a contraventi | nbers ever been convicted | d of an offen | nce in terms o | |
| 4.1. | Haenv | Area of Expertise DMPLIANCE AND ENFORCE as you or any of the company vironmental legislation or the Yes es, please list all offences and attack | EMENT I | RECORDS rs/shareholders/mer ons, or a contraventi No s as annexure 4A - 1) | nbers ever been convicted on of any permit or exem | d of an offen | nce in terms o | of an |
| 4.1. | Haenv | Area of Expertise DMPLIANCE AND ENFORCE as you or any of the company vironmental legislation or the Yes es, please list all offences and attack | EMENT I | RECORDS rs/shareholders/mer ons, or a contraventi No s as annexure 4A - 1) | nbers ever been convicted on of any permit or exem | d of an offen | nce in terms o | of an |
| 4.1. | Haenv | Area of Expertise DMPLIANCE AND ENFORCE as you or any of the company vironmental legislation or the Yes es, please list all offences and attack | EMENT I | RECORDS rs/shareholders/mer ons, or a contraventi No s as annexure 4A - 1) | nbers ever been convicted on of any permit or exem | d of an offen | nce in terms o | of an |

| 4.2. Are there any other | er criminal | matter pending against applicant of | r any of its directors, shareholders or mem | bers? |
|---------------------------|--------------|--|---|-----------------------|
| | Yes | No | | |
| (If yes, please elaborate | e and attach | documents as annexure 4A - 2) | | |
| Name | | Type of criminal matter | District/ Area of Transgression | Grounds of pending |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| revoked,cancelled | or reduce | | t(s) or licence(s) in any sector, ever been s en taken against the applicant/its directors | |
| Yes | s 🗌 | No | | |
| (If yes, please elaborate | e and attach | copy of decisions/ evidence as annexure 4A | - 3) | |
| Name | | Type of permit/licence | Area of Operation | Decision by athourity |
| | | | | |
| | | | | |
| | | | | |
| | | | · · · | |
| | | | | |
| 4.4. Have you/ your dir | | | guilt fine for contravention of the Regulation | ns, permit |
| Yes | s | No | | |
| | e and submit | documents as annexure 4A - 4) | | |
| Name | | Type of transgression | District where transgression occurred | Amount Paid |
| | | | | R |
| | | | | R |
| | | | | R |
| | | | | R |
| | | | | |
| 5 INVESTMENT AN | ID FINAN | CIAL INFORMATION | | |
| | | | | |
| 5.1. What investment i | s made by | applicant or by its members or sha | reholders towards the WSCD industry? | |
| | | | | |
| (Please submit docume | nts as anne | xure 5A) | | |
| | | | | |
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| 5.2. Public liability insurance | | | | | | | | |
|---|-------------------------------------|---|----------------------------|--|--|--|--|--|
| 5.2.1. Has the applicant purchased | l a public liability insuran | ce? | | | | | | |
| Yes | Yes No | | | | | | | |
| (Please submit documents as annex | ure 5B) | | | | | | | |
| Name of Service Provider | | | | | | | | |
| Validity period of the Insurance | | | | | | | | |
| Min. amount of liability cover | R | | | | | | | |
| Max. amount of liability cover | R | | | | | | | |
| 6 EMPLOYMENT/ JOB CREA | ATION | | | | | | | |
| (Please submit documents as annexure 3A - 3 |)) | | | | | | | |
| 6.1. How many people do you int | ent to employ in your | business? | | | | | | |
| (Please complete table below and attach addit | tional pages if you require more sp | pace to complete this) | X | | | | | |
| Type of Position(s) | Race | Type of Empoyment | District of Residence | | | | | |
| A | | | • | | | | | |
| В | | | | | | | | |
| С | | 0 | | | | | | |
| D | | | | | | | | |
| E | | | | | | | | |
| | | | | | | | | |
| 6.2. Do you have a skipper emplo | oyed or contracted to | operate and manage the nomir | nated suitable vessel(s)? | | | | | |
| Yes | No | | | | | | | |
| | ining Received Qualific | cation (Pease attach documents including | g SAMSA Certificate) | | | | | |
| Α. | | | | | | | | |
| В. | | | | | | | | |
| С. | | | | | | | | |
| 6.3. Do you have a tour guide em | ploved or contracted | to provide a White Shark Cage | Diving tour to passengers? | | | | | |
| Yes | No | , | J | | | | | |
| | ning Received | Qualification /Places attack as sister-time | a cartificata\ | | | | | |
| Iran | mig iveceived | Qualification (Please attach registration | containcate) | | | | | |
| | | | | | | | | |
| | | | | | | | | |

