



environment & tourism

Department:
Environmental Affairs and Tourism
REPUBLIC OF SOUTH AFRICA

Private Bag X2, Roggebaai, 8012, Tel: 021 402 3911, Fax: 021 402 3362

Application to the Department of Environmental Affairs and Tourism in terms of regulation 5 (Regulations published in terms of the Marine Living Resources Act, 1998 under GNR 724 of 4 July 2008): Regulations for the management of White Shark Cage Diving.

APPLICATION FOR A PERMIT TO CONDUCT A WHITE SHARK CAGE DIVING BUSINESS

For official use:	Applicant Name	:	.....
	Identification number	:	.....
	Application No.	:	.....
	Area you intend to operate	:	.....
	Date received	:	.....
	Venue	:	.....
	Designated Officer	:	.....

	Received by	:	.....
	Date	:	.....
	Time of receipt	:	.....

Departmental Stamp:

The submission of an application does not imply an acknowledgement of the completeness of the application or the correctness of its contents.

INSTRUCTIONS

1. General

- 1.1 This application must be read together with these instructions.
- The Policy guides the Minister or his/her delegate in considering the application. Applicants are advised to read the Policy and Regulations on the allocation of permits for White Shark Cage Diving.
 - The Policy is available at Customer Services, Ground Floor, Foretrust Building, Martin Hammerschlag Way, Foreshore in Cape Town.
 - The applicants may request an official from the Department to assist them with the completion of the application form at the application centre (location designated by the department). All queries regarding the completion of this application form may be referred to the designated official for attention.
 - Applicants may not communicate with the Minister, the delegated authority or officials in the Department regarding their application other than at the application centre. Moreover, no reliance may be placed on any information given or obtained in any other manner other than via the application centre.
- 1.2 Applicants are required to provide the following documents of which certified copies should be attached to the application form:
- Power of attorney if the applicant does not apply in their personal capacity,
 - SARS tax clearance certificate,
 - Company registration documents and shareholding lists,
 - SAMSA certificates (for vessel and skipper accreditation) and tour guide training certificates,
 - Charter agreements, where relevant, or proof of ownership of a vessel and proof of public liability insurance.
 - Certificate of appropriately qualified dive master

1.3 The Application Form must be signed by the Applicant or a duly authorized representative of the Applicant, before a Commissioner of Oaths.

2. COMPLETION OF APPLICATION FORM

- All the applicable sections of the form must be completed. If any section does not apply, it must be marked "N/A". Where information is unavailable, the section may be marked "UNKNOWN".
- Applicants who are apply as individuals should fill in SECTION 1.
- Applicants who are applying as a company or close corporation, or new entrant Applicants who intend to form a company or close corporation must fill in SECTION 2.
- The Chief Executive Officer or Managing Director of the company or close corporation should in addition complete SECTION 1.
- All Applicants must complete all other sections of this form.

3. SUBMISSION OF APPLICATION

The application must be delivered physically to the Department of Environmental Affairs and Tourism, Branch: Marine and Coastal Management, Customer services Ground Floor Foretrust Building, Martin Hammerschlag Way, Foreshore, Cape Town 8001, before the closing date and within official working hours. An application not submitted by hand by the closing date, will not be considered.

4. IMPROPER SUBMISSION OF APPLICATION FORM

Improperly submitted applications will not be considered. An application is improperly submitted if:

- a) it is received late (after the closing date);
- b) the applicant makes no payment, late payment or short payment of the application fee.

5. MATERIAL DEFECTS

Applications that are materially defective will not be considered. An application is materially defective if:

- a) The declaration is not signed and attested by the applicant or his/her representative.
- b) The applicant provides false information or documents, fails to disclose information or attempts to influence the Minister or the delegated authority other than in the manner provided for in the Policy or in this application form.

6. NEW ENTRANTS

- New entrant applicants who are not able to provide details of a company, vessel information, skipper or tour guide information, evidence of job creation or public liability insurance etc. should indicate steps they have taken to comply with such requirements or indicate the proposed plan to comply with the above requirements.
- Section 6 should be completed as the new entrant must be able to provide a comprehensive marketing strategy and operational plan. In the event that a new entrant is not able to provide details in respect of any question or section of the Application Form, the Applicant must provide an undertaking as to when he/she will be able to fulfill the requirement set out in the policy and this application form.

7. THE APPLICATION MUST NOT BE SUBMITTED BY FAX OR POST.

SECTION 1: PARTICULARS OF INDIVIDUAL APPLICANT /CEO/MANAGING DIRECTOR

1. Name of Applicant:..... Title:

2. Gender:Race:.....

3. Date of Birth:.....

4. Identity Number:.....

5. Position:

6. Telephone Number (w)

7. Telephone Number (h):

8. Cell phone Number:

9. Fax Number:

10. E-mail address:

11. Residential address:.....

.....

.....

Postal Code

12. Postal address:.....

.....

.....

.....

Postal code

Area of operation:

Period lived and /worked in the area:

Years Months

SECTION 2: BUSINESS INFORMATION

Type of Entity (please tick):

Close Corporation Trust Private Company Public Company Other

Trading name of Entity:.....

Registered Name of Entity:.....

Registration No.

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

VAT No.

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

Income Tax No.

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

Postal Address: Physical Address:.....
.....
.....

Postal Code:

--	--	--	--

--	--	--	--

Telephone No:.....

Fax:.....

E-mail address:

If you are a new entrant do you intend to form a new entity and if so when?.....
.....
.....
.....

