

Government Gazette
Staatskoerant

REPUBLIC OF SOUTH AFRICA
REPUBLIEK VAN SUID AFRIKA

Vol. 724 17 October Oktober 2025 No. 53515

PART 1 OF 2

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NO FUTURE QUERIES WILL BE HANDLED IN CONNECTION WITH THE ABOVE.

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government printing
Department:
Government Printing Works
REPUBLIC OF SOUTH AFRICA

HIGH ALERT: SCAM WARNING!!!

TO ALL SUPPLIERS AND SERVICE PROVIDERS OF THE GOVERNMENT PRINTING WORKS

It has come to the attention of the *GOVERNMENT PRINTING WORKS* that there are certain unscrupulous companies and individuals who are defrauding unsuspecting businesses disguised as representatives of the *Government Printing Works* (*GPW*).

The scam involves the fraudsters using the letterhead of *GPW* to send out fake tender bids to companies and requests to supply equipment and goods.

Although the contact person's name on the letter may be of an existing official, the contact details on the letter are not the same as the *Government Printing Works*'. When searching on the Internet for the address of the company that has sent the fake tender document, the address does not exist.

The banking details are in a private name and not company name. Government will never ask you to deposit any funds for any business transaction. *GPW* has alerted the relevant law enforcement authorities to investigate this scam to protect legitimate businesses as well as the name of the organisation.

Example of e-mails these fraudsters are using:

PROCUREMENT@GPW-GOV.ORG

Should you suspect that you are a victim of a scam, you must urgently contact the police and inform the *GPW*.

GPW has an official email with the domain as **@gpw.gov.za**

Government e-mails DO NOT have org in their e-mail addresses. All of these fraudsters also use the same or very similar telephone numbers. Although such number with an area code 012 looks like a landline, it is not fixed to any property.

GPW will never send you an e-mail asking you to supply equipment and goods without a purchase/order number. *GPW* does not procure goods for another level of Government. The organisation will not be liable for actions that result in companies or individuals being resultant victims of such a scam.

Government Printing Works gives businesses the opportunity to supply goods and services through RFQ / Tendering process. In order to be eligible to bid to provide goods and services, suppliers must be registered on the National Treasury's Central Supplier Database (CSD). To be registered, they must meet all current legislative requirements (e.g. have a valid tax clearance certificate and be in good standing with the South African Revenue Services - SARS).

The tender process is managed through the Supply Chain Management (SCM) system of the department. SCM is highly regulated to minimise the risk of fraud, and to meet objectives which include value for money, open and effective competition, equitability, accountability, fair dealing, transparency and an ethical approach. Relevant legislation, regulations, policies, guidelines and instructions can be found on the tender's website.

Fake Tenders

National Treasury's CSD has launched the Government Order Scam campaign to combat fraudulent requests for quotes (RFQs). Such fraudulent requests have resulted in innocent companies losing money. We work hard at preventing and fighting fraud, but criminal activity is always a risk.

How tender scams work

There are many types of tender scams. Here are some of the more frequent scenarios:

Fraudsters use what appears to be government department stationery with fictitious logos and contact details to send a fake RFQ to a company to invite it to urgently supply goods. Shortly after the company has submitted its quote, it receives notification that it has won the tender. The company delivers the goods to someone who poses as an official or at a fake site. The Department has no idea of this transaction made in its name. The company is then never paid and suffers a loss.

OR

Fraudsters use what appears to be government department stationery with fictitious logos and contact details to send a fake RFQ to Company A to invite it to urgently supply goods. Typically, the tender specification is so unique that only Company B (a fictitious company created by the fraudster) can supply the goods in question.

Shortly after Company A has submitted its quote it receives notification that it has won the tender. Company A orders the goods and pays a deposit to the fictitious Company B. Once Company B receives the money, it disappears. Company A's money is stolen in the process.

Protect yourself from being scammed

- If you are registered on the supplier databases and you receive a request to tender or quote that seems to be from a government department, contact the department to confirm that the request is legitimate. Do not use the contact details on the tender document as these might be fraudulent.
- Compare tender details with those that appear in the Tender Bulletin, available online at **www.gpwonline.co.za**
- Make sure you familiarise yourself with how government procures goods and services. Visit the tender website for more information on how to tender.
- If you are uncomfortable about the request received, consider visiting the government department and/or the place of delivery and/or the service provider from whom you will be sourcing the goods.
- In the unlikely event that you are asked for a deposit to make a bid, contact the SCM unit of the department in question to ask whether this is in fact correct.

Any incidents of corruption, fraud, theft and misuse of government property in the *Government Printing Works* can be reported to:

Supply Chain Management: Ms. Anna Marie Du Toit, Tel. (012) 748 6292.
Email: **Annamarie.DuToit@gpw.gov.za**

Marketing and Stakeholder Relations: Ms Bonakele Mbhele, at Tel. (012) 748 6193.
Email: **Bonakele.Mbhele@gpw.gov.za**

Security Services: Mr Daniel Legoabe, at tel. (012) 748 6176.
Email: **Daniel.Legoabe@gpw.gov.za**

Closing times for **ORDINARY WEEKLY** *GOVERNMENT GAZETTE* 2025

*The closing time is **15:00** sharp on the following days:*

- **24 December,** Wednesday for the issue of Friday **03 January 2025**
- **03 January,** Friday for the issue of Friday **10 January 2025**
- **10 January,** Friday for the issue of Friday **17 January 2025**
- **17 January,** Friday for the issue of Friday **24 January 2025**
- **24 January,** Friday for the issue of Friday **31 January 2025**
- **31 January,** Friday for the issue of Friday **07 February 2025**
- **07 February,** Friday for the issue of Friday **14 February 2025**
- **14 February,** Friday for the issue of Friday **21 February 2025**
- **21 February,** Friday for the issue of Friday **28 February 2025**
- **28 February,** Friday for the issue of Friday **07 March 2025**
- **07 March,** Friday for the issue of Friday **14 March 2025**
- **13 March,** Thursday for the issue of Thursday **20 March 2025**
- **20 March,** Thursday for the issue of Friday **28 March 2025**
- **28 March,** Friday for the issue of Friday **04 April 2025**
- **04 April,** Friday for the issue of Friday **11 April 2025**
- **10 April,** Thursday for the issue of Thursday **17 April 2025**
- **16 April,** Wednesday for the issue of Friday **25 April 2025**
- **23 April,** Wednesday for the issue of Friday **02 May 2025**
- **02 May,** Friday for the issue of Friday **09 May 2025**
- **09 May,** Friday for the issue of Friday **16 May 2025**
- **16 May,** Friday for the issue of Friday **23 May 2025**
- **23 May,** Friday for the issue of Friday **30 May 2025**
- **30 May,** Friday for the issue of Friday **06 June 2025**
- **06 June,** Friday for the issue of Friday **13 June 2025**
- **12 June,** Thursday for the issue of Friday **20 June 2025**
- **20 June,** Friday for the issue of Friday **27 June 2025**
- **27 June,** Friday for the issue of Friday **04 July 2025**
- **04 July,** Friday for the issue of Friday **11 July 2025**
- **11 July,** Friday for the issue of Friday **18 July 2025**
- **18 July,** Friday for the issue of Friday **25 July 2025**
- **25 July,** Friday for the issue of Friday **01 August 2025**
- **01 August,** Friday for the issue of Friday **08 August 2025**
- **08 August,** Friday for the issue of Friday **15 August 2025**
- **15 August,** Friday for the issue of Friday **22 August 2025**
- **22 August,** Friday for the issue of Friday **29 August 2025**
- **29 August,** Friday for the issue of Friday **05 September 2025**
- **05 September,** Friday for the issue of Friday **12 September 2025**
- **12 September,** Friday for the issue of Friday **19 September 2025**
- **18 September,** Thursday for the issue of Friday **26 September 2025**
- **26 September,** Friday for the issue of Friday **03 October 2025**
- **03 October,** Friday for the issue of Friday **10 October 2025**
- **10 October,** Friday for the issue of Friday **17 October 2025**
- **17 October,** Friday for the issue of Friday **24 October 2025**
- **24 October,** Friday for the issue of Friday **31 October 2025**
- **31 October,** Friday for the issue of Friday **07 November 2025**
- **07 November,** Friday for the issue of Friday **14 November 2025**
- **14 November,** Friday for the issue of Friday **21 November 2025**
- **21 November,** Friday for the issue of Friday **28 November 2025**
- **28 November,** Friday for the issue of Friday **5 December 2025**
- **05 December,** Friday for the issue of Friday **12 December 2025**
- **11 December,** Thursday for the issue of Friday **19 December 2025**
- **17 December,** Wednesday for the issue of Wednesday **24 December 2025**

LIST OF TARIFF RATES

FOR PUBLICATION OF NOTICES

COMMENCEMENT: 1 APRIL 2018

NATIONAL AND PROVINCIAL

Notice sizes for National, Provincial & Tender gazettes 1/4, 2/4, 3/4, 4/4 per page. Notices submitted will be charged at R1008.80 per full page, pro-rated based on the above categories.

Pricing for National, Provincial - Variable Priced Notices		
Notice Type	**Page Space**	**New Price (R)**
Ordinary National, Provincial	1/4 - Quarter Page	252.20
Ordinary National, Provincial	2/4 - Half Page	504.40
Ordinary National, Provincial	3/4 - Three Quarter Page	756.60
Ordinary National, Provincial	4/4 - Full Page	1008.80

EXTRA-ORDINARY

All Extra-ordinary National and Provincial gazette notices are non-standard notices and attract a variable price based on the number of pages submitted.

The pricing structure for National and Provincial notices which are submitted as **Extra ordinary submissions** will be charged at R**3026.32** per page.

GOVERNMENT PRINTING WORKS - BUSINESS RULES

The **Government Printing Works** (**GPW**) has established rules for submitting notices in line with its electronic notice processing system, which requires the use of electronic *Adobe* Forms. Please ensure that you adhere to these guidelines when completing and submitting your notice submission.

