



environmental affairs

Department:
Environmental Affairs
REPUBLIC OF SOUTH AFRICA

For office use only			
NAME			
PERMIT CODE			
RECEIVED			
REFERRED			
PRE-INSPECTION	YES		NO
STATUS	COMPLETE		INCOMPLETE
IF NOT			
OFFICIAL NAME			

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 14 to 18 of these regulations in particular. The risk assessment report must be compiled by an environmental assessment practitioner (as per section 15) and must specifically provide accurate location and extent of proposed activity.
- 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; made at least 60 working days before the expiry of the period for which the permit was issued and must be accompanied by a written motivation;
- 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 Environmental Affairs: Branch Environmental Programmes, 4th Floor, 14 Loop Street, Cape Town, 8000. Alternatively, applications may be posted to: The Issuing Authority, Department of Environmental Affairs, Private Bag X4390, Cape Town, 8000 or emailed to: AISpermits@environment.gov.za or faxed to 086 604 4080. For any enquiries, please contact our office at 021 441 2748 / 021 441 2812
- 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 "X")

New Permit Renewal Amendment

Current Permit No. (For Renewal or Amendment only)

Permit Purpose (Please circle the appropriate restricted activities)

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 the purpose of research. 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 Representative – if applicable)

Title: Representative full Name(s):
 Surname:
 Identity or Passport No. (Attach a certified copy)

Physical Address		Postal Address	
	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	GENDER	QUANTITY (INCL. UNITS)	COUNTRY OF ORIGIN

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

PART D: IMPORTING, CONVEYING/MOVING /TRANSLOCATING; SELLING/TRADING/BUYING; GIVING/ RECEIVING/DONATING; ACQUIRING/ DISPOSING DETAILS

Provider or source of species		Intended recipient or disposal location of the species	
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 Transportation		Flight / Vehicle 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 Company name
 Identity or company registration number
 Type of facility (residential, nursery, aquarium etc.)

Physical Address (where restricted activity is to be carried out)			Postal Address		
	Postal Code			Postal Code	
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)				
	Postal Code			
Tel No. (work)		Tel No. (home)		
Fax No.				
Cell No.				
E-mail address				
Brief description of the activity to be conducted				

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 Environmental Affairs**
 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 cheque will be accepted at the Department's offices

PART H: APPROVED PERMIT

Please indicate your preference	<input type="checkbox"/>	Collect permit	<input type="checkbox"/>	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 in the year.....

Signature of Commissioner of Oaths

Area for which appointed:

Official stamp

NOTE
Your application must either be posted, emailed, faxed or hand delivered. The application should be addressed to the Department of Environmental Affairs.
PLEASE DO NOT BIND OR STAPLE THIS FORM TO ANY OTHER DOCUMENTS