JOINT RIVER BASIN AUTHORITIES PROJECT BOARD

P.O. Box 381, Siphofaneni
Eswatini

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EFFLUENT CONTROL PERMIT

This form is to be submitted according to section 64 of the Water Act, 2003
(Incomplete forms will not be considered by the Board)

Granting of this permit is subject to submission of an Environmental Compliance Certificate.

PART I

1. **Full name of applicant(s) (in block letters): ----------**

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2. **Contact Person: ----------**
3. **Position of Contact Person: ----------**
4. **Physical Address: ----------**
5. **Postal Address: ----------**

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6. **Contact No (if available): Tel ---------- Mobile/Cell phone ----------**

   Email address: ----------

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1. SOURCE OF WATER SUPPLY

(a) Name and description of water source e.g stream, spring or river: ----------

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(b) Name of Area: ----------

(c) Administrative Region: Hhohho / Manzini / Lubombo / Shiselweni: ----------

(d) River Basin or River Control Area (*choose one of the following i.e. Lomati, Komati, Mbuluzi, Usuthu and Ngwavuma*): ----------

(e) Recognised community features (e.g. neighbouring school or clinic or shopping complex):

(f) Geographical Position (Indicate position on attached map): ----------

(g) Quantity of Water allocated to the activity / project: ----------

(h) Type of measuring device at water abstraction (uptake): ----------

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2. LAND OWNERSHIP

TO BE COMPLETED ONLY BY APPLICANTS ON SWAZI NATION LAND

(a) Name of Chief: ----------

(b) Name of Indvuna: ----------

(c) Hectares of holdings: ----------

(d) Name of Dip Tank (and number if applicable): ----------

TO BE COMPLETED ONLY BY APPLICANTS ON TITLE DEED LAND

(a) Number(s) of holdings as described in the Title Deeds where water is used:

(b) Name(s) {if applicable } of holdings as described in the Title Deeds where water used:

(c) Is land freehold or leasehold? If leasehold state, the date of expiry of lease:

(d) Hectares of holdings: ----------

PART II

1) **Type of Effluent (e.g. Agricultural, Municipal, Industrial, Mining Leachate, etc:)**

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2) **Description of activity resulting in effluent generation: ----------**

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3) **List the major pollutants that are characteristic of effluent from your type of activity: --------**

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4) **Indicate by crossing (X) on the appropriate box:**

- **New permit** ☐
- **Renewal of Existing permit (Attach copy)** ☐
- **Amendment of existing permit (Attach copy)** ☐

In the case of renewal or amendment of effluent control permit, please provide evidence of submission of reports to the Water Apportionment Board.

5) **Any effluent exemption permit? YES/NO: ----------**
Give details or attach certified copy.

6) **Quantity of water abstracted: ----------**

7) **Rate of effluent to be discharge:---------- --(m^3/day)**

8) **Effluent treatment method to be used** ***(Additional sheet(s) may be attached if necessary)*****:**

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9) **Method of effluent disposal (e.g pipe, canal, tanker):----------**

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10) **Describe environmental protection measures to be taken in an event of accidental spillages**
(Additional sheet(s)may be attached if necessary)**: ----------**

PART III

DECLARATION BY APPLICANT

All information given in response to or in support of this application is true and correct to the best of my/our knowledge and belief.

By submitting this application, I/we agree to unrestricted access by duly authorised officers of the Water Resources Branch or Department of Water Affairs to inspect the waste or effluent processing system and all records pertaining to the management of the waste or effluent.

Capacity or designation of Informant:----------

Name of Applicant:----------

Signature of Informant
(or Duly Authorized Agent):----------

Date:----------

OFFICIAL USE:

COMMENTS/RECOMMENDATIONS

GPS Coordinates:----------

Water Chemist:

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Water Control Officer:

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Water Engineer:

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River Basin Authority Chairperson:

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