



## water & sanitation

Department:  
Water and Sanitation  
REPUBLIC OF SOUTH AFRICA

<b>APPLICATION FOR AMENDMENT OF REGISTRATION CERTIFICATE</b>	<b>APPLICATION IN TERMS OF REGISTRATION REGULATIONS 11 OF THE REGISTRATION REGULATIONS NUMBER 1352 ISSUED UNDER SECTION 26(1)(C), READ TOGETHER WITH SECTION 69 OF THE NATIONAL WATER ACT, 1998, (ACT NO. 36 OF 1998)</b>
Register Number	

### 1. REGISTERED PROPERTY

Property where water use takes place (farm, stand or community)	
a) Surveyor-General office	
b) Administrative district	or Registration Division
c) Farm/Property Number	d) Portion of Property
(e) Cadastral Code	
f) Transfer of Title Number (Existing Owner)	g) Title Deed Date*
T	Y Y Y Y M M D D
h) Transfer of Title Number (Amended: New Owner)	i) Title Deed Date
	Y Y Y Y M M D D

### UNSURVEYED PROPERTY

Name of Property where water use takes place (farm, stand or community)	
Leader Surname	Initials
Local Authority type	
Magisterial district	
Tribal Authority	
Province	
Total Hectare(s) (Ha)	

### 2. DETAILS OF THE WATER USER

2.1 Nature of the Water User (mark only one block with X)				
Individual	Company*	National Government	Provincial Government	Other
Water Management Institution				
Description of other				
2.2 Identification Number (if applicable) *		(e.g. ID Number, business register number)		
Country of issue of identification if a foreign ID.		Expiry date		
2.3 Surname or Name of Water User				
2.4 Initials (if applicable)		Title (if applicable)		
2.5 If the Water User is a company*:				
Trading name if applicable and different from name of company, business or partnership				

Date established	Y	Y	Y	Y	M	M	D	D
Country where established								
2.6	VAT Registration Number							
2.7	If the Water User is a person:				Gender (Male/Female) (Delete whichever is not applicable)			
	Population Group (Black/ Coloured/Indian/White) (Delete whichever is not applicable)							
2.8	<b>Water User Contact Details</b>							
	e-mail Address							
	Postal Address							
								Postcode
	Street Address (only if different from postal address)							
	Cell Number				3.8	Fax Number		

**4. DECLARATION BY APPLICANT**

4.1 Surname of registered \* / delegated \* person (\* delete whichever is not applicable)

initials			title			ID number			

4.2 Position or official status

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

4.3 I declare that the information given by me is true and correct.

signature	date				thumbprint (only if requested)								
<div style="border: 1px solid black; height: 40px; width: 100%;"></div>	<table border="1"> <tr> <td>Y</td><td>Y</td><td>Y</td><td>Y</td> <td>M</td><td>M</td><td>D</td><td>D</td> </tr> </table>				Y	Y	Y	Y	M	M	D	D	<div style="border: 1px solid black; width: 60px; height: 60px;"></div>
Y	Y	Y	Y	M	M	D	D						

**FOR OFFICIAL USE ONLY**

File number										
Received by:										
Surname						Initials				
Rank										
Signature	<div style="border: 1px solid black; height: 30px; width: 100%;"></div>									
Captured by:										
Initials										
										<i>Date stamp of receiving office</i>

**Required supporting documentation to be submitted with application form checklist**

ID copy	Title deed	Business registration certificate	Vat Reg certificate
---------	------------	-----------------------------------	---------------------