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|  | | DEPARTMENT OF WATER AND SANITATIONWATER MANAGEMENT SYSTEMResource Quality Services **Private Bag X313, PRETORIA, 0001.**  Telephone: **0128080374** | | | | | | | | | |
| **Information submitted by:** | | | | |  | | | | | | |
| **Contact telephone number:** | | | | |  | | | | | | |
| **Region:** | | | | |  | | | | | | |
| **Date:** | | | | |  | | | | | | |
| **ORGANISATION / WATER USER** e.g. mine  An Organisation in the context of WMS is any company or organisation that monitors, impacts or manages water resources. | | | | | | | | | | | |
| **Organisation Name:** (Full registered name) | | | | | | |  | | | | |
| **Organisation Abbreviation:** (if applicable) | | | | | | |  | | | | |
| **Organisation Type** (Mark one of the following that best describes your Organisation) | | | | | | | | | | | |
| Association | | | Committee | | | | | Company | | Forum | |
| Individual | | | Irrigation Board | | | | | Local Authority | | Parastatal | |
| National Government | | | Non Government Organisation | | | | | Organ of State | | Provincial Government | |
| Catchment Management Agency | | | Water Board | | | | | Water User Association | | International Water Management Body | |
| **Province** (Please indicate the province in which the organisation is located) | | | | | | | | | | | |
| EC | Eastern Cape | | | FS | | Free State | | | GP | | Gauteng |
| KZN | KwaZulu-Natal | | | LP | | Limpopo (Northern Province) | | | MP | | Mpumalanga |
| NC | Northern Cape | | | NWP | | North West Province | | | WC | | Western Cape |
| **Elsewhere** (Please specify - e.g. Swaziland or Lesotho, etc.) | | | | | | | |  | | | |
| **Addressee:** (Select one from the following that best describes the title of the person to whom official correspondence must be addressed.) | | | | | | | | | | | |
| Chairperson | | | Chief Executive Officer | | | | | Director | | Director General | |
| Manager | | | Managing Director | | | | | Chief Director | | Municipal Manager | |
| **Parent company or organisation:** (if applicable) | | | | | | | |  | | | |
| ***Start date of Organisation from DWAF’s perspective*** *(use 1960-01-01 unless clearly known)* | | | | | | | |  | | | |
| ***System ID*** *(to be recorded after capture)* | | | | | | | |  | | | |

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| --- | --- | --- | --- | --- | --- | --- |
| **CONTACT DETAILS** | | | | | | |
| **Type** | Dialling code (town/suburb and code) | | | | **Number** | |
| Switchboard |  | | | |  | |
| Direct Line |  | | | |  | |
| Mobile Phone (if applicable) |  | | | |  | |
| Facsimile |  | | | |  | |
| Facsimile (second line) |  | | | |  | |
|  |  | | | |  | |
| **Postal Address** | | | | | | |
| Private Bag; P O Box or Number and Street Name for street delivery | Suburb | | Town | | | Postal Code |
|  |  | |  | | |  |
| **Physical Address** | | | | | | |
| Name of building, number and street name | Suburb | | Town | | | Postal Code |
|  |  | |  | | |  |
| **Delivery Address**  (If different to physical address, e.g. where deliveries go to a store / laboratory, etc.) | | | | | | |
| Office number, name of building, number and street name | | Suburb | | Town | | Postal Code |
|  | |  | |  | |  |
| **e-mail address (everything before @)** | |  | | **Domain e.g. @somewhere.com** | |  |