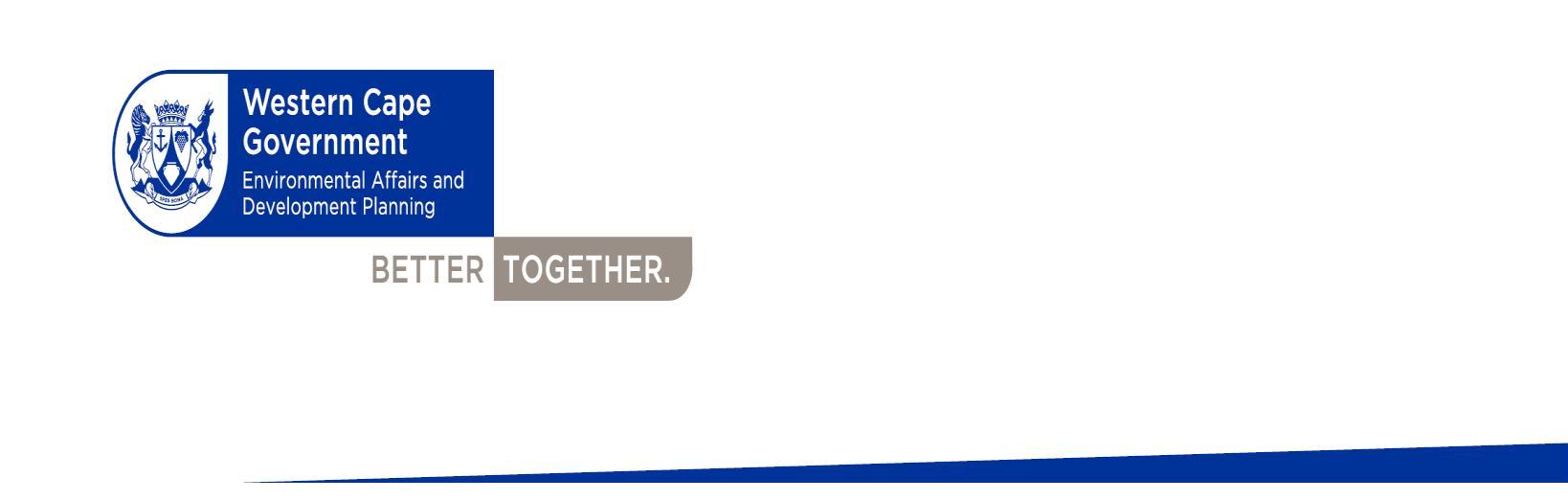


**Waste Management**

**Licence Application**

**Additional Information Annexure**

**December 2013**

**DIRECTORATE: WASTE MANAGEMENT**

**Waste Management Licence Application Additional Information Annexure (application for new facilities, expansion of existing facilities or decommissioning / closure of existing facilities.)**

**DECEMBER 2013**



**DEPARTMENTAL REFERENCE NUMBER(S)**

File reference number (EIA):

File reference number (Waste):

File reference number (Other):

**PROJECT TITLE**

**Kindly note that:**

1. For an application for a waste management licence that must subjected to a Basic Assessment or Scoping & Environmental Impact Reporting process, this Annexure must be submitted together with the Basic Assessment Report or Environmental Impact Report. Note that when applying for decommissioning/closure of existing facility only the following sections must be completed 2, 3, 15 and 16.
2. This annexure is current as of December 2013. It is the responsibility of the Applicant / EAP to ascertain whether subsequent versions of the appendix have been published or produced by the competent authority.
3. The required information must be typed within the spaces provided in the report. The sizes of the spaces provided are not necessarily indicative of the amount of information to be provided. It is in the form of a table that will expand as each space is filled with typing.
4. An incomplete annexure may result in the rejection of the Basic Assessment Report or Environmental Impact Report.
5. The use of “not applicable” in the document must be done with circumspection. Where it is used in respect of material information that is required by the Department for assessing the application, this may result in the rejection of the Basic Assessment Report or Environmental impact Report.
6. **While the different sections of the annexure report only provide space for provision of information related to one alternative, if more than one feasible and reasonable alternative is considered, the relevant section must be copied and completed for each alternative**.
7. Unless protected by law all information contained in, and attached to this report, will become public information on receipt by the competent authority. If information is not submitted with this report due to such information being protected by law, the applicant and/or EAP must declare such non-disclosure and provide the reasons for the belief that the information is protected.
8. This annexure must be submitted together with the Basic Assessment Report or Environmental Impact Report to the Department at the postal address given below or by delivery thereof to the Registry Office of the Department. No faxed or e-mailed reports will be accepted. **Please note that for waste management licence applications, this report must be** **submitted for the attention of the Department’s Waste Management Directorate (tel: 021-483-2756 and fax: 021-483-4425) at the same postal address as the Cape Town Office Region A.**