Closing Times for Acceptance of Notices

1. The *Government Gazette* and *Government Tender Bulletin* are weekly publications that are published on Fridays and the closing time for the acceptance of notices is strictly applied according to the scheduled time for each gazette.

2. Please refer to the Submission Notice Deadline schedule in the table below. This schedule is also published online on the Government Printing works website www.gpwonline.co.za

   All re-submissions will be subject to the standard cut-off times.
   All notices received after the closing time will be rejected.

Government Gazette Type	Publication Frequency	Publication Date	Submission Deadline	Cancellations Deadline
National Gazette	Weekly	Friday	Friday 15h00 for next Friday	Tuesday, 15h00 - 3 working days prior to publication
Regulation Gazette	Weekly	Friday	Friday 15h00 for next Friday	Tuesday, 15h00 - 3 working days prior to publication
Petrol Price Gazette	Monthly	Tuesday before 1st Wednesday of the month	One day before publication	1 working day prior to publication
Road Carrier Permits	Weekly	Friday	Thursday 15h00 for next Friday	3 working days prior to publication
Unclaimed Monies (Justice, Labour or Lawyers)	January / September 2 per year	Last Friday	One week before publication	3 working days prior to publication
Parliament (Acts, White Paper, Green Paper)	As required	Any day of the week	None	3 working days prior to publication
Manuals	Bi- Monthly	2nd and last Thursday of the month	One week before publication	3 working days prior to publication
State of Budget (National Treasury)	Monthly	30th or last Friday of the month	One week before publication	3 working days prior to publication
Extraordinary Gazettes	As required	Any day of the week	*Before 10h00 on publication date*	*Before 10h00 on publication date*
Legal Gazettes A, B and C	Weekly	Friday	One week before publication	Tuesday, 15h00 - 3 working days prior to publication
Tender Bulletin	Weekly	Friday	Friday 15h00 for next Friday	Tuesday, 15h00 - 3 working days prior to publication
Gauteng	Weekly	Wednesday	Two weeks before publication	3 days **after** submission deadline
Eastern Cape	Weekly	Monday	One week before publication	3 working days prior to publication
Northern Cape	Weekly	Monday	One week before publication	3 working days prior to publication
North West	Weekly	Tuesday	One week before publication	3 working days prior to publication
KwaZulu-Natal	Weekly	Thursday	One week before publication	3 working days prior to publication
Limpopo	Weekly	Friday	One week before publication	3 working days prior to publication
Mpumalanga	Weekly	Friday	One week before publication	3 working days prior to publication

GOVERNMENT PRINTING WORKS - BUSINESS RULES

Government Gazette Type	Publication Frequency	Publication Date	Submission Deadline	Cancellations Deadline
Gauteng Liquor License Gazette	Monthly	Wednesday before the First Friday of the month	Two weeks before publication	3 working days **after** submission deadline
Northern Cape Liquor License Gazette	Monthly	First Friday of the month	Two weeks before publication	3 working days **after** submission deadline
National Liquor License Gazette	Monthly	First Friday of the month	Two weeks before publication	3 working days **after** submission deadline
Mpumalanga Liquor License Gazette	Bi-Monthly	Second & Fourth Friday	One week before publication	3 working days prior to publication

EXTRAORDINARY GAZETTES

3. *Extraordinary Gazettes* can have only one publication date. If multiple publications of an *Extraordinary Gazette* are required, a separate Z95/Z95Prov *Adobe* Forms for each publication date must be submitted.

NOTICE SUBMISSION PROCESS

4. Download the latest *Adobe* form, for the relevant notice to be placed, from the **Government Printing Works** website www.gpwonline.co.za.

5. The *Adobe* form needs to be completed electronically using *Adobe Acrobat* / *Acrobat Reader*. Only electronically completed *Adobe* forms will be accepted. No printed, handwritten and/or scanned *Adobe* forms will be accepted.

6. The completed electronic *Adobe* form has to be submitted via email to submit.egazette@gpw.gov.za. The form needs to be submitted in its original electronic *Adobe* format to enable the system to extract the completed information from the form for placement in the publication.

7. Every notice submitted **must** be accompanied by an official **GPW** quotation. This must be obtained from the *eGazette* Contact Centre.

8. Each notice submission should be sent as a single email. The email **must** contain **all documentation relating to a particular notice submission**.

   8.1. Each of the following documents must be attached to the email as a separate attachment:

      8.1.1. An electronically completed *Adobe* form, specific to the type of notice that is to be placed.

         8.1.1.1. For National *Government Gazette* or *Provincial Gazette* notices, the notices must be accompanied by an electronic Z95 or Z95Prov *Adobe* form

         8.1.1.2. The notice content (body copy) **MUST** be a separate attachment.

      8.1.2. A copy of the official **Government Printing Works** quotation you received for your notice. *(Please see Quotation section below for further details)*

      8.1.3. A valid and legible Proof of Payment / Purchase Order: **Government Printing Works** account customer must include a copy of their Purchase Order**. Non-Government Printing Works** account customer needs to submit the proof of payment for the notice

      8.1.4. Where separate notice content is applicable (Z95, Z95 Prov and TForm 3, it should **also** be attached as a separate attachment. *(Please see the Copy Section below, for the specifications)*.

      8.1.5. Any additional notice information if applicable.

GOVERNMENT PRINTING WORKS - BUSINESS RULES

9. The electronic *Adobe* form will be taken as the primary source for the notice information to be published. Instructions that are on the email body or covering letter that contradicts the notice form content will not be considered. The information submitted on the electronic *Adobe* form will be published as-is.

10. To avoid duplicated publication of the same notice and double billing, Please submit your notice **ONLY ONCE.**

11. Notices brought to **GPW** by "walk-in" customers on electronic media can only be submitted in *Adobe* electronic form format. All "walk-in" customers with notices that are not on electronic *Adobe* forms will be routed to the Contact Centre where they will be assisted to complete the forms in the required format.

12. Should a customer submit a bulk submission of hard copy notices delivered by a messenger on behalf of any organisation e.g. newspaper publisher, the messenger will be referred back to the sender as the submission does not adhere to the submission rules.

QUOTATIONS

13. Quotations are valid until the next tariff change.

    13.1. ***Take note:*** **GPW**'s annual tariff increase takes place on ***1 April*** therefore any quotations issued, accepted and submitted for publication up to ***31 March*** will keep the old tariff. For notices to be published from 1 April, a quotation must be obtained from **GPW** with the new tariffs. Where a tariff increase is implemented during the year, **GPW** endeavours to provide customers with 30 days' notice of such changes.

14. Each quotation has a unique number.

15. Form Content notices must be emailed to the *eGazette* Contact Centre for a quotation.

    15.1. The *Adobe* form supplied is uploaded by the Contact Centre Agent and the system automatically calculates the cost of your notice based on the layout/format of the content supplied.

    15.2. It is critical that these *Adobe* Forms are completed correctly and adhere to the guidelines as stipulated by **GPW**.

16. **APPLICABLE ONLY TO GPW ACCOUNT HOLDERS**:

    16.1. **GPW** Account Customers must provide a valid **GPW** account number to obtain a quotation.

    16.2. Accounts for **GPW** account customers **must** be active with sufficient credit to transact with **GPW** to submit notices.

        16.2.1. If you are unsure about or need to resolve the status of your account, please contact the **GPW** Finance Department prior to submitting your notices. (If the account status is not resolved prior to submission of your notice, the notice will be failed during the process).

17. **APPLICABLE ONLY TO CASH CUSTOMERS:**

    17.1. Cash customers doing **bulk payments** must use a **single email address** in order to use the **same proof of payment** for submitting multiple notices.

18. The responsibility lies with you, the customer, to ensure that the payment made for your notice(s) to be published is sufficient to cover the cost of the notice(s).

19. Each quotation will be associated with one proof of payment / purchase order / cash receipt.

    19.1. This means that **the quotation number can only be used once to make a payment.**

GOVERNMENT PRINTING WORKS - BUSINESS RULES

COPY (SEPARATE NOTICE CONTENT DOCUMENT)

20. Where the copy is part of a separate attachment document for Z95, Z95Prov and TForm03

20.1. Copy of notices must be supplied in a separate document and may not constitute part of any covering letter, purchase order, proof of payment or other attached documents.

The content document should contain only one notice. (You may include the different translations of the same notice in the same document).

20.2. The notice should be set on an A4 page, with margins and fonts set as follows:

Page size = A4 Portrait with page margins: Top = 40mm, LH/RH = 16mm, Bottom = 40mm; Use font size: Arial or Helvetica 10pt with 11pt line spacing;

Page size = A4 Landscape with page margins: Top = 16mm, LH/RH = 40mm, Bottom = 16mm; Use font size: Arial or Helvetica 10pt with 11pt line spacing;

CANCELLATIONS

21. Cancellation of notice submissions are accepted by **GPW** according to the deadlines stated in the table above in point 2. Non-compliance to these deadlines will result in your request being failed. Please pay special attention to the different deadlines for each gazette. Please note that any notices cancelled after the cancellation deadline will be published and charged at full cost.

22. Requests for cancellation must be sent by the original sender of the notice and must accompanied by the relevant notice reference number (N-) in the email body.

AMENDMENTS TO NOTICES

23. With effect from 01 October 2015, **GPW** will not longer accept amendments to notices. The cancellation process will need to be followed according to the deadline and a new notice submitted thereafter for the next available publication date.

REJECTIONS

24. All notices not meeting the submission rules will be rejected to the customer to be corrected and resubmitted. Assistance will be available through the Contact Centre should help be required when completing the forms. (012-748 6200 or email info.egazette@gpw.gov.za). Reasons for rejections include the following:

24.1. Incorrectly completed forms and notices submitted in the wrong format, will be rejected.

24.2. Any notice submissions not on the correct *Adobe* electronic form, will be rejected.

24.3. Any notice submissions not accompanied by the proof of payment / purchase order will be rejected and the notice will not be processed.

