

## APPENDIX A: REQUEST FOR A SPECIFIC FEE REFERENCE NUMBER

Please attach proof of payment of the applicable administrative fee to the Application Form.

### A: Applicant's details:

Name: Proprop Trust ID Number: IT 1845/1996  
Residential Address: Suite 4, Constantia House, Steenberg Office Park, Constantia, 7800  
Postal Address / Code: PostNet #40, Private Bag X26, Tokai, 7966  
Cellular no.: 0828068927 Telephone no.: 0217021374  
Email address: Heiderehl7@gmail.com

### B: EAP's details:

Name: Clinton Geyser EAPASA Registration No: 2021/3287  
Company Name: EnviroAfrica  
Postal Address / Code: P.O. Box 5367, Helderberg, 7135  
Cellular no.:  Telephone no.: 021 851 1616  
Email address: clinton@enviroafrica.co.za

### C: Provide a concise description of the proposed project/Changes to the Environmental Authorisation

Part 1 Amendment: E12/2/1-68-Erf 327 & Farm 696, Malmesbury - 16/3/3/5/F5/16/2036/20

The proposed changes are to the layout and composition of the erven on Phase 2B (Erf 9469, Malmesbury) and 2C (Erf 9470, Malmesbury) of the Mount Royal Golf and Country Estate.

The approved plans described 58 single residential erven, 2 private open spaces and a road reserve (Phase 2B) and 72 single residential erven, 2 private open spaces and a road reserve (Phase 2C)

However, the municipality constructed a bulk water supply pipeline through Phase 2B and 2C of the development, and this necessitated a change to the layout.

The new layout consists of 21 freehold single residential and 63 freehold group housing stands (Phase 2B) and 55 freehold single residential and 26 freehold group housing stands (Phase 2C) (See attached plans).

The number of erven has changed, but the development is still on the same footprint. The Open Space areas remain the same.

### D. Indicate (shade) the process to which the application must be subjected:

**Amendment**

Reasons for a Part 1;  
Part 2 or Part 4  
amendment process  
must be provided in  
the Form.

### E: Application Fee:

Indicate the fee amount to be paid: **R2 000**

### F: Indicate within which Departmental region the application will be administered:

X

**CAPE TOWN OFFICE: REGION 1**  
(City of Cape Town, West Coast District,  
Cape Winelands District & Overberg District)  
[DEADPEIAadmin@westerncape.gov.za](mailto:DEADPEIAadmin@westerncape.gov.za)

**GEORGE REGIONAL OFFICE: REGION 3**  
(Central Karoo District & Eden District)  
[DEADPEIAadmin.George@westerncape.gov.za](mailto:DEADPEIAadmin.George@westerncape.gov.za)

### G: Request from Applicant:

I, Heide Rehl

(Applicant's full name), herewith request the Department to provide me with a Specific Fee Reference Number in order that I may make payment of the application fee. I am fully aware of my responsibility to ensure that the correct fee is paid and that proof of such payment must be attached to my Application Form. I further confirm that the information I have provided herein is true and correct.

*Heide Rehl*

(FOR OFFICIAL USE ONLY)			
Captured by: <u>E.Isaacs</u>	Date received: <u>11/04/2025</u>	Date captured: <u>11/04/2025</u>	
Mark process (X):    Basic Assessment <input type="checkbox"/>	Scoping & EIR <input type="checkbox"/>	Part 1 amendment <input checked="" type="checkbox"/>	Part 2 amendment <input type="checkbox"/>
Amount to be paid: <u>R2000</u>	Specific Fee Reference No: <u>W-AMEND-EIA-L13</u>		
Process and amount confirmed by Control EO: Name & Digital Signature:		<div style="display: flex; align-items: center;"> <div style="margin-right: 20px;">T Dreyer</div> <div> <div style="text-align: center;">Taryn Dreyer</div> <div style="font-size: 0.8em; color: gray;"> <small>Digitally signed by Taryn Dreyer Date: 2025.04.11 12:36:18 +02'00'</small> </div> </div> </div>	

**THE COMPLETED FORM MUST BE APPENDED TO THE NOI OR E-MAILED TO THE RELEVANT DEPARTMENTAL REGION REFLECTED ABOVE.  
THE APPLICATION FEE MUST BE PAID INTO THE DEPARTMENTAL BANKING ACCOUNT USING THE SPECIFIC FEE REFERENCE NUMBER.**