**DEPARTMENTAL DETAILS**

**DIRECTORATE WASTE MANAGEMENT**

Department of Environmental Affairs and Development Planning

Attention: Directorate Waste Management

Private Bag X 9086

Cape Town,

8000

Registry Office

1st Floor Utilitas Building

1 Dorp Street,

Cape Town

2

Queries should be directed to: Tel (021) 483-2756 Fax (021) 483-4425

**View the Department’s website at**  [**http://www.westerncape.gov.za/dept/eadp**](http://www.westerncape.gov.za/dept/eadp) **for the latest version of this document.**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Highlight the type of** | **Recycling and/or** | **Treatment facility** | **Disposal facility** | **Other** |  |
| **project:** | **recovery facility** |  |
|  |  |  |  |
|  |  |  |  |  |  |

**Please provide a general description of the project and associated infrastructure:**

1. **SIZE OF SITE AND FACILITY, AND CLASSIFICATION OF FACILITY**

|  |  |
| --- | --- |
| Size of facility for a waste management activity | m2 |
| Area where the waste management activity takes place | m2 |
| In terms of waste disposal and composting facilities: Classification of facility in terms of |  |
| climatic water balance |  |
| In terms of waste disposal facilities: Classification of Facility in terms of the type and the |  |
| quantity of waste received |  |

1. **GEOGRAPHICAL COORDINATES OF ALL EXTERNAL CORNER POINTS OF FOOTPRINT OF THE WASTE MANAGEMENT FACILITY**

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Number of corner** |  | **Latitude (S):** | | |  | **Longitude (E):** | | |  |  |
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**Please note:** The corner numbers must be indicate on a site map to be attached to this annexure.

1. **DETAILS OF THE PERSON WISHING TO HOLD THE WASTE MANAGEMENT LICENCE**

|  |  |  |  |
| --- | --- | --- | --- |
| First name and surname: |  |  |  |
| Company Name (if any): |  |  |  |
| Identity and/or Company Registration number: |  |  |  |
| Physical address: |  |  |  |
| Postal address: |  |  |  |
|  |  | Postal code: |  |
| Telephone: | ( ) | Cell: |  |
| E-mail: |  | Fax: | ( ) |
| EAP Qualifications |  |  |  |
| EAP Registrations/Associations |  |  |  |

3

1. **DETAILS OF THE OPERATIONAL TIMES**

|  |  |  |
| --- | --- | --- |
| **PERIOD** | **FROM** | **UNTIL** |

**Weekdays**

**Saturdays**

**Sunday**

**Public holidays**

1. **DESCRIPTION OF THE WASTE MANAGEMENT ACTIVITIES AND THE WASTE MANAGEMENT OPERATIONS**

5.1 Provide a flow chart of the operation showing all inputs and outputs of the process.

*INSERT FLOW CHART HERE*

4

1. Give particulars of the source, location, nature, composition and quantity of emission to the atmosphere, surface water, sewer, and ground-water including noise emissions. Solid waste must be in cubic metres (m3) or tons (t) and specify units for liquids and gases.
2. **WASTE QUANTITIES** 
   1. Indicate or specify types of waste and list the estimated in cubic meters (m3) or tons (t) expected to be managed daily (in cubic meters or tons):

|  |  |  |
| --- | --- | --- |
| **Hazardous waste** | **Non hazardous waste** | **Total** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
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|  |  |  |
|  |  |  |

6.2 Indicate the source of information supplied in the table above:

|  |  |  |
| --- | --- | --- |
| Determined from volumes | Determined with weighbridge/scale | Estimated |
|  |  |  |

If estimation is utilised please describe the method used):

**7. RECOVERY, REUSE, RECYCLING, TREATMENT AND DISPOSAL QUANTITIES (NOT APPLICABLE FOR DECOMMISSIONING / CLOSURE APPLICATIONS):**

1. Indicate the applicable waste types and quantities expected to be recovered, reused, recycled, treated and disposed of annually.