24.4. Any submissions or re-submissions that miss the submission cut-off times will be rejected to the customer. The Notice needs to be re-submitted with a new publication date.

GOVERNMENT PRINTING WORKS - BUSINESS RULES

APPROVAL OF NOTICES

25. Any notices other than legal notices are subject to the approval of the Government Printer, who may refuse acceptance or further publication of any notice.

26. No amendments will be accepted in respect to separate notice content that was sent with a Z95 or Z95Prov notice submissions. The copy of notice in layout format (previously known as proof-out) is only provided where requested, for Advertiser to see the notice in final Gazette layout. Should they find that the information submitted was incorrect, they should request for a notice cancellation and resubmit the corrected notice, subject to standard submission deadlines. The cancellation is also subject to the stages in the publishing process, i.e. If cancellation is received when production (printing process) has commenced, then the notice cannot be cancelled.

GOVERNMENT PRINTER INDEMNIFIED AGAINST LIABILITY

27. The Government Printer will assume no liability in respect of—

27.1. any delay in the publication of a notice or publication of such notice on any date other than that stipulated by the advertiser;

27.2. erroneous classification of a notice, or the placement of such notice in any section or under any heading other than the section or heading stipulated by the advertiser;

27.3. any editing, revision, omission, typographical errors or errors resulting from faint or indistinct copy.

LIABILITY OF ADVERTISER

28. Advertisers will be held liable for any compensation and costs arising from any action which may be instituted against the Government Printer in consequence of the publication of any notice.

CUSTOMER INQUIRIES

Many of our customers request immediate feedback/confirmation of notice placement in the gazette from our Contact Centre once they have submitted their notice – While **GPW** deems it one of their highest priorities and responsibilities to provide customers with this requested feedback and the best service at all times, we are only able to do so once we have started processing your notice submission.
GPW has a 2-working day turnaround time for processing notices received according to the business rules and deadline submissions.
Please keep this in mind when making inquiries about your notice submission at the Contact Centre.

29. Requests for information, quotations and inquiries must be sent to the Contact Centre ONLY.

30. Requests for Quotations (RFQs) should be received by the Contact Centre at least **2 working days** before the submission deadline for that specific publication.

GOVERNMENT PRINTING WORKS - BUSINESS RULES

PAYMENT OF COST

31. The Request for Quotation for placement of the notice should be sent to the Gazette Contact Centre as indicated above, prior to submission of notice for advertising.

32. Payment should then be made, or Purchase Order prepared based on the received quotation, prior to the submission of the notice for advertising as these documents i.e. proof of payment or Purchase order will be required as part of the notice submission, as indicated earlier.

33. Every proof of payment must have a valid **GPW** quotation number as a reference on the proof of payment document.

34. Where there is any doubt about the cost of publication of a notice, and in the case of copy, an enquiry, accompanied by the relevant copy, should be addressed to the Gazette Contact Centre, **Government Printing Works**, Private Bag X85, Pretoria, 0001 email: info.egazette@gpw.gov.za before publication.

35. Overpayment resulting from miscalculation on the part of the advertiser of the cost of publication of a notice will not be refunded, unless the advertiser furnishes adequate reasons why such miscalculation occurred. In the event of underpayments, the difference will be recovered from the advertiser, and future notice(s) will not be published until such time as the full cost of such publication has been duly paid in cash or electronic funds transfer into the **Government Printing Works** banking account.

36. In the event of a notice being cancelled, a refund will be made only if no cost regarding the placing of the notice has been incurred by the **Government Printing Works**.

37. The **Government Printing Works** reserves the right to levy an additional charge in cases where notices, the cost of which has been calculated in accordance with the List of Fixed Tariff Rates, are subsequently found to be excessively lengthy or to contain overmuch or complicated tabulation.

PROOF OF PUBLICATION

38. Copies of any of the *Government Gazette* or *Provincial Gazette* can be downloaded from the **Government Printing Works** website www.gpwonline.co.za free of charge, should a proof of publication be required.

39. Printed copies may be ordered from the Publications department at the ruling price. The **Government Printing Works** will assume no liability for any failure to post or for any delay in despatching of such *Government Gazette*(s)

GOVERNMENT PRINTING WORKS CONTACT INFORMATION

Physical Address:	**Postal Address:**	**GPW Banking Details:**
Government Printing Works	Private Bag X85	**Bank:** ABSA Bosman Street
149 Bosman Street	Pretoria	**Account No.:** 405 7114 016
Pretoria	0001	**Branch Code:** 632-005

For Gazette and Notice submissions: Gazette Submissions:	**E-mail:** submit.egazette@gpw.gov.za
For queries and quotations, contact: Gazette Contact Centre:	**E-mail:** info.egazette@gpw.gov.za
	Tel: 012-748 6200
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	Fax: 012-323-9574

GOVERNMENT NOTICES • GOEWERMENTSKENNISGEWINGS

DEPARTMENT OF AGRICULTURE, LAND REFORM AND RURAL DEVELOPMENT

NO. 6733 **17 October 2025**

GENERAL NOTICE IN TERMS OF THE RESTITUTION OF LAND RIGHTS ACT, 1994 (ACT 22 OF 1994) AS AMENDED

Notice is hereby given in terms of section 11(1) (c) of the Restitution of Land Rights Act, 1994 (as amended) that a claim has been lodged for restitution of land rights on:

Claimant	Original Property Description & Extent	Current Property Description	Current Landowners & Bonds	Title Deed
Mr. Lungelo Victor Mayekiso	Lot 51 Retief Street, in the former Residensia Township Measuring 4385.59 square metres	Erf 1754 Sebokeng Unit 6 Extension 3 IQ	Emfuleni Local Municipality	T111464/2007
		Erf 1755 Sebokeng Unit 6 Extension 3 IQ	Emfuleni Local Municipality	T111464/2007
		Erf 1756 Sebokeng Unit 6 Extension 3 IQ	Koena Peter & Tsoenyane Alice Moloi Nedbank BL140891/2006	TL111906/2006
		Erf 1757 Sebokeng Unit 6 Extension 3 IQ	Solomon Maphuti & Manthoto Evelyn Mashala	TL68371/1988
		Erf 1784 Sebokeng Unit 6 Extension 3 IQ	Motshoane Ntsala	TL129404/2000
		Erf 1785 Sebokeng Unit 6 Extension 3 IQ	Tshepo Emmanuel Matjila	TL16974/2004
		Erf 1786 Sebokeng Unit 6 Extension 3 IQ	Emfuleni Local Municipality	T111464/2007
		Erf 1787 Sebokeng Unit 6 Extension 3 IQ	Emfuleni Local Municipality	T111464/2007
		Erf 1788 Sebokeng Unit 6 Extension 3 IQ	Emfuleni Local Municipality	T111464/2007
		Erf 1789 Sebokeng Unit 6 Extension 3 IQ	Emfuleni Local Municipality	T111464/2007

Take further notice that the Commission on Restitution of Land Rights will investigate the claim in terms of the provisions of Rule 5 of the Rules Regarding Procedure of Commission Established in terms of section 16 of Restitution of Land Rights Act as amended. Any interested party on the claim is hereby invited to submit, representations in terms of section 11A of the Restitution of Land Rights Act 22 of 1994 as amended within 90 (ninety) working days from the publication date of this notice, any comments/information may be sent to:

Chief Directorate: Land Restitution Support Gauteng Province
Private Bag X03
ARCADIA
0007
Tel: (012) 310-6500
Fax: (012) 324-5812

MR. L.H MAPHUTHA
REGIONAL LAND CLAIMS COMMISSIONER
DATE: 2025/10/02

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DEPARTMENT OF AGRICULTURE, LAND REFORM AND RURAL DEVELOPMENT

NO. 6734 **17 October 2025**

GENERAL NOTICE IN TERMS OF THE RESTITUTION OF LAND RIGHTS ACT, 1994 (ACT NO. 22 OF 1994) AS AMENDED

AMENDMENT OF NOTICE 273 OF 2016 AS CONTAINED IN GOVERNMENT GAZETTE NO: 39823 IN RESPECT OF A LAND CLAIM LODGED BY MR. LUCAS MABENA, LAND CLAIM REFERENCED Z 0174 & Z 0331 (KRP 11319)

Notice is hereby given in terms of Section 11A (4) of the Restitution of Land Rights Act, 1994 (Act 22 of 1994) read together with section 11 (1) (c) of the Restitution of Land Rights Act, 1994 (Act 22 of 1994) as amended, that an amendment is hereby made to Gazette Notice No 273 of 2016 contained in Government Gazette No: 39823 dated 18th of March 2016. The Gazette is amended to correct the claimant's name and claimed property as follows:

REF NO	CLAIMANT	PROPERTY DESCRIPTION & EXTENT	CURRENT LANDOWNERS	BONDS / NO BONDS	DEED OF TRANSFER	INTERESTED PARTIES
Z 0174 & Z 0331 (KRP 11319)	Mr. Lucas Mabena	Portion 7 of the farm Kleinzonderhout 519 JR Total Extent = 171.3064 hectares Claimed Extent = 53.4051 hectares	Arwiku Pty Ltd	None	T20819/2015	Land Claimant, the current landowners and the City of Tshwane Metropolitan Municipality

have been submitted to the Regional Land Claim Commission and that the Commission on Restitution of Land Rights will investigate the claim in terms of the provisions of the Act in due course. Any interested person who has an interest in the above-mentioned land claim is hereby invited to submit, within thirty (30) working days from the publication any comments/information to:

Chief Directorate: Land Restitution Support Gauteng Province
Private Bag X03
ARCADIA
0007
Tel: (012) 310-6500
Fax: (012) 324-5812

