



**1.5 Applicant Type** (mark only one block with X)

- Individual (complete 1.6)
   
  Provincial Department (complete 1.9)
- Company, business, partnership or community (complete 1.7)
   
  Water Services Provider (complete 1.10)
- National Department (complete 1.8)
   
  Water User Association (complete 1.11)

**1.6 If the applicant is an individual**

**1.6.1** Title  Surname  Initials

**1.6.2 South African ID (if holder of South African Id) alternatively Passport Number:**

ID Number or

Passport Number

Passport Expiry Date (ccymmdd)

Passport Country Of Issue

**1.7 If the applicant is a company, business, partnership or community:****1.7.1** Name of company, business, partnership or community:

**1.7.2** Business Enterprise Registration Number

**1.7.3** Date Established (ccymmdd)

Country Where Established

**1.8 If the applicant is a National Department:**

**1.8.1** National Department Name:

**1.9 If the applicant is a Provincial Department:**

**1.9.1** Province:

**1.9.2** Provincial Department Name:

**1.10 If the applicant is a Water Services Provider:**

**1.10.1** Name of WSP:

**1.11 If the applicant is a Water User Association:**

**1.11.1** Name of WUA:

**1.12 BBBEE Status**

Mark the applicable option(s) with an X)

- Historically Disadvantaged Individual (HDI)
- Historically Advantaged Individual (HAI)
- Black Economic Empowerment (BEE) Compliant

## Declaration by applicant or waste discharger

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.**

**2. DESCRIPTION OF THE WASTE GENERATED**

**2.1 Select the sector that generates the wastewater or waste which this application refers to**

(Mark only one box with an X)

(Note, if more than one option is applicable, you must fill in a separate application form per sub-sector)

- Agriculture**
  - Aquaculture
  - Irrigation
  - Intensive Animal Husbandry (feedlots)
  - Other (please specify below)

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- Urban / Domestic**
  - Sewage Treatment Works
  - Water Treatment Works

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- Industry**
  - Agroprocessing
  - Fertilisers
  - Metal Processing And Finishing
  - Textile
  - Power Generation
  - Petrochemical
  - Meat Processing
  - Manufacturing
  - Paper And Pulp
  - Winery
  - Other (please specify below)

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- Mining**
  - Coal
  - Gold
  - Platinum
  - Copper
  - Chromium
  - Iron
  - Diamond
  - Sand-winning
  - Quarrying
  - Peat Mining
  - Uranium
  - Other (please specify below)

**2.2 Which of the following describes the nature of the wastewater?**

(Mark the applicable options with an X)

- 2.2.1 Wastewater containing <70% water by mass (i.e. sludge)
- 2.2.2 Wastewater containing >70% water by mass
- 2.2.3 Wastewater with high acidity (i.e. pH <5) or alkalinity (i.e. pH >10)
- 2.2.4 Wastewater with temperature of >50°C
- 2.2.5 Wastewater with an oxygen content of <5 mg/l
- 2.2.6 Wastewater with an EC (Electrical Conductivity) of >500mS/m
- 2.2.7 Wastewater with an EC of <500mS/m

**2.3 Which of the following describes the composition of the wastewater?**

(Mark the applicable options with an X)

- 2.3.1 Wastewater consisting of > 90% organic content by mass (i.e. load)
- 2.3.2 Wastewater consisting of 50 – 90% organic content and 10 – 50% metals or salts by mass (i.e. load)
- 2.3.3 Wastewater consisting of 10 – 50% organic content and 50 – 90% metals or salts by mass (i.e. load)
- 2.3.4 Wastewater consisting of >90% metals or salts by mass (i.e. load)

**2.4 Describe the activity that generates the waste**

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**2.5 Discharge to a Water Resource**

**2.5.1 Water use start & end date**

When did/will this waste discharge start? (ccyymmdd)

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

When did/will this waste discharge end? (If applicable)  
(ccyymmdd)