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  | **On-site** | **Offsite recovery** |  | **Offsite disposal** |  |
|  |  |  |  | **recovery** | **reuse recycling** |  |  |  |
| **Types of waste** | **Main** | **Quantities (tons or m3)** | | **reuse** | **treatment or** |  |  |  |
|  | **source** | **recycling** | **disposal** |  |  |  |
|  |  |  |  |  |  |
| **(see page 13 for waste** | **(name of** |  |  | **treatment** |  |  |  |  |
| **classification)** | **company)** |  |  | **or disposal** |  |  |  |  |
|  |  | **Quantities** | **Quantities** | **Method &** | **Method location and contractor** | | |  |
|  |  | **/day** | **/month** | **location** |  | **details** | |  |

**General waste**

**Hazardous waste**

5

1. **SIZE OF THE POPULATION TO BE SERVED BY THE FACILITY**

8.1 Indicate the size of the population to be served by the waste management facility:

|  |  |
| --- | --- |
| **Size of population** | **Comment** |

0-499

500-9,999

10,000-199,999

200,000 upwards

1. **WASTE DISPOSAL FACILITY PARAMETERS (ONLY APPLCABLE TO WASTE DISPOSAL FACILITIES)** 
   1. It is imperative that the holder of the waste licence is a fit and proper person in terms of section 59 of the National Environment Management: Waste Act, 2008 (Act No. 59 of 2008). Please disclose the following:
2. The method of disposal of waste (only applicable to waste disposal facilities):

Land-building

Land-filling

Both

1. The dimensions of the disposal site in metres:

|  |  |
| --- | --- |
| At commencement | After rehabilitation |

Height/Depth

Length

Breadth

1. The total volume available for the disposal of waste on the site:

|  |  |  |  |
| --- | --- | --- | --- |
| Volume Available | | Mark with “x” | Source of information (determined by surveyor/estimated |
| Up to 99 | |  |  |
|  |  |  |  |
| 100 – 34 | 999 |  |  |
|  |  |  |  |
| 35 000 – | 3,5 million |  |  |
|  | |  |  |
| > 3,5 million | |  |  |
|  |  |  |  |

1. Compacting and covering of the waste body:

|  |  |  |  |
| --- | --- | --- | --- |
| Confirm that the waste body will be covered daily | Yes | No | If no, please explain |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| Confirm that that sufficient cover material is available |  | No | If no, please explain |
|  |  |  |  |
| Give an indication of where the cover material will be sourced and indicate the distance in | | | |
| kilometres/metres from waste disposal facility. |  |  |  |
|  |  |  |  |
|  |  |  |  |
| Confirm that the waste will be compacted daily |  | No | If no, please explain |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

1. **THE RECLAMATION/DIVERSION METHOD AT THE WASTE DISPOSAL FACILITY**

6

1. Mark with an “x” the method to be used (reclamation not allowed at the working face of the disposal facility):

At source

Recycling installation

No reclamation/diversion planned

Estimate the planned diversion rate in percentage

1. **FATAL FLAWS FOR THE SITE (ONLY APPLICABLE TO WASTE DISPOSAL FACILITIES):**

Indicate which of the following apply to the facility for a waste management activity:

|  |  |  |
| --- | --- | --- |
| Within a 3000m radius of the end of an airport landing strip | Yes | No |
|  |  |  |
| Within the 1 in 50 year flood line of any watercourse | Yes | No |
|  |  |  |
| Within an unstable area(fault zone, seismic zone, dolomitic area, sinkholes) | Yes | No |
|  |  |  |
| Within the drainage area or within 5 km of water source | Yes | No |
|  |  |  |
| Within an area with shallow and/or visible water table | Yes | No |
|  |  |  |
| Within an area adjacent to or above an aquifer | Yes | No |
|  |  |  |
| Within an area with shallow bedrock and limited available cover material | Yes | No |
|  |  |  |
| Within 100 m of the source of surface water | Yes | No |
|  |  |  |
| Within 1km from the wetland | Yes | No |
|  |  |  |
| Indicate the distance to the boundary of the nearest residential area | **………….. metres** | |
|  |  | |
| Indicate the distance to the boundary of the industrial area | **………….. metres** | |
|  |  |  |