MR. L.H MAPHUTHA
REGIONAL LAND CLAIMS COMMISSIONER
DATE: 2025/07/24

GENERAL NOTICE IN TERMS OF RESTITUTION OF LAND RIGHTS ACT, 1994 [ACT 22 OF 1994] AS AMENDED

Notice is hereby given in terms of **Section 11[1] of the Restitution of the Land Rights Act 1994 [Act 22 of 1994] as amended,** that a land claim for **Restitution of Land Rights** has been lodged by **Mr. Frans Aaron Mahlangu** on behalf of Mahlangu Family on the following property mentioned hereunder situated under Emakhazeni Municipality, in Nkangala District Municipality Mpumalanga Province: **KRP 8130**

PAARDEKRAAL 422 JS

Description of property	Owner of Property	Title Deed Number	Extent of Property	Bonds	Bond Holder	Other Endorsements
Portion 6 of the farm Paardekraal 422 JS	OP Goeden Hoop Trust	T10967/2013	509.7607 ha	B6799/2013	Absa Bank LTD	K507/1969S

NB: The total hectares affected by the land claim is 30.8470 ha pending mapping exercise and determination of exact extent of rights lost

The Regional Land Claims Commissioner, Mpumalanga Province will investigate all the claims in terms of the provisions of the Act, any party interested in the above-mentioned property is hereby invited to submit within **30 [thirty days]** from the date of publication of this notice to submit any comments, or further information to:

Commissioner for Restitution of Land Rights
30 Samora Machel Drive
Nelspruit, 1200
Tel No: 013 756 6000
Fax No: 013 752 3859

MR L.H. MAPHUTHA
THE REGIONAL LAND CLAIMS COMMISSIONER
DATE: 2025/09/30

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DEPARTMENT OF AGRICULTURE, LAND REFORM AND RURAL DEVELOPMENT

NO. 6736 **17 October 2025**

DEPARTMENT OF AGRICULTURE
PLANT BREEDERS' RIGHTS ACT, 2018
(ACT No. 12 of 2018)

In terms of the provisions of the Plant Breeders' Rights Act, 2018 (Act No. 12 of 2018), it is hereby made known that all aspects of plant breeders' rights, of which the particulars appear in the Sections herewith have been processed for the period April 2025 to June 2025.
Any objections must be submitted in writing to the Registrar of Plant Breeders' Rights within THREE months with reference to denominations, and within SIX months with reference to applications and grants from the date of publication of this issue, accompanied by the appropriate fees.

The bracketed numbers are reference to the addresses of the applicants and agents which can be found on the plant breeders' rights page, on the www.doa.gov.za website or upon request from the Plant Breeders' Rights Office.

Mr Andani Madzinge
Registrar of Plant Breeders' Rights

SECTION 1

RECEIPTS OF APPLICATIONS FOR PLANT BREEDERS' RIGHTS
PLANT BREEDERS' RIGHTS

AGRICULTURAL CROPS

Kind of plant: *Triticum aestivum* L. [Wheat]

Application number	*Proposed denomination*	*Applicant*	*Country*	*Agent*	*Date accepted*
PT 10545	Mkuze	Agricultural Research Council [254]	ZA	Agricultural Research Council [254]	2025-04-01

Kind of plant: *Hordeum vulgaris* L. [Barley]

Application number	*Proposed denomination*	*Applicant*	*Country*	*Agent*	*Date accepted*
PT 10542	NEP-12-014-01	South Africa Barley Breeding Institute [1187]	ZA	South Africa Barley Breeding Institute [1187]	2025-04-14
PT 10541	BRAVESTAR	South Africa Barley Breeding Institute [1187]	ZA	South Africa Barley Breeding Institute [1187]	2025-04-14

VEGETABLE CROPS

Kind of plant: *Brassica oleracea* L. [Broccoli]

Application number	*Proposed denomination*	*Applicant*	*Country*	*Agent*	*Date accepted*
PT 10572	Kingy	Syngenta Switzerland [1577]	CH	Syngenta SA [809]	2025-06-24

Kind of plant: *Brassica oleracea* L. [White cabbage]

Application number	*Proposed denomination*	*Applicant*	*Country*	*Agent*	*Date accepted*
PT 10571	Frida	Syngenta Switzerland [1577]	CH	Syngenta SA [809]	2025-06-24

Kind of plant: *Cucumis melo* L. [Sweet melon]

Application number	*Proposed denomination*	*Applicant*	*Country*	*Agent*	*Date accepted*
PT 10555	Horizon	Origene Seeds Ltd [1936]	IL	Sakata [1356]	2025-06-06
PT 10573	Western Jewell	Nunhems BV [101]	NL	DM Kisch Inc. [124]	2025-06-25

Kind of plant: *Cucumis sativus* [Cucumber]

Application	*Proposed*	*Applicant*	*Country*	*Agent*	*Date accepted*

number	denomination				
PT 10574	Parnonas	Rijk Zwaan, Netherlands [382]	NL	Rijk Zwaan SA [1056]	2025-06-30

Kind of plant: *Cucurbita moschata* [Squash]

Application number	Proposed denomination	Applicant	Country	Agent	Date accepted
PT 10546	Carlota	Sakata Vegetables Europe SAS [1726]	FR	Sakata Seed SA [1536]	2025-04-25
PT 10548	Marte	Sakata Vegetables Europe SAS [1726]	FR	Sakata Seed SA [1536]	2025-04-25
PT 10549	Orionit	Sakata Vegetables Europe SAS [1726]	FR	Sakata Seed SA [1536]	**Priority 2024-07-08** 2025-04-25 received

Kind of plant: *Cucurbita pepo* L. [Marrow, Squash]

Application number	Proposed denomination	Applicant	Country	Agent	Date accepted
PT 10556	Crown	Origene Seeds Ltd [1936]	IL	Sakata [1356]	2025-06-06

Kind of plant: *Solanum lycopersicum* L. x *Solanum habrociates* S. [Tomato]

Application number	Proposed denomination	Applicant	Country	Agent	Date accepted
PT 10561	Ficus	Sakata [1726]	FR	Sakata [1356]	2025-06-06

ORNAMENTAL PLANTS

Kind of plant: *Chamelaucium* Desf. [Geraldton Wax]

Application number	Proposed denomination	Applicant	Country	Agent	Date accepted
PT 10562	Leilani	Botanics Gardens & Parks [1442]	AU	Arnelia Farms [1337]	2025-06-05
PT 10563	Xanadu	Helix Australia [1433]	AU	Arnelia Farms [1337]	2025-06-05

Kind of plant: *Ilex creanata* Thunb. [Japanese Holly]

Application number	Proposed denomination	Applicant	Country	Agent	Date accepted
PT 10550	Jenny	Wansink Holdings BV [2054]	NL	Malanseuns [82]	2025-04-08

Kind of plant: *Impatiens* L. [Snapweed – interspecific impatiens]

Application number	Proposed denomination	Applicant	Country	Agent	Date accepted
PT 10551	PAS1433403	Ball Horticultural Company [676]	US	Ball Straathof [108]	2025-05-28
PT 10552	PAS1498986	Ball Horticultural Company [676]	US	Ball Straathof [108]	2025-05-28
PT 10553	PAS1631817	Ball Horticultural Company [676]	US	Ball Straathof [108]	2025-05-28

FRUIT CROPS

Kind of plant: *Fragaria x ananassa* Duchesne [Strawberry]

Application number	Proposed denomination	Applicant	Country	Agent	Date accepted
PT 10565	MC 18-20	Masia Ciscar SA [2059]	SP	Thanyani Attorneys [2060]	2025-06-02
PT 10566	UC Eclipse	Regents of the Univ. of California [176]	US	Spoor & Fisher [157]	2025-05-30

PT 10567	UC Golden Gate	Regents of the Univ. of California [176]	US	Spoor & Fisher [157]	2025-05-30
PT 10568	UC Keystone	Regents of the Univ. of California [176]	US	Spoor & Fisher [157]	2025-05-30
PT 10569	UC Monarch	Regents of the Univ. of California [176]	US	Spoor & Fisher [157]	2025-05-30
PT 10570	UC Surfline	Regents of the Univ. of California [176]	US	Spoor & Fisher [157]	2025-05-30

Kind of plant: *Malus* Mill. [Apple]

Application number	***Proposed denomination***	***Applicant***	***Country***	***Agent***	***Date accepted***
PT 10544	INOBI	Novadi 23 Rue Jean Baldassini [2050]	FR	TopFruit (Pty) Ltd [229]	2025-04-01
PT 10543	CIVM49	C.I.V. Consorzio Italiano Vivaisti [998]	IT	Spoor & Fisher [157]	2025-04-01

Kind of plant: *Prunus salicina* Lindl. [Japanese plum]

Application number	***Proposed denomination***	***Applicant***	***Country***	***Agent***	***Date accepted***
PT 10547	AJOP20	FiveFifty5 Super Foods Pty Ltd [2052]	AU	Topfruit [Pty] Ltd [229]	2025-05-09
PT 10564	GW1	Witaplum Technology [2051]	AU	Topfruit [Pty] Ltd [229]	2025-06-19
PT 10557	Karuby Prime	SA Geneco (Pty) Ltd [2056]	ZA	SA Geneco (Pty) Ltd [2056]	2025-06-20
PT 10558	Karuby Joy	SA Geneco (Pty) Ltd [2056]	ZA	SA Geneco (Pty) Ltd [2056]	2025-06-20

Kind of plant: *Pyrus* L. [Pear]

Application number	***Proposed denomination***	***Applicant***	***Country***	***Agent***	***Date accepted***
PT 10559	Early Forelle	Wilgenhof 383 Boerdery (Pty) Ltd [2057]]	ZA	SAPO Trust (Pty) Ltd [59]	2025-06-17

Kind of plant: *Vaccinium* L. [Blueberry]

Application number	***Proposed denomination***	***Applicant***	***Country***	***Agent***	***Date accepted***
PT 10560	Ridley7301	Mountain Blue Orchards Pty Ltd [1700]	AU	Spoor and Fisher [157]	2025-06-19

SECTION 2

APPLICATIONS WITHDRAWN

Kind of plant: *Citrus* L .[Citrus]