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

**2.5.2 The total volume of waste / wastewater discharged per year:**

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

Cubic meters

**2.5.3 The maximum volume of waste / wastewater discharged on any given day:**

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

Cubic meters

**2.5.4 Monthly discharge pattern expressed in:**

Cubic meters

OR

Percentage (%) of total

OR

Another unit of measure

If "Another unit of measure" was selected, specify the "unit of measure" to be applied to the monthly discharge pattern details:

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	Minimum	Average	Maximum																		
January	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>							<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>							<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>						
February	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>							<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>							<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>						
March	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>							<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>							<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>						
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## 2.5.5 Intake Water

Water supplied by Water Services Provider (WSP) or Water User Association (WUA)	
Name of WSP/WUA Supplier	Volume of water applicable to this waste discharge (m <sup>3</sup> )

National Water Act - Section 21(a/b/g/j) Water Use					
Section 21(?)	Registered*		Volume of water applicable to this waste discharge (m <sup>3</sup> )	If Registered*	
				Register number	Water Use Number
	<input type="checkbox"/> Yes	<input type="checkbox"/> No			
	<input type="checkbox"/> Yes	<input type="checkbox"/> No			
	<input type="checkbox"/> Yes	<input type="checkbox"/> No			
	<input type="checkbox"/> Yes	<input type="checkbox"/> No			

## 2.5.6 Registered Waste Discharge Information

Average intake volume (cubic meters)	<input type="text"/>	Time Interval: <input type="checkbox"/> Per Month	<input type="checkbox"/> Per Annum
Average output/discharge volume (cubic meters)	<input type="text"/>		
Maximum intake volume anticipated (cubic meters)	<input type="text"/>	Time Interval: <input type="checkbox"/> Per Month	<input type="checkbox"/> Per Annum
Maximum output volume anticipated (cubic meters)	<input type="text"/>	Time Interval: <input type="checkbox"/> Per Month	<input type="checkbox"/> Per Annum

Quality Variable and unit of measurement	Average Intake Concentration	Maximum Anticipated Intake Concentration	Average Discharge Concentration	Maximum Anticipated Discharge Concentration
Coliforms (Colony Forming Units/ml)				
Enteric pathogens e.g. E.coli (Colony Forming Units/ml)				
pH (pH units)				
Temperature (°C)				
Acidity (mg/l)				
Alkalinity (mg/l)				
Aluminium (mg/l)				
Ammonia (mg/l)				
Arsenic (mg/l)				
Barium (mg/l)				
Boron (mg/l)				
Bromide (mg/l)				
Cadmium (mg/l)				

Continued on next page

Quality Variable and unit of measurement	Average Intake Concentration	Maximum Anticipated Intake Concentration	Average Discharge Concentration	Maximum Anticipated Discharge Concentration
Calcium (mg/l)				
Chemical oxygen demand (mg/l)				
Chloride (mg/l)				
Chromium (mg/l)				
Chromium(vi) (mg/l)				
Cobalt (mg/l)				
Copper (mg/l)				
Cyanide (mg/l)				
Fluoride (mg/l)				
Iron (mg/l)				
Lead (mg/l)				
Lithium (mg/l)				
Magnesium (mg/l)				
Manganese (mg/l)				
Mercury (mg/l)				
Molybdenum (mg/l)				
Nickel (mg/l)				
Phenol (mg/l)				
Potassium (mg/l)				
Radionuclides (mg/l)				
Soap, oil or grease (mg/l)				
Sodium (mg/l)				
Sulphate (mg/l)				
Tin (mg/l)				
Total dissolved solids (mg/l)				
Total suspended solids (mg/l)				
Total nitrogen (mg/l)				
Total phosphorus (mg/l)				
Uranium (mg/l)				
Vanadium (mg/l)				
Zinc (mg/l)				

### 3. RECEIVING ENVIRONMENT/RECEPTOR

Serves to address the following: The resource that needs to be protected and related issues such as: how close to surface water, groundwater level, presence of boreholes, whether communities use boreholes or abstract from the surface water, etc.