1. **RAINFALL (ONLY APPLICABLE TO WASTE DISPOSAL FACILITIES):** 
   1. **Indicate the wettest 6 months of the year:**

November – April

May - October

For the wettest six month period indicated above, indicate the following for the preceding 30 years

For the 1st wettest year For the 2nd wettest year For the 3rd wettest year For the 4th wettest year For the 5th wettest year For the 6th wettest year For the 7th wettest year For the 8th wettest year For the 9th wettest year For the 10th wettest year

|  |  |  |
| --- | --- | --- |
| **Total rainfall for 6** | **Total A-pan evaporation** | **Climatic water** |
| **months** | **for 6 months** | **balance** |
|  |  |  |
|  |  |  |
|  |  |  |
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7

1. **LOCATION AND DEPTH OF GROUND WATER MONITORING BOREHOLES (ONLY APPLICABLE TO WASTE DISPOSAL FACILITIES):**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Codes of** | **Borehole** | **Depth** |  | **Latitude** | |  |  |  |  | **Longitude** | | |  |  |  |
| **boreholes** | **locality** | **(m)** |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

1. **LOCATION AND DEPTH OF LANDFILL GAS MONITORING TEST PIT (ONLY APPLICABLE TO WASTE DISPOSAL FACILITIES):**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Codes of | Borehole locality |  |  | Latitude | |  |  |  |  | Longitude | |  |  |  |
| boreholes |  |  |  |  |  |  |  |  |  |
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1. **EVERY CLOSURE APPLICATION FOR FACILITIES SHOWN IN THE TABLE BELOW MUST AS A MINIMUM BE ACCOMPANIED BY DOCUMENTATION AS INDICATED HEREAFTER:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Requirements** | **Recycling &/** | **Treatment** | **Disposal** |
|  | **recovery** | **facility** | **facility** |
|  | **Facility** |  |  |
| Design of storm-water management | **X** | **X** | **X** |
| Design of leachate management |  |  | **X** |
|  |  |  | **X** |
| Design & duration of landfill gas monitoring and management |  |  |  |
| Design of settlement/surface pondage |  |  | **X** |
| Design of access roads |  |  | **X** |
|  |  |  |  |
| Topographic Map indicating the property | **X** | **X** |  |
| Topographic Map indicating the landfill property boundary, cells (fill |  |  | **X** |
| areas), wells, and structures within and surrounding the landfill site |  |  |  |
| Plan Drawings (including Final Contour Grade Map) indicating |  |  | **X** |
| (a) the final contours and vegetation in relationship to the |  |  |  |
| surrounding land and any run-off control structures |  |  |  |
| Plan Drawings (including Final Contour Grade Map) indicating |  |  | **X** |
| (b) well location(s), depth to groundwater and flow direction |  |  |  |
| Plan Drawings (including Final Contour Grade Map) indicating |  |  | **X** |
| (c) the locations at which gas monitoring takes place |  |  |  |
| Drawings showing the proposed final restored profile for the landfill |  |  | **X** |
| accompanied by calculations of the remaining tonnages of waste |  |  |  |
| (void space) and materials necessary to close, cap and restore the |  |  |  |
| landfill |  |  |  |
|  |  |  |  |
| Provision of services that were provided by the facility being closed | **X** | **X** | **X** |
| Post Closure Site management & Operation | **X** | **X** | **X** |
|  |  |  |  |
| Monitoring Plan | **X** | **X** | **X** |
| Emergency Preparedness plan | **X** | **X** | **X** |
|  |  |  |  |
| Rehabilitation measures including removal of site structures, | **X** | **X** | **X** |
| Rehabilitation measures including waste compaction and capping; |  |  | **X** |
| application of topsoil & vegetation establishment |  |  |  |
| Procedures for the inspection or auditing of the rehabilitation process | **X** | **X** | **X** |