Application No.	***Applicant***	***Agent***	***Proposed denomination***	***Date of Withdrawal***
PT 6720	Citrigene [1144]	Citrigene [1144]	GEN 231 VOB	2025-05-05
PT 7609	P. Ferreira [Citrigene] [1144]	Citrigene [1144]	Nules Early	2025-05-05

Kind of plant: *Cucumis melo* [Sweet melon]

Application No.	***Applicant***	***Agent***	***Proposed denomination***	***Date of Withdrawal***
PT 9896	Nunhems [101]	Kisch IP [124]	Turan	2025-04-04

Kind of plant: *Prunus salicina* Lindl. [Japanese plum]

Application No.	***Applicant***	***Agent***	***Proposed denomination***	***Date of Withdrawal***
PT 6244	Plantas de Navarra, SP	Stargrow [731]	Songria 15	2025-05-28

	[1081]			

SECTION 3

APPLICATIONS REJECTED

Kind of plant: *Brassica napus* L. [Oilseed rape]

Application No.	*Applicant*	*Agent*	*Proposed denomination*	*Date of Refusal*
PT 9383	Pioneer Overseas Corp [1810]	Corteva [411]	44Y96CL	2025-06-02

IV. DENOMINATIONS

IV.A Application for variety denominations

Vide I

SECTION 4

APPLICATIONS FOR APPROVAL OF ALTERATIONS OF DENOMINATIONS

Kind of plant: *Glycine max* (L.) Merrill. [GMO Soybean]

Application/Registration No.	*Applicant*	*Agent*	*Previous denomination*	*Date alteration granted*	*New denomination*
ZA 20237962	Pioneer Overseas Corp. [1810]	Corteva [411]	5055001-08	2025-06-06	P55T86 R

Kind of plant: *Zea mays* L. [Maize]

Application/Registration No.	*Applicant*	*Agent*	*Previous denomination*	*Date alteration granted*	*New denomination*
ZA 20248345	Pioneer Overseas Corp. [1810]	Corteva [411]	X25N216 R	2025-06-06	VP8704R

SECTION 5

NOTIFICATIONS OF CHANGE OF AGENTS

Kind of plant: *Nicotiana tobaccum* L. [Tobacco]

Application/Registration No.	*Applicant*	*Variety Denomination*	*Previous Agent*	*New Agent*
ZA 20166104	Hartree Partners [UK] Limited [2053]	Solaris	Spoor & Fisher [157]	Spoor & Fisher [157] [New owner retained Spoor & Fisher]

Kind of plant: *Prunus persica* (L.) Batsch. [Peach]

Application/Registration No.	*Applicant*	*Variety Denomination*	*Previous Agent*	*New Agent*
PT 5267	OZ Varieties W Aus [2058]	Burpeachfifteen	SAPO [59]	DM Kisch [124]
PT 5266	OZ Varieties W Aus [2058]	Burpeachnineteen	SAPO [59]	DM Kisch [124]

Kind of plant: *Solanum tuberosum* L. [Potato]

Application/Registration No.	*Applicant*	*Variety Denomination*	*Previous Agent*	*New Agent*
ZA 20114845	Fritolay [624]	FL 2108	Simba [557]	Adams & Adams []65]

Kind of plant: *Triticum aestivum* L. [Wheat]

Application/Registration No.	*Applicant*	*Variety Denomination*	*Previous Agent*	*New Agent*
ZA 20135239	SA Seed Development [2035]	PAN 3111	Corteva Agriscience [411]	SA Seed Development [2035]
ZA 20053249	SA Seed Development [2035]	PAN 3120	Corteva Agriscience [411]	SA Seed Development [2035]
ZA 20196801	SA Seed Development [2035]	PAN 3133	Corteva Agriscience [411]	SA Seed Development [2035]
ZA 20125002	SA Seed Development [2035]	PAN 3161	Corteva Agriscience [411]	SA Seed Development [2035]
ZA 20125003	SA Seed Development [2035]	PAN 3195	Corteva Agriscience [411]	SA Seed Development [2035]
ZA 20135240	SA Seed Development [2035]	PAN 3198	Corteva Agriscience [411]	SA Seed Development [2035]
PT 10241	SA Seed Development [2035]	PAN 3223	Corteva Agriscience [411]	SA Seed Development [2035]
ZA 20196802	SA Seed Development [2035]	PAN 3252	Corteva Agriscience [411]	SA Seed Development [2035]
ZA 20227637	SA Seed Development [2035]	PAN 3282	Corteva Agriscience [411]	SA Seed Development [2035]
ZA 20227637	SA Seed Development [2035]	PAN 3282	Corteva Agriscience [411]	SA Seed Development [2035]
ZA 20073551	SA Seed Development [2035]	PAN 3355	Corteva Agriscience [411]	SA Seed Development [2035]
ZA 20094125	SA Seed Development [2035]	PAN 3368	Corteva Agriscience [411]	SA Seed Development [2035]
ZA 20207053	SA Seed Development [2035]	PAN 3373	Corteva Agriscience [411]	SA Seed Development [2035]
ZA 20227638	SA Seed Development [2035]	PAN 3380	Corteva Agriscience [411]	SA Seed Development [2035]
ZA 20125004	SA Seed Development [2035]	PAN 3400	Corteva Agriscience [411]	SA Seed Development [2035]
ZA 20125005	SA Seed Development [2035]	PAN 3489	Corteva Agriscience [411]	SA Seed Development [2035]
ZA 20120404	SA Seed Development [2035]	PAN 3497	Corteva Agriscience [411]	SA Seed Development [2035]
ZA 20135241	SA Seed Development [2035]	PAN 3515	Corteva Agriscience [411]	SA Seed Development [2035]
PT 10242	SA Seed Development [2035]	PAN 3525	Corteva Agriscience [411]	SA Seed Development [2035]
ZA 20186600	SA Seed Development [2035]	PAN 3541	Corteva Agriscience [411]	SA Seed Development [2035]
ZA 20227639	SA Seed Development [2035]	PAN 3582	Corteva Agriscience [411]	SA Seed Development [2035]
ZA 20227641	SA Seed Development [2035]	PAN 3584	Corteva Agriscience [411]	SA Seed Development [2035]
ZA 20248212	SA Seed Development [2035]	PAN 3611	Corteva Agriscience [411]	SA Seed Development [2035]
ZA 20135242	SA Seed Development [2035]	PAN 3623	Corteva Agriscience [411]	SA Seed Development [2035]
ZA 20186602	SA Seed Development [2035]	PAN 3644	Corteva Agriscience [411]	SA Seed Development [2035]
ZA 20227642	SA Seed Development [2035]	PAN 3681	Corteva Agriscience [411]	SA Seed Development [2035]
ZA 20186599	SA Seed Development [2035]	PAN 3753	Corteva Agriscience [411]	SA Seed Development [2035]
ZA 20207054	SA Seed Development [2035]	PAN 3774	Corteva Agriscience [411]	SA Seed Development [2035]
ZA 20227640	SA Seed Development [2035]	PAN 3783	Corteva Agriscience [411]	SA Seed Development [2035]
ZA 20186601	SA Seed Development [2035]	PAN 3855	Corteva Agriscience [411]	SA Seed Development [2035]
ZA 20207055	SA Seed Development [2035]	PAN 3976	Corteva Agriscience [411]	SA Seed Development [2035]

SECTION 6

CHANGES IN THE PERSON OF THE HOLDER OF A PLANT BREEDERS' RIGHT

Kind of plant: *Aloe* L. [Aloe]

Registration No.	*Variety Denomination*	*Date of transfer*	*Portion transferred*	*Previous Holder*	*New Holder*
ZA 20063523	LEO 1730 [SOUTHERN CROSS]	2025-05-12	100%	LPE Thamm [1194]	Dr CM Coetzer [2055]
ZA 20114752	LEO 3151 A	2025-05-12	100%	LPE Thamm [1194]	Dr CM Coetzer [2055]
ZA 20114754	LEO 4363	2025-05-12	100%	LPE Thamm [1194]	Dr CM Coetzer [2055]
ZA 20083863	LEO 4520 [BUSH BABY YELLOW]	2025-05-12	100%	LPE Thamm [1194]	Dr CM Coetzer [2055]
ZA 20135350	LEO 6140	2025-05-12	100%	LPE Thamm [1194]	Dr CM Coetzer [2055]
ZA 20135349	LEO 6254B	2025-05-12	100%	LPE Thamm [1194]	Dr CM Coetzer [2055]
ZA 20114761	LEO 8521A	2025-05-12	100%	LPE Thamm [1194]	Dr CM Coetzer [2055]
ZA 21004753	LEO3711	2025-05-12	100%	LPE Thamm [1194]	Dr CM Coetzer [2055]

Kind of plant: *Dianthus x allwoodii* Hort. [Dianthus]

Registration No.	*Variety Denomination*	*Date of transfer*	*Portion transferred*	*Previous Holder*	*New Holder*
ZA 20207194	WP11GWE04	2025-05-29	100%	Whetman Pinks Ltd, UK [1479]	Klemm & Sohn, DE [1024]
ZA 20145451	WP Passion	2025-05-29	100%	Whetman Pinks Ltd, UK [1479]	Plant Genetics International [1773]

Kind of plant: *Nicotiana tabaccum* L. [Tobacco]

Registration No.	*Variety Denomination*	*Date of transfer*	*Portion transferred*	*Previous Holder*	*New Holder*
ZA 20166104	Solaris	2025-03-07	100%	Sunchem AEP Hmbh, CH [1665]	Hartree Partners [UK] Limited [2053]

Kind of plant: *Prunus amygdalis* X [Almond Rootstock]

Registration No.	*Variety Denomination*	*Date of transfer*	*Portion transferred*	*Previous Holder*	*New Holder*
ZA 20207152	Cornerstone	2025-06-04	100%	Wawona Packing Company, US [1894]	OZ Varieties W Aus [2058]