6.4. What kind of employment benefit (s) do you intend to provide to your employees?

(Please complete table below and attach additional pages if you require more space to complete this)

| Position | Gender of appointees | Employment benefit(s) |
|----------|----------------------|-----------------------|
| A | | |
| | | |
| В | | |
| | | |
| С | | |
| | | |
| D | | |
| | | |

6.5. Do you intend to offer training to your employees?

(Please complete table below and attach as additional pages if you require more space to complete this)

| Position | Gender of appointees | Training proposed |
|----------|----------------------|-------------------|
| | | |
| | | |
| | | |
| | | Y . |
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| 7 | OF | ATI | | N A | | LAN |
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| _ | U | АП | U | NA. | -14 | _AN |

| _ | _ | | | | | | |
|----|------|------|------|----|---------|------|-------|
| 71 | י חם | VOII | hava | an | Operati | onal | Plan? |
| | | | | | | | |

| es | No | |
|----|----|--|
|----|----|--|

(Please submit documents as annexure 7A)

If yes, please attach an operational plan detailing at a a minimum, the following:

- 1 Description of Applicant
- 2 Overview of the business structure including area of operation
- 3 Environmental Sustainability Plan including conservation measures to mitigate against impact on the environment.
- 4 Detailed Marketing Strategy Plan including but not limited to the following:
- 4.1 Intended target market
- 4.2 Estimate of the market size and average number of customers expected
- 4.3 Details of promotional and sale activities that will be used to promote your business

5 Operation details of the daily functioning, including:

- 5.1 Expected frequency of trips and number of passengers
- 5.2 Anticipated duration of trips.
- 5.3 A description of the anticipated trip activity. (How will you search for, attract and handle white sharks? How will you ensure that all the clients get the best opportunity and experience to view and dive with white sharks? What is the average duration of a dive per passenger?)
- 5.4 A description of instructions given to clients regarding their behaviour towards sharks.

6 Financial Projections

7 Operational Risk Management (e.g on weather conditions and how to handle white sharks).

(including policies/criteria to base decision making process on whether to cancel or abandon trips due to weather conditions or state of the sea, methods used to inform clients of safety drills and training of staff regarding safety issues; policy regarding refunding).

8 Safety Precautions and Emergency Reponse Plan

(including a description of the safety precautions on board as well as in the water (this should include details of emergency flow chart, equipment on board to deal with situations such as shark bites, use of shore skipper etc.)

- 9 Education and Awareness Plan
- 10 Contribution to Data Reporting

8 DECLARATION

(To be completed in the presence of a Commissioner of Oaths)

I, the undersigned, do hereby make an oath / affirmation, and declare that:

- a) I have read the instructions to this application form.
- b) The information submitted with and in this application form is true, correct and complete.
- c) I accept that if any information furnished in this application is not true or complete, or if false information is provided, or material information is not disclosed, this may lead to the application being refused, or to the cancellation and/ amendment any right, licence or permit granted on the strenght of this application in terms of National Environmental Management: Biodiversity Act 2004 (Act No. 10 of 2004) (as amended) read together with the Regulations.
- d) In order to allow for proper verification of information submitted I hereby authorize any organ of state, person or body, who possesses or acquires any information relevant to the application, to disclose or make the information available to the Minister, her delegate or an official of the Department of Environmental Affairs.
- e) The Applicant undertakes to co-operate with any investigators by timeously submitting responses to written requests for information or explanations, by attending meetings with investigators, by answering questions satisfactory at such meetings and where necessary, by granting investigators access to premises, vessel(s) and documents. The Applicant accepts that a failure to co-operate in this regard will constitute an independent ground for refusing an application.
- f) Applicant accepts that any attempt to improperly influence the decision of the delegated authority or appelant authority on the allocation of permit will result in the application being refused.

| Signature of Authorised Representative: Date: | |
|---|----------------|
| | |
| I certify that before administering the oath / affirmation I asked the deponent hereunder the following questions and wrote his/her | |
| answers in his / her presence: | |
| 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 of the year | |
| | |
| | |
| Signature of Commissioner of Oaths | |
| | OFFICIAL STAMP |
| Area for which appointed: | |
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