8

|  |  |  |  |
| --- | --- | --- | --- |
| and mechanisms for reporting to the licensing authority. |  |  |  |
| Long and short term stability |  |  | **X** |
| Procedures and timescales for ensuring final levels are achieved |  |  | **X** |

1. **INFORMATION NEEDED WHEN APPLYING FOR ACTIVITIES LISTED UNDER**

**CATEGORY A AND B, BUT IS NOT LIMITED THERETO:**

The following MUST be included in the application as supporting documentation and the applicant must indicate specific section(s) where they are appended in the reports.

|  |  |  |  |
| --- | --- | --- | --- |
| **REQUIRED PIECE OF INFORMATION** | | **SECTION IN THE REPORTS** | **COMMENTS (If any)** |
|  |  | **WHERE IT CAN BE FOUND** |  |
| 1. | 1:50 000 topography /topo-cadastral map of |  |  |
|  | the area showing: |  |  |
| 1.1 The site and 5km radius | |  |  |
|  | |  |  |
| 1.2 Existing neighbouring residential and | |  |  |
|  | industrial areas |  |  |
| 1.3 Possible future development (indicate the | |  |  |
|  | type of development) |  |  |
| 1.4 Other waste handling facilities (existing or | |  |  |
|  | closed) in the area |  |  |
| 1.5 Existing and possible future neighbouring | |  |  |
|  | residential areas. |  |  |
| 2. | The site plan drawn to scale showing the |  |  |
|  | site‟s boundary showing: |  |  |
| 2.1 Activities or development existing on all 4 | |  |  |
|  | directions of the facility. |  |  |
| 2.2 Waste receipt, storage and handling areas | |  |  |
| 2.3 Impermeable surfaces | |  |  |
| 2.4 Sealed drainage systems | |  |  |
| 2.5 Drainage system for the facility including | |  |  |
|  | sumps and discharge points |  |  |
| 2.6 Road names and access from all major | |  |  |
|  | roads in the area |  |  |
| 2.7 Buffersone (waste disposal and composting | |  |  |
|  | facilities) |  |  |
| 3. | Security and access aspects of the facility |  |  |
| 4. | Emergency preparedness plan |  |  |
| 5. | Waste hierarchy implementation plan |  |  |
| 6. | Operational plan |  |  |
| 7. | Latest external audit report (only apply for |  |  |
|  | permit/licence amendment) |  |  |
| 8. | Geo-hydrological report (only apply to |  |  |
|  | waste disposal facilities , storage facilities |  |  |
|  | and treatment of waste) |  |  |
| 7. | Description risk assessment |  |  |

1. **ANY OTHER REQUIREMENTS IN TERMS OF THE WASTE ACT**

Please describe how the principles of waste management as set out in section 16 of National Environment Management: Waste Act, 2008 (Act No. 59 of 2008) have been taken into account:

In this section please describe how any other requirements in terms of the National Environment Management: Waste Act, 2008 (Act No. 59 of 2008), not dealt with above, have been complied with/addressed:

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1. **COMPETENCE OF THE PERSON/COMPANY THAT WILL HOLD THE WASTE MANAGEMENT LICENCE**

It is imperative that the holder of the waste management licence is a fit and proper person in terms of section 59 of the National Environment Management: Waste Act, 2008 (Act No. 59 of 2008). Please disclose the following:

(a) Legal compliance:

|  |  |
| --- | --- |
| **Yes / No** | **Describe** |

Has the applicant ever been found guilty or issued with a non compliance notice in terms of any national environmental management legislation?

Has the applicant‟s licence in terms of the Waste Act 2008 ever been revoked?

Has the applicant ever been issued with a non compliance notice or letter in terms of any South African Law?

**Please note:** Details required above include any information that the applicant wants the Department to take intoconsideration in determining whether they are a “fit person” and this includes reasons why the offence happened and measures in place to prevent recurrence.

(b) Technical competence:

What technical skills are required to operate the site?

How will the applicant ensure and maintain technical competency in the operation of the site?

Qualifications of person and relevant employees?