Kind of plant: *Prunus persica* (L.) Batsch var *nucipersica* Schneid [Nectarine]

Registration No.	*Variety Denomination*	*Date of transfer*	*Portion transferred*	*Previous Holder*	*New Holder*
ZA 20196820	Burnectfifteen	2025-06-04	100%	Wawona Packing Company, US [1894]	OZ Varieties W Aus [2058]
ZA 20166092	Burnectfour	2025-06-04	100%	Wawona Packing Company, US [1894]	OZ Varieties W Aus [2058]

Kind of plant: *Prunus persica* (L.) Batsch [Peach]

Registration No.	*Variety Denomination*	*Date of transfer*	*Portion transferred*	*Previous Holder*	*New Holder*
ZA 20166115	Burpeachseven	2025-06-04	100%	Wawona Packing Company, US [1894]	OZ Varieties W Aus [2058]
ZA 20166116	Burpeachthirteen	2025-06-04	100%	Wawona Packing Company, US [1894]	OZ Varieties W Aus [2058]

SECTION 7

CHANGES IN THE PERSON OF THE APPLICANT OF A PLANT BREEDERS' RIGHT

Kind of plant: *Mangifera indica* L. [Mango]

Application	*Application date*	*Variety Denomination*	*Date of change*	*Previous Applicant*	*New Applicant*

No.					
PT 10179	2023-09-22	Charli	2025-06-11	Bavaria Fruit Estate [1978]	Citrogold [964]
PT 10180	2023-09-22	Dinki	2025-06-11	Bavaria Fruit Estate [1978]	Citrogold [964]
PT 10181	2023-09-22	Evi Red	2025-06-11	Bavaria Fruit Estate [1978]	Citrogold [964]
PT 10182	2023-09-22	Limi Late	2025-06-11	Bavaria Fruit Estate [1978]	Citrogold [964]

Kind of plant: *Prunus persica* (L.) Batsch, [Peach]

Application No.	Application date	Variety Denomination	Date of change	Previous Applicant	New Applicant
PT 5267	2008-01-02	Burpeachfifteen	2025-06-04	Wawona Packing Company, US [1894]	OZ Varieties W Aus [2058]
PT 5266	2008-01-02	Burpeachnineteen	2025-06-04	Wawona Packing Company, US [1894]	OZ Varieties W Aus [2058]

SECTION 8

GRANT OF PLANT BREEDERS' RIGHTS

AGRICULTURAL CROPS/AKKERBOUGEWASSE

Kind of plant: *Brassica napus* L. [Forage rape]

Application No.	Variety Denomination	Grantee	Agent	Grant No.	Date of Grant	Expiry Date
PT 10253	Hyola Continuum CL	Advanta Seeds ZA [1184]	Advanta Seeds ZA [1184]	ZA 20258470	2025-04-05	2045-04-05
PT 10254	Hyola Defender CT	Advanta Seeds ZA [1184]	Advanta Seeds ZA [1184]	ZA 20258471	2025-04-05	2045-04-05
PT 10255	Hyola Enforcer CT	Advanta Seeds ZA [1184]	Advanta Seeds ZA [1184]	ZA 20258472	2025-04-05	2045-04-05
PT 10256	Hyola Equinox CL	Advanta Seeds ZA [1184]	Advanta Seeds ZA [1184]	ZA 20258473	2025-04-05	2045-04-05
PT 10257	Hyola Solstice CL	Advanta Seeds ZA [1184]	Advanta Seeds ZA [1184]	ZA 20258474	2025-04-05	2045-04-05
PT 10258	PY327C	Pioneer Overseas Corporation, US [133]	Corteva Agriscience [411]	ZA 20258468	2025-04-05	2045-04-05
PT 10259	PY429T	Pioneer Overseas Corporation, US [133]	Corteva Agriscience [411]	ZA 20258569	2025-04-05	2045-04-05

Kind of plant: *Eragrostis tef* [Zucc.] Trotter [Teff grass]

Application No.	Variety Denomination	Grantee	Agent	Grant No.	Date of Grant	Expiry Date
PT 9810	Blue Nile	Capstone Seed, ZA [572]	Capstone Seed [572]	ZA 20258466	2025-04-23	2045-04-23

Kind of plant: *Stevia* Cav. [Sweet leaf]

Application No.	Variety Denomination	Grantee	Agent	Grant No.	Date of Grant	Expiry Date
PT 10252	WS24	Wostevia RF, ZA [1982]	Wostevia [1982]	ZA 20258467	2025-04-25	2045-04-25

VEGETABLE CROPS/GROENTEGEWASSE

Kind of plant:

Application No.	Variety Denomination	Grantee	Agent	Grant No.	Date of Grant	Expiry Date
PT 9230	Pumula	Pro-Seed [366]	Pro-Seed [366]	ZA 20258465	2025-04-02	2045-04-02

FRUIT CROPS/VRUGTEGEWASSE

Kind of plant:

Application No.	*Variety Denomination*	*Grantee*	*Agent*	*Grant No.*	*Date of Grant*	*Expiry Date*

ORNAMENTAL PLANTS/SIERGEWASSE

Kind of plant:

Application No.	*Variety Denomination*	*Grantee*	*Agent*	*Grant No.*	*Date of Grant*	*Expiry Date*

SECTION 9

REFUSAL OF GRANTS FOR PLANT BREEDERS' RIGHTS

Kind of plant:

Application No.	*Applicant*	*Agent*	*Variety Denomination*	*Date of Rejection*

SECTION 10

PLANT BREEDERS' RIGHTS EXPIRED

Registration No.	*Genus & species*	*Common Name*	*Variety Denomination*	*Holder*	*Agent*	*Date Expired*
ZA 20053314	*Allium* L.	Onion	Coastal Cream	DuToit Group [1816]	UPOT Seed [1817]	2025-04-13
ZA 20053313	*Allium* L.	Onion	Lolita	DuToit Group [1816]	UPOT Seed [1817]	2025-04-13
ZA 20053240	*Brassica napus* L.	Oil Seed Rape	Tornado 555 TT	Pacific Seed [55]	Klein Karoo [209]	2025-01-12
ZA 20053317	*Capsicum* L.	Chilli/Pepper	Double Up	Sakata, BR [1135]	Sakata [15]	2025-04-15
ZA 20002311	*Chamelaucium* Desf.	Wax flower	Ofir	NIR [494]	West Coast Flora [789]	2025-02-04
ZA 20002347	*Erica* L.	Heath	Fairy Bells	ARC [254]	ARC [254]	2025-05-02
ZA 20053236	*Fragaria x ananassa* Duchesne	Strawberry	San Juan	Driscoll's, Inc. [981]	Spoor & Fisher [157]	2025-01-10
ZA 20053299	*Lavandula* L.	Lavender	Elegans	Roberts [1094]	Malanseuns [82]	2025-04-15
ZA 20002351	*Malus* Mill.	Apple	Caudle	Cameo [736]]	Stargrow [731]	2025-05-06
ZA 20053301	*Mandevilla* Lindl.	Mandevilla	Sunmandecrim	Suntory [1150]	Malanseuns [82]	2025-04-15
ZA 20053318	*Nicotiana tabaccum* L.	Tobacco	LD 2	ARC [254]	ARC [254]	2025-04-25
ZA 20053319	*Nicotiana tabaccum* L.	Tobacco	OD 5	ARC [254]	ARC [254]	2025-04-25
ZA 20053280	*Phaseolus vulgaris* L.	Garden bean	STAR 2001	Plennegy [1540]	Starke Ayres [25]	2025-04-11
ZA 20053281	*Phaseolus vulgaris* L.	Garden bean	STAR 2052	Plennegy [1540]	Starke Ayres [25]	2025-04-11
ZA 20053282	*Phaseolus vulgaris*	Garden bean	STAR 2053	Plennegy	Starke Ayres	2025-04-11

	L.			[1540]	[25]	
ZA 20053276	*Phaseolus vulgaris* L.	Dry bean	AS 9249	AGT Foods [1418]	Pannar Seed [1412]	2025-04-11
ZA 20053275	*Phaseolus vulgaris* L.	Dry bean	DBS 360	Dry Bean Producers [1073]]	Dry Bean Producers [1073]]	2025-04-11
ZA 20053277	*Phaseolus vulgaris* L.	Dry bean	Teebus RCR 2	ARC [254]	ARC [254]	2025-04-11
ZA 20002348	*Protea* L.	Protea	Clare	ARC [254]	ARC [254]	2025-05-02
ZA 20002349	*Protea* L.	Protea	Madiba	ARC [254]	ARC [254]	2025-05-02
ZA 20002345	*Prunus armeniaca* L.	Apricot	Eden Prime	Edenville Boerdery [744]	SAPO [59]	2025-04-03
ZA 20002255	*Prunus persica* (L.) Batsch	Peach	Atlas	Zaiger [605]	SAPO [59]	2025-01-04
ZA 20002256	*Prunus persica* (L.) Batsch	Peach	Viking	Zaiger [605]	SAPO[59]	2025-01-04
ZA 20002346	*Pyrus* L.	Pear	Williams Beaut	Botma [732]	Stargrow [731]	2025-04-15
ZA 20053283	*Sorghum bicolor*	Grain sorghum	M 48	ARC [254]	ARC [254]	2025-04-11
ZA 20053284	*Sorghum bicolor*	Grain sorghum	M 66	ARC [254]	ARC [254]	2025-04-11
ZA 20002350	*Vitis* L.	Grape	Muscat Delight	ARC [254]	ARC [254]	2025-05-02

