



forestry, fisheries & the environment

Department:
Forestry, Fisheries and the Environment
REPUBLIC OF SOUTH AFRICA

For office use only

| | |
|---------------------------|--|
| Permit Application code | |
| Date received | |
| Date referred to Province | |
| Permit / Rejection number | |

PERMIT APPLICATION FORM

Application for the permit/s in terms of Chapter 7 of the National Environmental Management: Biodiversity Act, 2004 (Act No. 10 of 2004), as amended

ALIEN AND INVASIVE SPECIES REGULATIONS

PLEASE NOTE

- Application forms must be completed in legible block letters.
- The application for a permit to carry out a restricted activity involving an alien and listed invasive species must be accompanied by a risk assessment report in compliance of the Alien and Invasive Species Regulations (NEMBA 2004) in general and with sections 16 to 19 of these regulations in particular. The risk assessment report must be compiled by an environmental assessment practitioner (as per section 17) and must specifically provide accurate location and extent of proposed activity.
- A risk assessment report done by a Certificated Natural Scientist or Candidate Natural Scientist can ONLY be accepted if signed off by a Professional Natural Scientist.
- Should the risk assessment report and other permit application documentation need to be reviewed by a scientific expert; the applicant will bear any cost associated with this review.
- If applying for a renewal, the application must be accompanied by a copy of a CURRENT permit; made at least 60 working days before the expiry of the period for which the permit was issued and must be accompanied by a written motivation;
- If applying for an amendment, the application must be accompanied by a copy of a CURRENT permit indicating and highlighting items to be amended. If necessary, please attach additional pages should more space be required.
- The application process may take up to 60 working days or more; subject to the inclusion and submission of all the information required.
- Any additional information, which the applicant deems necessary, should be attached to this application as an addendum. This could include any certifications the applicant may have been awarded (e.g. Forest Certification, Fairtrade, etc.)
- This application must be addressed to: The Biodiversity Risk Management: Issuing Authority, Department of Forestry, Fisheries and the Environment: Branch Biodiversity and Conservation, 4th Floor, 14 Loop Street, Cape Town, 8000. Alternatively, applications may be posted to: The Biodiversity Risk Management: Issuing Authority, Department of Forestry, Fisheries and the Environment, Private Bag X4390, Cape Town, 8000 or emailed to: AlSPermits@dffe.gov.za or faxed to [086 604 4080](tel:0866044080).
- The Department may request the applicant to submit further information or make representations before a decision is made on the permit application.
- The Department cannot be held liable for the loss of a permit in the post if requested to be posted.
- Failure to provide the information requested herein may result in the application not being processed or delayed.
- Failure to provide the information requested within the stipulated time frame may also constitute non-compliance.
- The applicant will have a right to appeal the decision should the Department decline or reject the application for a permit.

PART A: KIND OF PERMIT APPLIED FOR (Mark relevant box "X")

New Permit Renewal Amendment

Current Permit No. (For Renewal or Amendment only)

Application is required for: **(Please circle the appropriate restricted activities – more than one may be selected)**

| Restricted Activities as defined in the Act | |
|--|--|
| <input type="checkbox"/> | a. Importing into the Republic, including introducing from the sea, any specimen of a listed invasive species. Complete PART A, B, C, D |
| <input type="checkbox"/> | b. Having in possession or exercising physical control over any specimen of a listed invasive species. Complete PART A, B, C, E |
| <input type="checkbox"/> | c. Growing, breeding or in any other way propagating any specimen of a listed invasive species, or causing it to multiply. Complete PART A, B, C, E |
| <input type="checkbox"/> | d. Conveying, moving or otherwise translocating any specimen of a listed invasive species. Complete PART A, B, C, D |
| <input type="checkbox"/> | e. Selling or otherwise trading in, buying, receiving, giving, donating or accepting as a gift, or in any way acquiring or disposing of any specimen of a listed invasive species. Complete PART A, B, C, D |
| <input type="checkbox"/> | f. Carry out restricted activities for research purposes. Complete PART A, B, C, D, E, F |
| Restricted Activities as defined in Regulation 6 | |
| <input type="checkbox"/> | g. Spreading or allowing the spread of any specimen of a listed invasive species. Complete PART A, B, C, D, E, F |
| <input type="checkbox"/> | h. Releasing any specimen of a listed invasive species. Complete PART A, B, C, D, E, F |
| <input type="checkbox"/> | i. The transfer or release of a specimen of a listed invasive fresh-water species from one discrete catchment system in which it occurs, to another discrete catchment system in which it does not occur; or, from within a part of a discrete catchment system where it does occur to another part where it does not occur as a result of a natural or artificial barrier. Complete PART A, B, C, D, E, F |
| <input type="checkbox"/> | j. Discharging of or disposing into any waterway or the ocean, water from an aquarium, tank or other receptacle that has been used to keep a specimen of an alien or a listed invasive species. Complete PART A, B, C, D, E, F |

PART B 1: APPLICANT'S DETAILS

Full name or Company name

Identity or company registration number (Attach a certified copy):

| | | | | | |
|------------------|-------------|--|----------------|-------------|--|
| Physical Address | | | Postal Address | | |
| | | | | | |
| | | | | | |
| | Postal Code | | | Postal Code | |
| Tel No. (work) | | | Tel No. (home) | | |
| Fax No. | | | | | |
| Cell No. | | | | | |
| E-mail address | | | | | |

PART B 2: APPLICANT'S DETAILS (Duly Authorized Representative – if applicable)

Title: Representative full Name(s):
 Surname:
 Identity or Passport No. (Attach a certified copy)

| | | | |
|------------------|-------------|----------------|--|
| Physical Address | | Postal Address | |
| | | | |
| | | | |
| | Postal Code | | |
| Tel No. (work) | | Tel No. (home) | |
| Fax No. | | | |
| Cell No. | | | |
| E-mail address | | | |

PART C: SPECIE(S) INFORMATION

| SCIENTIFIC NAME (GENUS & SPECIES) | COMMON NAME | GENDER | QUANTITY (INCL. UNITS) | COUNTRY OF ORIGIN |
|--------------------------------------|-------------|--------|-------------------------|-------------------|
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

Please attach additional pages if you require more space to complete this.