Experience of person and relevant employees? (highlight the persons/employees duties and responsibilities in terms of the experience)

(c) Financial Provisions:

Attach to this annexure a plan of estimated expenditure for the following:

Environmental Monitoring

Provision and replacement of infrastructure

Provision for appropriate equipment

Closure/decommissioning/rehabilitation and aftercare

Confirmation that adequate funds have been budgeted for the above aspects

1. **INFORMATION FOR WASTE DISPOSAL FACILITIES**

The following aspects MUST be addressed and included in the application documentation for waste disposal facilities and the applicant must indicate specific section(s) where they are appended in the reports.

|  |  |  |
| --- | --- | --- |
| **REQUIRED PIECE OF INFORMATION** | **SECTION IN THE REPORTS** | **COMMENTS (If any)** |
|  | **WHERE IT CAN BE FOUND** |  |
| Waste disposal facility designs |  |  |
|  |  |  |
| Closure plan (report) |  |  |
|  |  |  |
| Closure/Remedial designs |  |  |
|  |  |  |
| Landfill conceptual designs (only apply for |  |  |
| construction and decommissioning of waste |  |  |
|  |  | 10 |

disposal facilities

End-use plan (only apply to waste disposal facility closure)

Design for site roads

The 1 in 50 year flood-line of all watercourses

Laboratory facilities

Design and location of fuel storage areas

Design and location waste quarantine areas

Design and location of waste Inspection areas

Site‟s drainage system

Site‟s emergency control system and plan

Liner specifications

Leak detection system and monitoring

Leachate management plan

Calculations of leachate generation

Leachate collection and treatment

Groundwater monitoring

Gas management and/or harvesting

Air quality monitoring and management

Co-disposal ratio calculation

Stability monitoring and management

Daily and intermediate cover requirements

Temporary and permanent capping requirements

**DECLARATIONS**

**THE APPLICANT**

I …………………………………., in my personal capacity or duly authorised (please circle the applicable option) by ……………..................................………………… thereto hereby declare that I:

* regard the information contained in this report to be true and correct, and
* am fully aware of my responsibilities in terms of the National Environmental Management Act of 1998 (“NEMA”) (Act No. 107 of 1998), the Environmental Impact Assessment Regulations (“EIA Regulations”) in terms of NEMA (Government Notice No. R. 543 refers), and the NEM: Waste Act (Act no 59 of 2008), and that failure to comply with these requirements may constitute an offence in terms of the environmental legislation;
* appointed the environmental assessment practitioner as indicated above, which meet all the requirements in terms of regulation 17 of GN No. R. 543, to act as the independent environmental assessment practitioner for this application;
* have provided the environmental assessment practitioner and the competent authority with access to all information at my disposal that is relevant to the application;
* will be responsible for the costs incurred in complying with the environmental legislation including but not limited to –

o costs incurred in connection with the appointment of the environmental assessment practitioner or any person contracted by the environmental assessment practitioner;

o costs incurred in respect of the undertaking of any process required in terms of the regulations; o costs in respect of any fee prescribed by the Minister or MEC in respect of the regulations;

o costs in respect of specialist reviews, if the competent authority decides to recover costs; and

o the provision of security to ensure compliance with the applicable management and mitigation measures;

* am responsible for complying with the conditions that might be attached to any decision(s) issued by the competent authority;
* have the ability to implement the applicable management, mitigation and monitoring measures;

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* hereby indemnify, the government of the Republic, the competent authority and all its officers, agents and employees, from any liability arising out of, inter alia, the content of any report, any procedure or any action for which the applicant or environmental assessment practitioner is responsible; and
* am aware that a false declaration is an offence in terms of regulation 71 of GN No. R. 543.

**Please Note:** If acting in a representative capacity, a certified copy of the resolution or power of attorney must beattached.