SECTION 11

PLANT BREEDERS' RIGHTS SURRENDERED

Registration No.	***Genus & species***	***Common Name***	***Variety Denomination***	***Holder***	***Agent***	***Date Surrendered***
ZA 20063524	*Aloe* L.	Aloe	LEO 2267 [RIAS]	Leo Thamm [1194]	Leo Thamm [1194]	2025-05-05
ZA 20135348	*Aloe* L.	Aloe	LEO 3319	Leo Thamm [1194]	Leo Thamm [1194]	2025-05-05
ZA 20135353	*Aloe* L.	Aloe	LEO 3917A	Leo Thamm [1194]	Leo Thamm [1194]	2025-05-05
ZA 20063525	*Aloe* L.	Aloe	LEO 4120 [TOPAZ]	Leo Thamm [1194]	Leo Thamm [1194]	2025-05-05
ZA 20063527	*Aloe* L.	Aloe	LEO 4538 [CAPRICORN]	Leo Thamm [1194]	Leo Thamm [1194]	2025-05-05
ZA 20114756	*Aloe* L.	Aloe	LEO 4946	Leo Thamm [1194]	Leo Thamm [1194]	2025-05-05
ZA 20135351	*Aloe* L.	Aloe	LEO 5962	Leo Thamm [1194]	Leo Thamm [1194]	2025-05-05
ZA 21035352	*Aloe* L.	Aloe	LEO 6219	Leo Thamm [1194]	Leo Thamm [1194]	2025-05-05
ZA 20114758	*Aloe* L.	Aloe	LEO 6349A	Leo Thamm [1194]	Leo Thamm [1194]	2025-05-05
ZA 20114760	*Aloe* L.	Aloe	LEO 8496B	Leo Thamm [1194]	Leo Thamm [1194]	2025-05-05
ZA 20083864	*Aloe* L.	Aloe	LEO 8552 [RUBY BLAZE]	Leo Thamm [1194]	Leo Thamm [1194]	2025-05-05
Za 20135372	*Malus* Mill.	Apple	Zari	BETTER3FRUIT [1463]	SAPO [59]	2025-06-01
ZA 20207027	*Rubus* L.	Raspberry	Advaberimar	Fuelplants BV & Allberry BV [1753, 1754]	Adams & Adams [65]	2025-06-26
ZA 20248352	*Zea mays* L.	Maize	SW7404PGJ1	Monsanto Technology [1338]	Bayer RSA [1514]	2025-06-06
ZA 20248313	*Zea mays* L.	Maize	SV7409PGJ1	Monsanto Technology [1338]	Bayer RSA [1514]	2025-06-06
Za 20217521	*Zea mays* L.	Maize	ST7716PGJ1	Monsanto Technology [1338]	Bayer RSA [1514]	2025-06-06

SECTION 12

PLANT BREEDERS' RIGHTS TERMINATED

iv. PBRs TERMINATED

Registration No.	*Genus & species*	*Common Name*	*Variety Denomination*	*Holder*	*Agent*	*Date Terminated*

DEPARTMENT OF AGRICULTURE, LAND REFORM AND RURAL DEVELOPMENT

NO. 6737 **17 October 2025**

GENERAL NOTICE IN TERMS OF THE RESTITUTION OF LAND RIGHTS ACT NO. 22 OF 1994, AS AMENDED

Notice is hereby given in terms of Section 11(1) of the Restitution of Land Rights Act no. 22 of 1994 (as amended), that a claim for restitution of land rights on: -

Reference No.	: KRN 6/2/2/D/1086/0/0/38
Claimant	: Mr. Papi Gordon Mnotoza
Property No. 08,	: Portion of Farm No. 82 (knowns as Mokhesi Administrative Area arable allotment No. 43 and residential allotment No. 114)
District Locality	: The Registration Division of Sterkspruit, Senqu Local Municipality, Joe Gqabi District in the Eastern Cape Province.
Measuring	: 4906 square meters for residential and 13 223 square meters for ploughing fields.
Title Deed No.	: T845/2023.
Date Submitted	: 28 December 1998
Bondholder	: None
Current Owner	: National Government of the Republic of South Africa

Has been submitted to the Regional Land Claims Commissioner for the Eastern Cape and that the Commission on Restitution of Land Rights will investigate the claim in terms of the provisions of the Act in due course. Any person who has an interest in the above-mentioned land is hereby invited to submit, within sixty (60) days from the publication of this notice, any comments/information to:

The Regional Land Claims Commissioner: Eastern Cape Province
Address: Shop 15, Beacon Bay Crossing, Bonza Bay Road, Beacon Bay, East London
P.O. BOX 1375,
East London,
5200
Tel: (043) 700 6000, Fax: 043 743 3687

Mr. LH Maphutha
Regional Land Claims Commissioner
Date: 2025/09/11

DEPARTMENT OF FORESTRY, FISHERIES AND THE ENVIRONMENT

NO. 6738 **17 October 2025**

NATIONAL ENVIRONMENTAL MANAGEMENT: PROTECTED AREAS ACT, 2003 (ACT NO. 57 OF 2003)

AMENDMENT NOTICE: CONSULTATION ON THE NOTICE OF INTENTION TO DECLARE CERTAIN PROPERTIES SITUATED IN THE EASTERN CAPE PROVINCE AS A NEW NATIONAL PARK WITH THE NAME "GRASSLAND NATIONAL PARK" IN TERMS OF THE NATIONAL ENVIRONMENTAL MANAGEMENT: PROTECTED AREAS ACT, 2003 (ACT NO. 57 OF 2003)

I, Dion Travers George, Minister of Forestry, Fisheries and the Environment, hereby in terms of sections 20(1)(a)(i) and (b) read with sections 31 and 33 of the National Environmental Management: Protected Areas Act, 2003 (Act No.57 of 2003), replacing the notice published on Government Gazette No. 53485, Notice No. 6717 of 8 October 2025, give notice of my intention to declare certain properties situated in the Eastern Cape Province as a new national park with the name "Grasslands National Park", as set out in the attached Schedule.

Members of the public are invited to submit, **within 60 days** from date of publication of this Notice in the Government *Gazette*, or in the newspaper, whichever date is the last date, written comments to the following addresses:

By post to:
The Director-General
Department of Forestry, Fisheries and the Environment
Attention: Mr Sydney Nkosi
Private Bag X447
PRETORIA
0001

By hand to: 473 Steve Biko Street, Arcadia, **PRETORIA**, 0083

By mail to: smampe@dffe.gov.za

Any enquiries in connection with the Notice can be directed to Mr Sydney Nkosi at 012 399 9065

Comments received after the closing may be disregarded.



DR DION TRAVERS GEORGE
MINISTER OF FORESTRY, FISHERIES AND THE ENVIRONMENT

SCHEDULE

No.	Title Deed No.	Description of Properties	Ownership	Registration Division	Extent (ha)
1.	T3922/1998	Portion 1 of the Farm Glencairn No. 21	Roberts Delwyn Owen	Maclear	389.8905
2.	T3922/1998	Remaining extent of the farm Glen Avice No.28	Delwyn Roberts	Maclear	356.7898
3.	T3922/1998	Portion 2 of the Farm Glen Avice No. 28	Roberts Delwyn Owen	Maclear	356.7899
4.	T88714/1997	Portion 1 of the Farm Traquair No. 56	Browne Judith Lynne	Barkly East	692.6737
5.	T39178/2015	Farm Mountain Side No. 76	Cornlands Trust	Maclear	757.9307
6.	T92339/2007	Farm Grotto No. 78	Roberts Delwyn Owen	Maclear	584.2633
7.	T7718/2020	Remaining extent of the Farm Highlands No. 83	Roberts Farming Trust	Maclear	311.7776
8.	T10190/2019	Portion 1 of the Farm Highlands No. 83	Roberts Farming Trust	Maclear	315.2038
9.	T26563/2014	Farm Excelsior No. 84	Roberts Delwyn Owen	Maclear	775.1615
10.	T8272/2023	Remaining extent of the Farm Welcome Valley No. 119	Roberts Farming Trust	Maclear	393.8221
11.	T92339/2007	Portion 1 of the Farm Welcome Valley No. 119	Roberts Delwyn Owen	Maclear	254.3880
12.	T8272/2023	Portion 2 of the Farm Welcome Valley No. 119	Roberts Farming Trust	Maclear	270.6662
13.	T4103/2024	Farm Wide Valley No. 120	Roberts Farming Trust	Maclear	1024.2167
14.	T65260/2017	The Farm Ben Lyell No.121	Roberts Farming Trust	Maclear	887.7141
15.	T39177/2015	Farm Woodlands No. 126	Cornlands Trust	Maclear	510.5074
16.	T48658/2017	Farm Ben Loyal No. 252	Roberts Farming Trust	Barkley East	573.1562
17.	T5539/1997	Farm Woodcliffs No. 372	Sephton Phyllis Julia	Maclear	941.9027
18.	T4151/2024	Farm No. 376	Roberts Farming Trust	Maclear	829.0700
	GRAND TOTAL				**10 225,9242**

All situated in the Eastern Cape Province

DEPARTMENT OF FORESTRY, FISHERIES AND THE ENVIRONMENT

NO. 6739 **17 October 2025**

NATIONAL ENVIRONMENTAL MANAGEMENT: PROTECTED AREAS ACT, 2003

(ACT NO. 57 OF 2003)

DECLARATION OF AREAS SITUATED IN THE WESTERN CAPE AND NORTHERN CAPE PROVINCES AS PART OF THE EXISTING TANKWA KAROO NATIONAL PARK IN TERMS OF THE NATIONAL ENVIRONMENTAL MANAGEMENT: PROTECTED AREAS ACT, 2003 (ACT NO. 57 OF 2003)

I, Dr Dion Travers George, Minister of Forestry, Fisheries and the Environment, hereby in terms of section 20(1)(a)(ii) of the National Environmental Management: Protected Areas Act, 2003 (Act No. 57 of 2003), declare the areas listed in the Schedule hereto, as part of the existing Tankwa Karoo National Park.

