**APPEAL QUESTIONNAIRE**

**Appellant’s contact information:**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cell: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Project information:**

Project name: **Establishment of the Sea Based Aquaculture Development Zone (ADZ) in Algoa Bay**

Authorisation register number as on environmental authorisation: **14/12/16/3/3/1/2055**

Authorisation date as on environmental authorisation: **26 February 2020**

***IMPORTANT! Please note****:*

* *The decision of the department is reflected in the letter of authorisation or rejection. The conditions of approval are contained in the environmental authorisation document, attached to the authorisation letter.*
* *The appeal must be accompanied by all relevant supporting documents or copies of these that are certified as true by a commissioner of oaths.*
* *The grounds of your appeal and the facts upon which they rest must be set out. You should formulate your objections or concerns as averments and not as questions about the project. Please therefore refrain from material or remarks that do not contribute to the merits of your appeal.*
* *To assist in this regard, the following questions are listed as a guideline only – more space may be used if necessary:*
1. Are you lodging this appeal as an individual or on behalf of a community/organisation?

|  |  |
| --- | --- |
| Individual | Community/ Organisation |

If on behalf of a community or organisation, please provide proof of mandate to do so.

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1. Is your appeal based on factors associated with the process that was followed by the applicant in obtaining authorisation?

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| --- | --- |
| Yes | No |

Please provide reasons:

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1. Is your appeal based on factors associated with environmental impacts not taken into account by the department in refusing or authorising the application?

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| --- | --- |
| Yes | No |

Please provide reasons:

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1. Would you agree to the activity proceeding if your concerns can be addressed by rectifying the process or mitigating or eliminating the impacts of the activity?

|  |  |
| --- | --- |
| Yes | No |

Please provide reasons:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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1. Are you fundamentally opposed to any development activity on the site?

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| --- | --- |
| Yes | No |

Please provide reasons:

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1. Do you have an objection in principle against the development?

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| --- | --- |
| Yes | No |

Please provide reasons:

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1. Does your appeal contain any new information that was not submitted to the environmental consultant or department prior to the department’s consideration of the application?

|  |  |
| --- | --- |
| Yes | No |

If the answer above is yes, please explain why it should be considered by the Minister and why it was not made available to the environmental consultant or department during the application process.

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1. **DECLARATION:**

I declare that the contents of this submission are to the best of my knowledge the truth and I regard this declaration as binding on my conscience.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**APPELLANT DATE:**

****

**Private Bag X447, Pretoria, 0001, Environment House, 473 Steve Biko Road, Pretoria, 0002**

**Email:** **Appeals@environment.gov.za**

**APPEAL RESPONSE REPORT**

**PROJECT NAME/TITLE**: *Establishment of the Sea Based Aquaculture Development Zone (ADZ) in Algoa Bay*

**PROJECT LOCATION:** *Algoa Bay*

**PROJECT REFERENCE NUMBER:** *14/12/16/3/3/1/2055*

**DATE PROJECT/ACTIVITY AUTHORISED:** *26 February 2020*

**DATE NOTIFIED OF DECISION:** *28 February 2020*

|  |  |
| --- | --- |
| **DETAILS OF THE APPELLANT**  | **DETAILS OF THE APPLICANT** |
| **Name of appellant:** | **Name of applicant:** *DEFF: Aquaculture and Economic. Development* |
| **Appellant’s representative (if applicable):** | **Applicant’s representative (if applicable):** *Ms Zimasa Jika* |
| **Postal address:** | **Postal Address:** *Private Bag X2, Vlaeberg, 8018* |
| **Email Address:** | **Email Address:** **zjika@environment.gov.za** |
| **Telephone number:** | **Telephone number:** *021 402 3116* |
| **Fax Number:** | **Fax number:** |

|  |  |  |
| --- | --- | --- |
| **GROUNDS OF APPEAL**  | **RESPONDING STATEMENT BY THE APPLICANT** | **COMMENTS BY THE DEPARTMENT** |
| 1.
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| 1.
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|  **3.**  |  |  |
| **4.** |  |  |
| **5.** |  |  |

**ARR comments by Case Officer Approved by Supervior**

Name & Surname: Name & Surname:

Date: Date:

Signature: Signature:

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