Signature of the applicant:



Name of company:



Date:

**THE INDEPENDENT ENVIRONMENTAL ASSESSMENT PRACTITIONER (EAP)**

I ……………………………………, as the appointed independent environmental practitioner (“EAP”) hereby declare that I:

* act/ed as the independent EAP in this application;
* regard the information contained in this report to be true and correct, and
* do not have and will not have any financial interest in the undertaking of the activity, other than remuneration for work performed in terms of the NEMA, the Environmental Impact Assessment Regulations, 2010 and the NEM: Waste Act (Act no 59 of 2008);
* have and will not have no vested interest in the proposed activity proceeding;
* have disclosed, to the applicant and competent authority, any material information that have or may have the potential to influence the decision of the competent authority or the objectivity of any report, plan or document required in terms of the NEMA, the Environmental Impact Assessment Regulations, 2010 and the NEM: Waste Act (Act no 59 of 2008);
* am fully aware of and meet the responsibilities in terms of NEMA, the Environmental Impact Assessment Regulations, 2010 (specifically in terms of regulation 17 of GN No. R. 543) and the NEM: Waste Act (Act no 59 of 2008), and that failure to comply with these requirements may constitute and result in disqualification;
* have ensured that information containing all relevant facts in respect of the application was distributed or made available to interested and affected parties and the public and that participation by interested and affected parties was facilitated in such a manner that all interested and affected parties were provided with a reasonable opportunity to participate and to provide comments;
* have ensured that the comments of all interested and affected parties were considered, recorded and submitted to the competent authority in respect of the application;
* have kept a register of all interested and affected parties that participated in the public participation process;
* have provide the competent authority with access to all information at my disposal regarding the application, whether such information is favourable to the applicant or not; and
* am aware that a false declaration is an offence in terms of regulation 71 of GN No. R. 543.

**Note:** The terms of reference must be attached.



Signature of the environmental assessment practitioner:



Name of company:

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Date:

**THE INDEPENDENT PERSON WHO COMPILED A SPECIALIST REPORT OR UNDERTOOK A SPECIALIST PROCESS**

I ……………………………………, as the appointed independent specialist hereby declare that I:

* act/ed as the independent specialist in this application;
* regard the information contained in this report as it relates to my specialist input/study to be true and correct, and
* do not have and will not have any financial interest in the undertaking of the activity, other than remuneration for work performed in terms of the NEMA, the Environmental Impact Assessment Regulations, 2010 and any specific environmental management Act;
* have and will not have no vested interest in the proposed activity proceeding;
* have disclosed, to the applicant, EAP and competent authority, any material information that have or may have the potential to influence the decision of the competent authority or the objectivity of any report, plan or document required in terms of the NEMA, the Environmental Impact Assessment Regulations, 2010 and any specific environmental management Act;
* am fully aware of and meet the responsibilities in terms of NEMA, the Environmental Impact Assessment Regulations, 2010 (specifically in terms of regulation 17 of GN No. R. 543) and any specific environmental management Act, and that failure to comply with these requirements may constitute and result in disqualification;
* have ensured that information containing all relevant facts in respect of the specialist input/study was distributed or made available to interested and affected parties and the public and that participation by interested and affected parties was facilitated in such a manner that all interested and affected parties were provided with a reasonable opportunity to participate and to provide comments on the specialist input/study;
* have ensured that the comments of all interested and affected parties on the specialist input/study were considered, recorded and submitted to the competent authority in respect of the application;
* have ensured that the names of all interested and affected parties that participated in terms of the specialist input/study were recorded in the register of interested and affected parties who participated in the public participation process;
* have provide the competent authority with access to all information at my disposal regarding the application, whether such information is favourable to the applicant or not; and
* am aware that a false declaration is an offence in terms of regulation 71 of GN No. R. 543.

**Note:** The terms of reference must be attached.



Signature of the specialist:



Name of company:



Date:

**GENERAL WASTE CATEGORISATION**

Municipal waste

Commercial and industrial waste

Brine

Fly ash and dust from miscellaneous filter sources

Bottom slag

Organic

Construction and demolition waste

Paper

Glass

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Metal

Tyres

Other (specify)

**HAZARDOUS WASTE CATEGORISATION**

Gaseous waste

Mercury containing waste

Batteries

POP Waste

Pesticide containing waste

Inorganic chemical waste

Asbestos containing waste

Waste oils

Organic halogenated and/or sulphur containing solvents

Organic halogenated solids and compounds with sulphur

Organic solvents without halogens and sulphur

Other organic waste without halogens and sulphur

Tarry and bituminous waste

Brine

Fly ash and dust from miscellaneous filter sources

Bottom ash

Slag

Mineral waste

Waste of Electric and Electronic Equipment (WEEE)

Metal scrap

Health care risk waste

Miscellaneous

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