

APPLICATION FORM FOR A CARETAKER/GRAZING AGREEMENT¹²

1. BACKGROUND INFORMATION

Name of the applicant/company/organization:			
Identity Number/company/organization Registration Number			
Postal/Physical Address:			
		Postal code:	
Telephone:	()	Cell:	
E-mail:		Fax:	()

2. SITE LOCATION AND PROPERTY DESCRIPTION

Dam/Scheme Name:					
Coordinates:					
Latitude (S)	0	٤	"		
Longitude (E)	0	٤	"		
Municipality					
Closet City/Town					
Farm/Erf name(s) & number(s) including portion) (if available)					
Property size(s) in square metres (m ²)					
Development footprint size(s) in m ²					
Locality map					
Site layout plan					
Current land use					

¹ Provide information where applicable and if not applicable specify accordingly ² The required information must be typed within the spaces provided in the form. The sizes of the spaces provided are not necessarily indicative of the amount of information to be provided. It is in the form of a table that will expand itself as each space is filled with typing.

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3. OPERATIONAL PLAN

Describe in detail the proposed activity and associated infrastructure not limited to the following aspects:				
Proposal (in addition kindly stipulate if the proposal is for personal or commercial use)				
Type of livestock				
Number of livestock (capacity) per hectare				
Water provision for watering the livestock				
Describe the type of fencing to be erected				
Any structures to be erected (if any provide details)				
Describe potential risks or environmental impacts as a result of the proposal including the proposed management measures thereof				
Specify other information relevant to the proposal				
Attachments such as maps, plans and any other additional information must be attached in the Appendix section below				
Official company/organizations' letter must accompany this application form				

4. DECLARATIONS

The applicant

I,	in	my	personal	capacity	or	duly	authorised	by
	(name	of th	e company/	organization) the	reto hei	reby declare tl	hat I
				0	,			

regard the information contained in this form to be true and correct.

Signature of the applicant:

Name of company/organization:

Date:

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APPENDIX