

# DEPARTMENT OF ECONOMIC DEVELOPMENT, ENVIRONMENT & TOURISM

### **APPLICATION FOR P3-EXEMPTION**

#### Please note:

**NEW APPLICATION** 

PERMIT NUMBER

CATEGORY A

APPLICATION FOR RENEWAL

- Application forms must be completed in legible block letters.
- It is the applicant's responsibility to confirm receipt of an application form.
- Thirty working days are required to process a permit application.

TYPE OF EXEMPTION

• Where the space provided is not adequate the information should be attached as an addendum.

EXPIRY DATE

Any additional information, which the applicant deems necessary, should be attached to this
application.

CATEGORY B					
CATEGORY C					
BOW HUNTING					
PART A					
PARTICULARS OF LAND-OWNER					
Name & Surname					
Company Name					
Farm Name					
Size of enclosed area					
District					
Province					
ID Number (Passport number in the case of non-South Africans)					
Telephone (work)		Telephone (home)			
Cell Phone		Fax			
E-mail		·			
Physical		Postal			
Address		Address			
Are you the sole owner of the farm? If nor please com		nplete part B	Yes	No	
SIGNATURE OWNER			DATE		

#### PART B

SECTION 102: POWER OF THE MEC WHERE LAND IS HELD BY MORE THAN ONE PERSON, PARTNERSHIP OR OTHER BODY Where land is held -

- a. More than one person in undivided shares;
- b. A partnership;
- c. A body corporate or incorporate

Limpopo Environmental Management act (7 of 2003) 45. (1)Whenever the owner of enclosed land applies for exemption of any or all of the provisions of this Chapter, excluding section 31 (1)(f)(Hunting of Schedule five game under certain conditions), and if such owner submits a written application and environmental management plan on the prescribed forms, the MEC may after having considered the application, grant such owner of land or any other person indicated in the application, such exemption.

owner of land or any other person indicated in the application, such exemption.					
A meeting was held on		200_ wh	ereby all the members have decided that		
Mr/Mrs			be appointed as the person that will		
exercise the powers, functions and duties on behalf of the owner/s, of the following farms:					
	FARM NAME			REGISTRATION NUMBER	
•	appointed as the plenipotentia	ary for the al	bove-mer	itioned company is:	
Name & Surname					
ID Number (Passport nu	mber in the case of non-Sout	th Africans)			
Telephone (work)		Telephone	(home)		
Cell Phone		Fax			
E-mail					
Physical		Postal			
Address		Address			

PART C					
WILD ANIMAL SPECIES OCCURRING ON FARM					
SPECIES	SPECIES	SPECIES			

## PLEASE ADD THE FOLLOWING TO YOUR APPLICATION Detailed map / drawing of your farm indicating;

- (a) Roads
  (b) Water points
  (c) Neighboring farms (names and locality)

PERMIT COLLECTION			
Please indicate (by ticking the	Collect your permit		
appropriate option) whether you will:	Receive it by post		
Address to which permit should be			
posted (If it is to be posted)			

DECLARATION				
I declare that all the information provided is complete and correct to the best of my knowledge. I understand				
that any false information supplied could lead to my application being disqualified.				
Signature:	Date:			

OFFICIAL USE ONLY					
Category of exemption					
The following species are recommended for exemption:					
	Recommended / Not recom	ımer	nded / Approved / Not app	proved	
SIGNATURE		[	DATE		
	I Compliance Officer				
	Recommended / Not recom	ımer	nded / Approved / Not app	proved	
010	NATUDE			DATE	
SIGNATURE Deputy Manager: District		'	DATE		
	Recommended / Not recom	mar	aded / Approved / Not apr	proved	
	Necommended / Not recom	IIIICI		Jioved	
SIGNATURE		I.	DATE		
Mana	ger: District				
Permit number			•		
Valid from			Valid to		
Receipt number				•	