#### 3.1 Description of nearby water resource(s)

##### 3.1.1 Description of Surface Water Resources

(Mark only one box with an X)

a) Type of surface water resource, nearest to location where discharge is taking place

- |   |   |
|---|---|
| <input type="checkbox"/> River / Stream | <input type="checkbox"/> Dam                          |
| <input type="checkbox"/> Estuary        | <input type="checkbox"/> Lake                         |
| <input type="checkbox"/> Wetland        | <input type="checkbox"/> GWS Scheme                   |
| <input type="checkbox"/> Marine         | <input type="checkbox"/> Other (please specify below) |

b) Name / description of the nearest surface water resource:

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c) Distance to the nearest water resource (meters)

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##### 3.1.2 Description of Groundwater Resources

(Mark only one box with an X)

a) Type of groundwater resource, nearest to location where discharge is taking place

- |   |   |
|---|---|
| <input type="checkbox"/> Spring / Eye                 | <input type="checkbox"/> GWS Scheme                                 |
| <input type="checkbox"/> Borehole                     | <input type="checkbox"/> Boreholes And Windmills On Government Land |
| <input type="checkbox"/> Other (please specify below) |   |

b) Name / description of the nearest groundwater resource

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c) Distance to the nearest groundwater resource (meters)

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**3.2 Water resource (receiving the wastewater discharge) information**

**3.2.1 Name of the water resource receiving the wastewater discharge is:**

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**3.2.2 Type of water resource receiving the waste or wastewater discharge:**

(Mark only one box with an X)

- |  |  |
|--|--|
| <input type="checkbox"/> River or stream         | <input type="checkbox"/> Dam             |
| <input type="checkbox"/> Wetland                 | <input type="checkbox"/> Marine          |
| <input type="checkbox"/> Government Water Scheme | <input type="checkbox"/> Estuary         |
| <input type="checkbox"/> Lake                    | <input type="checkbox"/> Other (specify) |

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**3.2.3 Geographic location of the discharge point (use only one format):**

Latitude    °   '   .  " or    .     ° or    °   .     ' ,

Longitude    °   '   .  " or    .     ° or    °   .     ' ,

Datum Type:  Cape (Modified Clarke 1880)  WGS-84

**3.2.4 Reliability of water resource receiving the waste or wastewater discharge:**

(Mark only one box with an X)

- |   |   |
|---|---|
| <input type="checkbox"/> Water always present | <input type="checkbox"/> Dry during certain seasons |
| <input type="checkbox"/> Frequently dry       |   |

**3.2.5 Drainage Region Details:**

Quaternary Drainage Region

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**3.2.6 Property Relationship Details** (Complete supplementary forms DW901 & DW902)

Property Name	Surveyed Property		Unsurveyed property		Property Relationship Date	
					From:	To:
	Title Deed Number		Surname of the Leader of Village, Community or Tribal Authority			
	Surveyor-General Cadastral Code		Initial of the Leader of Village, Community or Tribal Authority			
	Property Number		Local Authority (if applicable)			
	Portion of property		Magisterial District (if applicable)			
			Tribal Authority/Council (if applicable)			
	Title Deed Number		Surname of the Leader of Village, Community or Tribal Authority			
	Surveyor-General Cadastral Code		Initial of the Leader of Village, Community or Tribal Authority			
	Property Number		Local Authority (if applicable)			
	Portion of property		Magisterial District (if applicable)			
			Tribal Authority/Council (if applicable)			
	Title Deed Number		Surname of the Leader of Village, Community or Tribal Authority			
	Surveyor-General Cadastral Code		Initial of the Leader of Village, Community or Tribal Authority			
	Property Number		Local Authority (if applicable)			
	Portion of property		Magisterial District (if applicable)			
			Tribal Authority/Council (if applicable)			
	Title Deed Number		Surname of the Leader of Village, Community or Tribal Authority			
	Surveyor-General Cadastral Code		Initial of the Leader of Village, Community or Tribal Authority			
	Property Number		Local Authority (if applicable)			
	Portion of property		Magisterial District (if applicable)			
			Tribal Authority/Council (if applicable)			