Area of operation:

Period operated in the area:

Years Months

Who are the shareholders/intended shareholders of the Company or Close corporation? (Indicate race, gender and percentage of shareholding in each category and provide copies of shareholding lists in the table below)

Name of shareholders or member	Race	Gender	I.D number	Percentages shareholder or interest

SECTION 3: COMPLIANCE INFORMATION

3.1 Have you been involved in the industry, if so how long?

3.2 Seasonal gross income generated

3.3 Have you/ any of your directors/shareholders/members ever been convicted of an offence in terms of the MLRA or the regulations, or a contravention of any permit/exemption conditions?

YES

NO

If YES please list the offences and the names of the individuals:.....
.....
.....
.....
.....

3.4 Are there any criminal matters pending in respect of the above individuals?

YES NO

3.5 Were you/your directors'/shareholders'/members' permit or right, licence (in any sector) ever been suspended, revoked, cancelled or reduced under section 28 of the MLRA?

YES NO

If YES please provide details and a copy of the decision in terms of section 28(3) of the MLRA:

.....
.....
.....
.....

3.6 Are there any Section 28 matters pending in respect of the above individuals?

YES NO

3.7 Have you/your directors'/shareholders'/members' paid an admission of guilt fine for a contravention of the MLRA, the regulations, or permit/exemption conditions?

YES NO

3.8 If you are a current permit/exemption holder, how many trips did you do in the last 2 seasons and please provide copies of logbook entries?

SECTION 4: NOMINATED VESSEL INFORMATION

Do you have a suitable vessel?.....

If Yes, Provide;

Name of the vessel/s:.....

Nature of access to the Vessel (majority owner or charter agreement) :.....

Vessel length:..... Crew

--	--

SAMSA Reg. No: Grt

--	--	--	--

(tones)
(Attach valid SAMSA certificate)

What is the maximum number of passengers that the vessel can carry?.....

GPS

Vessel Monitoring System

Radio call sign

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

SECTION 5: JOB CREATION

How many people do you intend to employ in your business?

Please provide a list of all employees indicating race, gender and level of employment (for example management, crew, or owners):.....

.....
.....
.....
.....

Indicate compliance with employment equity and preferential procurement? Indicate documents attached).....

.....
Demonstrate examples of corporate social responsibility (i.e. educational trips for children etc)?.....

.....
Have you or do you intend to provide ongoing training for crew and other employees in all aspects of running an operation?.....

.....
What kind of employment benefits do you currently or intend to provide (e.g. medical aid, pension)?
.....
.....

SECTION 6: SKIPPER AND TOURIST GUIDE PROFILE

Name of Skipper:.....

Does she/he have SAMSA certification? (If yes, attach certificate)

.....

Name of tour guide:.....

(Attach SATOUR "DTI and Level 2 General Guide certified certificates)

Has the tour guide received any training as a white shark cage diving tour guide?.....

Name of dive master (Attach certificate)?.....

SECTION 7: OPERATIONAL PLAN

Provide a detailed marketing strategy (both local and international) :.....
.....
.....
.....
.....

The intended area of operation:.....

A description of the anticipated trip activity, safety precautions (this should include a full emergency medical plan in the event of injury) and tourist education:
.....
.....
.....
.....

The expected frequency of trips and numbers of passengers...
.....
.....
.....

Anticipated duration of trips.....

An indication of the educational information provided to passengers?.....
.....

SECTION 8. PUBLIC LIABILITY INSURANCE

Comment [n1]: Delete this – it is not a criteria in the WSCD policy

Current permit/ exemption holder must provide proof of public liability insurance.

New entrant applicants will have to provide an undertaking confirming that they will purchase public liability insurance up to an amount to be determined.

SECTION 9. LOCAL ECONOMIC DEVELOPMENT

If you are a current permit/exemption holder applicant, have you made investment in infrastructure in the area from which you operated:.....

.....

If you are a new entrant what kinds of investment do you intend making in the area of operation?.....

.....

SECTION 10. RELIANCE ON WSCD

Do you rely on WSCD as the main source of income?.....

.....

How long are you intending to operate?.....

.....

Do you have any other source of income and if so please indicate gross annual income derived

From?.....

SECTION 11: UNDERTAKING TO COMMENCE OPERATION

Comment [n2]: Add this section in to your BBWW application form as well

Date when you intend to commence operating?.....

SECTION 12: APPLICATION DECLARATIONS

I, the undersigned, do hereby make an oath / affirmation, and declare that:

- a) I have read the instructions set out on this application form.

- b) The information submitted in this application form is true, correct and complete, and that the copies of the documents submitted are true and certified copies of the original documents.
- c) I understand that if any information furnished in this application is not true or complete, including providing false documentation, the falsification of any document, the making of any misleading or false statements, or the non-disclosure of material information or information which may affect the evaluation of this application, may disqualify my application.
- d) In order to allow for proper verification of information submitted I hereby authorize any organ of state, person or body, who possesses or acquires any information relevant to my application, to disclose or make the information available to the Minister, his/her delegate or an official of the Department of Environmental Affairs and Tourism.
- e) I accept full responsibility for the payment of application and permit fees and agree to comply with any present or future conditions which may apply to the permit.
- f) I accept that any attempt to influence the decision of the delegated authority, in any manner other than that provided by the Policy or in this application form will result in the application being refused.

Signed at:.....

Signature of applicant

Date:.....

Full Name of Applicant:.....

OR

Signature of authorised representative

Date:.....

Full Name of the Authorised Representative:.....

The deponent declares that he/ she knows and understands the contents and implications of the above declaration.

Commissioner of Oaths:.....

Full Name:.....

Designation:.....

Address:.....

For Office use

Application fee R

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

Permit fee * R

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

Receipt Amount R

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

Receipt number R

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

*PERMIT FEES PAYABLE TO CONDUCT WHITE SHARK CAGE DIVING ARE ONLY PAID

ONCE THE APPLICANT RECEIVES NOTIFICATION THAT THE APPLICATION IS SUCCESSFUL.

Sample