PART D: IMPORTING, CONVEYING/MOVING /TRANSLOCATING; SELLING/TRADING/BUYING; GIVING/ RECEIVING/DONATING; ACQUIRING/ DISPOSING DETAILS

| Exporting/Trading/Translocating from: | | Importing/Trading/Translocating to: | |
|--|--|---|--|
| Name | | Name | |
| I.D No. | | I.D No. | |
| Type of facility (e.g. residential ,research) | | Type of facility (e.g. residential, research) | |
| Physical Address | | Physical Address | |
| | | | |
| | | | |
| | | | |
| District | | District | |
| Country/Province | | Province | |
| Port of entry into RSA (if applicable) | | | |
| Expected date of activity | | | |
| Purpose or reason of activity | | | |
| Means of Transportation | | Flight / Vehicle Registration / IMO no. | |
| | | | |

Please note: A permit for the import into the Republic, including introduction from the sea, of an alien or listed invasive species is valid for one consignment. Please attach additional pages if you require more space to complete this.

PART E: FOR POSSESSING OR GROWING/BREEDING/PROGRAGATING

Full name or Company name
 Identity or company registration number
 Type of facility (residential, nursery, aquarium etc.)

| | | | | | |
|--|-------------|--|----------------|-------------|--|
| Physical Address (where restricted activity is to be carried out) | | | Postal Address | | |
| | | | | | |
| | | | | | |
| | Postal Code | | | Postal Code | |
| Tel No. (work) | | | Tel No. (home) | | |
| Fax No. | | | | | |
| Cell No. | | | | | |
| E-mail address | | | | | |

Please attach additional pages if you require more space to complete this.

PART F: ALL RESTRICTED ACTIVITIES – UNDER REGULATION 6

Full name or Company name
 Identity or company registration number
 Type of facility (residential, nursery, aquarium etc.)

| | | | | |
|--|-------------|----------------|--|--|
| Physical Address (where prescribed activity is to be carried out) | | | | |
| | | | | |
| | | | | |
| | Postal Code | | | |
| Tel No. (work) | | Tel No. (home) | | |
| Fax No. | | | | |
| Cell No. | | | | |
| E-mail address | | | | |
| Brief description of the activity to be conducted | | | | |

Please attach additional pages if you require more space to complete this.

PART G: Payment Details: Applications not accompanied by proof of payment will not be processed

Payment method is via direct deposit or EFT
 Bank: **ABSA Bank**
 Account Name: **Department of Forestry, Fisheries and the Environment**
 Account Number: **40-7981-6531**
 Branch Name: **Pretoria**
 Branch Code: **632005**

- Please use initials and surname as reference number on the bank deposit slip or EFT payment. The following should be included as your reference number:
 - Reference number for Flora applications: **35142401**
 - OR**
 - Reference number for Fauna applications: **35142101**
- Please attach proof of payment to the application form
- Application processing fees: (Not refundable)
- No cash or cheques will be accepted at the Department's offices

PART H: APPROVED PERMIT

| | | |
|---|---|---|
| Please indicate your preference | <input type="checkbox"/> Collect permit | <input type="checkbox"/> Receive permit by post |
| To receive permit by post, please indicate the address to which the permit should be posted | | |

Checklist (This document checklist should be submitted with your application)

Please check that, where applicable you have;

- Attached a copy of the current permit (only if requesting a renewal or amendment)
- Attached a certified copy of the identity document
- Attached a Risk Assessment Report
- Attached all required supporting documentations (where applicable)
- Attached proof of payment
- Signed and dated the application declaration form before a commissioner of oaths

PART I: APPLICANT'S DECLARATION (To be completed in the presence of a Commissioner of Oaths)

I / We.....solemnly swear / affirm that the information provided in this application is true and accurate to the best of my / our knowledge; agree to pay the permit fee, regardless of issue status, and all costs associated with the permit application of the species listed on this application; and agree to indemnify the Department against all costs, whether commission, legal fees or otherwise incurred by the Department or the Department's duly authorised agents relating to the recovery of any monies, goods or services owed by me / us to the Department.

Signature of Deponent: Date:

I certify that before administering the oath / affirmation I asked the deponent the following questions and wrote his / her answers in his / her presence hereunder.

- a) Do you know and understand the contents of the oath/declaration?
Answer:
- b) Do you have any objection in taking the prescribed oath/declaration?
Answer:
- c) Do you consider the prescribed oath/declaration as binding on your conscience?
Answer:

I have satisfied myself as to the identity of the deponent.

I certify that the deponent has acknowledged that he / she knows and understands the contents of the declaration / affidavit.

The above signature / mark of the deponent is affixed to the declaration / affidavit in my presence.

Signed and sworn to / affirmed before me at
This day of in the year.....

Official stamp

.....
Signature of Commissioner of Oaths
Area for which appointed:

NOTE

Your application can either be posted, hand-delivered, faxed or emailed as indicated above on page 1. The application should be addressed to the Department of Forestry, Fisheries and the Environment.

PLEASE DO NOT BIND OR STAPLE THIS FORM TO ANY OTHER DOCUMENTS