

NGA User Request: [ngaur@dws.gov.za](mailto:ngaur@dws.gov.za)

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| **REGIONAL GEOSITE IDENTIFIER REQUEST FORM** | | | | | | |
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| **ORGANISATION / CONSULTANCY:** | | | | | | |
| **ORGANISTAION / CONSULTANCY CONTACT DETAILS:**  *(Telephone number and / or e-mail address)* | | | | | | |
| **PROJECT NAME:** | | | | | | |
| **PROJECT NUMBER:** | | | | | | |
| **NUMBER OF REGIONAL IDENTIFIERS REQUIRED:** | | | | | | |
| **DATE REQUESTED *(****YYYYMMDD****)*:** | | | | | | |
| **AS PER APPLICABLE MUNICIPAL BYLAWS**  **APPROVAL REQUIRED TO COMMENCE DRILLING: YES NO** | | | | | | |
| **DATE OF APPROVAL FROM LOCAL AUTHORITY TO DRILL BOREHOLES (*YYYYMMDD)*:** | | | | | | |
| **MUNICIPAL BOREHOLE REGISTRATION NUMBER:** | | | | | | |
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| **ALLOCATED REGIONAL GEOSITE NUMBER**  *(will be provided by Department)* | **LATITUDE** *(Decimal Degrees*  *or*  *Degrees, Minutes, Seconds)* | **LONGITUDE** *(Decimal Degrees*  *or*  *Degrees, Minutes, Seconds)* | **QUARTERLY / TERTIARY DRAINAGE REGION**  **or**  **H-REGION FOR LIMPOPO GEOSITES**  *(If applicable)* | **WATER MANAGEMENT AREA**  **or**  **MUNICIPAL DISTRICT**  *(If applicable)* | **LOCATION** *(Farm Name / Village Name)* | **OTHER GEOSITE IDENTIFIER** *(If applicable)* |
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