**5. THIS SECTION IS RESERVED FOR OFFICE USE ONLY**

**5.1 Succession transfer and source part 2 details**

**5.1.1 Is this a 'succession in title' related water use transfer?**  Yes  No

**5.1.2 If yes, complete the following details where applicable.**

Source Register Number	WU Number	WU Status to be Allocated	WU Close Date (if applicable) (ccyymmdd)
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**5.2 District Municipality**

District Municipality Name (if applicable) \_\_\_\_\_

**5.3 Billing information**

**5.3.1 Applicant to be billed as:**

Water User or  Via a WUA/WSP

Start Date (ccyymmdd)	End Date (ccyymmdd)
<input type="text"/>	<input type="text"/>

**5.3.2 Bill incentive charge:**

On actual load(s) or  Registered load(s)

Start Date (ccyymmdd)	End Date (ccyymmdd)
<input type="text"/>	<input type="text"/>

**5.3.3 Billing Frequency:**

Annually  Bi-annually  Monthly

**5.3.4 If to be billed via WUA/WSP:**

Name of WUA/WSP \_\_\_\_\_

Is WUA/WSP a Billing Agent?  Yes  No

Billing Agent's Register Number

**5.3.5 If this WU is to be billed via a Bulk Billing Party that is not a WSP/WUA, complete the following:**

Name of Customer \_\_\_\_\_

Bulk-Bill-to-Party Register Number

**5.4 Waste management scheme information****Waste scheme name** (if applicable)

- If the Waste Scheme is applicable, provide WSMP (Waste Scheme Management Parameter Name)
- Specify the date from which this WSMP is applicable to this water use (ccyymmdd)

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**5.5 Late registration penalty**

Is this a late registration?  Yes  No

If yes, mark with an X, the applicable penalty to be levied

R300.00 OR

10% (ten percent) of the annual water use charge outstanding at the date of registration which ever is greater

Specify the penalty amount payable \_\_\_\_\_

Waive penalty

**5.6 Authorisation details**

**5.6.1 Water use takes/took place in terms of the General Authorisation:**  Yes  No

\*If yes complete the following details after confirmation with relevant DWAF/CMA officials:

<u>Date(s) from which applicable GA is/was applicable to this water use</u>			
South African Act:	Applicable section of the act		
[E.g. National Water Act (Act No. 36 of 1998)]	[E.g. Section 21]		
Date From (ccyymmdd)	<input type="text"/>	Government Notice No.	<input type="text"/>
Date To (ccyymmdd)	<input type="text"/>	Government Notice Date (ccyymmdd)	<input type="text"/>
Applicable Section Of The General Authorisation			
Date From (ccyymmdd)	<input type="text"/>	Government Notice No.	<input type="text"/>
Date To (ccyymmdd)	<input type="text"/>	Government Notice Date (ccyymmdd)	<input type="text"/>
Applicable Section Of The General Authorisation			
Date From (ccyymmdd)	<input type="text"/>	Government Notice No.	<input type="text"/>
Date To (ccyymmdd)	<input type="text"/>	Government Notice Date (ccyymmdd)	<input type="text"/>
Applicable Section Of The General Authorisation			

**5.6.2 If an authorisation has been issued under other legislation – provide the Law/Regulation details if known/available.**

**5.6.3 If this application represents a licence related water use (new licence application or previously submitted application) – complete following details if known/available.**

Responsible Licensing Authority Reference

Responsible Licensing Authority Business

Unit

Water Quality Management Assessment:

Surname

Initials

Position / Rank

Signature

Date (ccyymmdd)

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

Water Use Register Number

Received by:

Surname

Initials

Position / Rank

Signature

Date (ccyymmdd)

Captured on NRWU database

Captured by:

Surname

Initials

Signature

Date stamp of receiving office

Quality Assurance Executed by:

Surname

Initials

Position / Rank

Signature

Date (ccyymmdd)