


REGISTRATION/LICENSING PART 1
**COMPANY, BUSINESS, PARTNERSHIP OR
 COMMUNITY, NATIONAL OR PROVINCIAL
 GOVERNMENT**
1. GENERAL INFORMATION

 Mark the applicable option(s) with an *X* and/or complete details where applicable/available.

Indicate the nature of this application:
 New registration

 Minor change

 Formal amendment

Registration Number

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2. PARTICULARS OF THE APPLICANT
Application for:

(Mark one block with an X)

 Company, business, partnership or community (*complete part 3,5,6,7 and 8*)

 National or provincial government (*complete part 4,5,6,7 and 8 excl. 8.1.2*)

3. PARTICULARS OF THE COMPANY, BUSINESS, PARTNERSHIP OR COMMUNITY
3.1 Name of company, business, partnership or community:

3.2 Trading name if different from name of company, business, partnership or community:

3.3 Type of enterprise:

(Mark one block with an X)

 06 Public Company (Ltd)

 07 Private Company (Pty) Ltd

 08 Article 21 (Association Inc. under Article 21 of the Company Act No. 61 of 1973)

 09 Limited By Guarantee

 10 External Company

 11 External Company under article 21 of the Company Act No. 61 of 1973

 20 Transvaal Ordinance

 21 Incorporated (Inc)

 22 Unlimited

 23 Close Corporation (CC)

 24 Co-operative (CR)

 Trust

 Parastatal

 Other [i.e. non-CIPRO Company types (e.g. Churches, Schools, Community Groups, etc.) excluding Trust and Parastatal]

3.4 Business enterprise registration number:

3.5 **Date established:**
(ccyy/mm/dd)

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3.6 **Country where established:**

3.7 **VAT registration number:**

4. PARTICULARS OF NATIONAL OR PROVINCIAL GOVERNMENT

4.1 National Department:

4.2 a) Provincial Department:

b) Province:

5. APPLICANT CONTACT DETAILS

5.1 Postal Address:

Postal Code

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5.2 Street Address (only if different from postal address):

Postal Code

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5.3 Contact telephone number during office hours

Area/cell code

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Number

--	--	--	--	--	--	--	--	--	--	--	--

Ext

--	--	--	--	--

Alternative contact number

Area/cell code

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Number

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Ext

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5.4 E-mail

6. CONTACT PERSON DETAILS

6.1 Title

6.2 Name

6.3 Surname

6.4 Telephone

Area/cell code

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Number

--	--	--	--	--	--	--	--	--	--

Ext

--	--	--	--

6.5 Cell Phone Number

Area/cell code

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Number

--	--	--	--	--	--	--	--	--	--

6.6 Fax

Area/cell code

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Number

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Ext

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6.7 E-mail

6.8 Preferred Form Of Communication

Declaration by applicant (or person who was granted power of attorney by the applicant)

Surname of delegated person:

Grid for Surname of delegated person (20 cells)

Title:

Grid for Title (10 cells)

Initials:

Grid for Initials (8 cells)

ID Number:

Grid for ID Number (16 cells)

Passport Number:

(if not a holder of South African ID)

Grid for Passport Number (16 cells)

Expiry Date (ccyy/mmdd):

Grid for Expiry Date (8 cells)

Delete the words that are not applicable I/we _____ (FULL NAME(S)) hereby declare that the information provided by me/us in this application form is, to the best of my/our knowledge, true and correct.



Signature

Thumb print

Contact number during office hours

Designation of signatory

Date (ccyy/mm/dd)

It is a criminal offence to provide information that is false or misleading.

7. LIST OF PART 2 DOCUMENTS (WATER USE RELATED FORMS)

Mark with an X which of the following documents have been submitted with this application

- | | |
|--|---|
| <input type="checkbox"/> DW760 NWA-Section 21(a) | <input type="checkbox"/> DW768 NWA-Section 21(i) |
| <input type="checkbox"/> DW761 NWA-Section 21(b) | <input type="checkbox"/> DW780 NWA-Section 21(h) |
| <input type="checkbox"/> DW762 NWA-Section 21(b) | <input type="checkbox"/> DW805 NWA-Section 21(j) |
| <input type="checkbox"/> DW763 NWA-Section 21(c) | <input type="checkbox"/> DW806 NWA-Section 21(k) |
| <input type="checkbox"/> DW764 NWA-Section 21(d) | <input type="checkbox"/> DW901 Property or properties where water use occurs |
| <input type="checkbox"/> DW765 NWA-Section 21(e) | <input type="checkbox"/> DW902 Details of property owner |
| <input type="checkbox"/> DW766 NWA-Section 21(f) | <input type="checkbox"/> DW903 Actual/Monitored waste discharge details NWA-Section 21(f/h) |
| <input type="checkbox"/> DW767 NWA-Section 21(g) | <input type="checkbox"/> DW904 Actual/Monitored waste discharge details NWA-Section 21(e/g) |

8. THIS SECTION IS RESERVED FOR OFFICE USE ONLY

8.1	Billing information		
8.1.1	<input type="text"/>	<input type="text"/>	WMA for billing*
	* Water Management Area Codes		
	01 Limpopo	05 Vaal	09 Berg-Olifants
	02 Olifants	06 Orange	
	03 Inkomati-Usuthu	07 Mzimvubu-Tsitsikamma	
	04 Pongola-Umzimkulu	08 Breede-Gouritz	
8.1.2	District Municipal Establishment Levy Payable	<input type="checkbox"/> Yes	<input type="checkbox"/> No
8.2	Mark with an X which of the following documents have been submitted with this application		
	<input type="checkbox"/> Certified copy of South African identity document		
	<input type="checkbox"/> Certified copy of passport		

File number (i.e. Office Hardcopy Register File No)

Water Use Register Number

Received by:

Surname

Initials

Position / Rank

Signature

Date (ccymmdd)

Captured on NRWU database

Captured by:

Surname

Initials

Signature

Date stamp of receiving office

Quality Assurance Executed by:

Surname

Initials

Position / Rank

Signature

Date (ccymmdd)