DR DION TRAVERS GEORGE
MINISTER OF FORESTRY, FISHERIES AND THE ENVIRONMENT

SCHEDULE

Title Deed No	Description of Property: farm, portion	Ownership	District	Extent (ha)
T41567/2018	Remaining extent of the Farm Oliviers kraal No. 16	WWF-SA	Ceres	2675.4269
T42192/2018	Portion 1 of the Farm Oliviers kraal No. 16	WWF-SA	Ceres	2675.4399
T29240/2010	Farm Os Vley Hoogtens No 1123	Warwick Stodel Family Trust	Calvinia	5438.2807

DEPARTMENT OF HEALTH

NO. 6740 **17 October 2025**

THE NATIONAL HEALTH ACT, 2003 (ACT 61 OF 2003)
NATIONAL ENVIRONMENTAL HEALTH NORMS AND STANDARDS

I, Sandile Buthelezi, Director General of Health, in terms of Chapter 3, Section 21(2) (b)(ii) of the National Health Act 2003 (Act No. 61 of 2003) ("the Act") as amended, hereby replace the National Environmental Health Norms and Standards for Premises and Acceptable Monitoring Standards for Environmental Health Practitioners, published in the *Government Gazette* 39561 of 24 December 2015.

The Norms and Standards are in line with the National Department of Health's strategic goal of strengthening environmental health by contributing to improved water, sanitation, waste management, and food services.

The National Norms and Standards for environmental health outline service delivery standards applicable where environmental health services are rendered. Environmental health standards are provided for use on various premises for the protection of public health and to prevent environmental conditions that may constitute a health hazard.

DR SSS BUTHELEZI
DIRECTOR-GENERAL: HEALTH
DATE: 04/09/2025

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CHAPTER 1:
CONTEXT AND APPLICATION

1. Purpose of the national norms and standards

1.1 The World Health Organization identifies environmental health as a key component of an effective health system. It further stipulates that healthier environments could prevent almost a quarter of the global burden of disease. Environmental health practitioners (EHPs) services continue to be essential in building healthy populations. The COVID-19 pandemic is a reminder of the delicate relationship between people and the environments where they live, work, play and age. These factors include the quality of the air, availability of adequate and safe water, sanitation and food, safe management of chemicals, waste, vectors and hygiene promotion.

1.2 Environmental health practitioners act as public arbiters of environmental health standards, maintaining close contact with the communities they serve. They act as advisers, educators, consultants, managers and enforcement officers (enforcing health policies), ensuring people can live, work and play in safe, healthy environments.

1.3 The National Department of Health recognises that priority must be given to addressing upstream environmental determinants to reduce the burden of disease due to preventable environmental factors. Therefore, the National Norms and Standards for Environmental Health aims to:

(a) set service delivery standards within which environmental health services should be rendered to the public;
(b) promote standardisation in the delivery of environmental health services in the country.
(c) set a quality benchmark against which the delivery of environmental health services can be monitored and assessed;
(d) raise public awareness of environmental health standards and create public demand for services; and
(e) promote voluntary compliance and self-regulation to legislation to protect environmental conditions that may constitute a health hazard.

2. Application and implementation

2.1 The service delivery norms and standards as set out in Chapter 2 of this document are applicable to spheres of government, i.e. provinces, and metropolitan and district municipalities, where environmental health services are rendered and monitored, including government departments and entities, health facilities, and the private sector.

2.2 The norms and standards for premises as set out in Chapter 3 of this document apply to all facilities that provide specific services to the public. The norms outline environmental health requirements for "premises" as defined in the National Health Act 2003 (Act No. 61 of 2003), as amended to prevent conditions that may result in a health hazard or nuisance. Failure to comply with these norms and standards may result in legal action being instituted against the owner, person in charge or occupier of such premises in line with provisions of the Act.

3. Policy and legislative context

3.1 Section 24 of the Constitution of the Republic of South Africa, 1996 (Act No. 108 of 1996) ("the Constitution") entrenches the right of all citizens to live in an environment that is not harmful to their health or well-being.

3.2 The National Health Act, 2003 (NHA) defines municipal health services to include environmental health services, such as water quality monitoring, food control, waste management, health surveillance of premises, surveillance and prevention of communicable diseases, excluding

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immunisations, vector control, environmental pollution control, disposal of the dead, and chemical safety, excluding malaria control, control of hazardous substances and port health services.

3.3 The NHA gives powers to the Director-General of Health to issue and promote adherence to Norms and Standards on health matters, including environmental health conditions that constitute a health hazard.

3.4 Other legislative frameworks underpinning these norms and standards include the following:

3.4.1 Hazardous Substances Act, 1973 (Act No. 5 of 1973) and Regulations.
3.4.2 Foodstuffs, Cosmetics and Disinfectant Act, 1972 (Act No. 54 of 1972).
3.4.3 International Health Regulations 2005.

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CHAPTER 2:
NORMS AND STANDARDS FOR ENVIRONMENTAL HEALTH SYSTEMS AND SERVICE DELIVERY

SECTION 1:
ORGANISATIONAL SYSTEM NORMS AND STANDARDS

1.1 Client's rights

1.1.1 The person in control of the premises, or the owner of the premises, or the employer must ensure that Signage and display boards are in place and are displayed outside the buildings/boundary to communicate to the public that environmental health services are rendered.

1.1.2 Such display boards must be visible to the public and reflect the facility name, service hours, and contact details.

1.1.3 Signboards indicating offices/service centres/directions are available inside the building or at the entrance to the building.

1.2. Client experience of services

1.2.1 The owner or the person in control of the premises must ensure that A system is in place to enable communication about service experience to the public.

1.2.2 The owner or the person in control of the premises must ensure that A standard operating procedure is available for the management of public complaints:

1.2.3 A compliment, complaint, suggestion, or feedback system is in place, must be visible and accessible to the public.

1.2.4 There must also be A system is in place to record public complaints related to environmental health issues.

1.2.5 The owner or the person in control of the premises must ensure that Environmental health complaints are investigated within seven days of receipt.

1.3. Internal and external communication infrastructure

The owner or the person in control of the premises must make the Infrastructure available to ensure internal and external communication for service delivery quality, which must include the following:

a) A functional help desk for administrative reception.

b) A Functional computer.

c) A Functional printer.

d) Reliable Network connection.

e) Easy access to Web .

f) Functional Telephones in the office and field staff that provided with mobile telephones.

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1.4 Planning

1.4.1 Environmental health services must be adequately planned for at the strategic and implementation levels at the national, provincial, district and point-of-entry levels.

1.4.2 Plans referred to include the following:

a) A costed five-year environmental health service delivery plan.

b) An annual operational plan and the plan forms part of the municipal service delivery and budget implementation plan at the district level.

c) Municipal environmental health service delivery planning includes the point-of-entry environment.

1.4.3 Environmental health objectives form part of the municipal integrated development plans and annual performance plans at the entry-level points.

1.4.4 Municipal-integrated development plans must be integrated into district health plans.

1.4.5 In the case of points of entry, environmental health objectives must be part of the annual performance plan.

1.4.6 The following environmental health plans must in place and be inclusive of the point-of-entry environment, costed and implemented at the municipal level:

(a) A food safety monitoring plan.

(b) A health-related water quality monitoring plan, including a waterborne disease surveillance monitoring plan.

(c) A vector control monitoring plan specific for vectors of concern in the district.

(d) A chemical incidence response plan (may also form part of the district disaster management plans).

An environmental health pollution control plan.

(e) An environmental health surveillance plan implemented at the district and provincial levels and integrated within the point-of-entry, district, or provincial outbreak response plans.

(f) A community information, education and communication (IEC) intervention plan, costed and implemented at a district level.

(g) A climate change and health adaptation implementation plan , costed and implemented.

1.4.7 The plans referred to in subsection 1.4.6 may be integrated into a single environmental health services plan.

1.4.8 A costed hazardous substances control monitoring plan must in place at a provincial level.

1.4.9 The following environmental health plans must be in place, costed and implemented at the point-of-entry, in line with the International Health Regulations (IHR) 2005:

(a) A waste management monitoring plan.

A health-related water quality monitoring plan.

A vector control monitoring plan.

An indoor air quality monitoring plan.

A food safety monitoring plan.

A communications and coordination plan.

An integrated public health emergency contingency plan.

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1.4.10 The development of all plans must take into consideration other legislation and policy requirements, such as the IHR and the ideal clinic national programme and should be developed in consultation with all key relevant stakeholders.

1.4.11 Where environmental health is not directly responsible for the development of the plans, environmental health practitioners must monitor the implementation of these plans for the protection of public health.

1.4.12 The plans referred to in this section must be reviewed every five years or wherever necessary or as may be prescribed by other relevant legislation..

1.5 Management

The Systems must be in place to ensure management meets with operational staff to review performance at national, provincial, district and point-of-entry levels:

a) Monthly and quarterly review meetings are held at an operational/sub-district level.
b) Quarterly performance review meetings are held at district, provincial and regional levels.
c) Provincial environmental health forums are established, functional, and representative of relevant stakeholders and meetings are held every quarter.
d) The staff satisfaction survey is conducted annually, and the results are utilised for work environment improvements.

1.6 Human resources

1.6.1 Adequate human resources are employed to render environmental health services at all levels and ensure a proactive and effective preventative service.

1.6.2 An Environmental Health Unit or Directorate must be established at the national, provincial, and district levels to coordinate the rendering of environmental health services.

1.6.3 An approved environmental health/organisational structure must be in place at all levels where environmental health services are rendered, outlining management, operational and support staff.

1.6.4 Environmental health practitioners at the operational level must be directly managed by a qualified environmental health practitioner registered with the Health Professions Council of South Africa, and the practitioner must always be good standing.

1.6.5 One environmental health practitioner must be provided for every 10,000 members of the population (1:10,000).

1.6.7 The number of environmental health practitioners in government institutions such as health facilities and correctional service facilities must be adequate for the size and category of the establishment (number of beds). One environmental health practitioner may service more than one facility.

1.6.8 Environmental health practitioners based at the health facility level must be linked to an environmental health practitioner manager within a district or provincial health office for technical support.

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1.6.9 An adequate number of environmental health practitioners must be available in a province to provide environmental health functions assigned in terms of Chapter 25 of the NHA and other provincial environmental health functions.

1.6.10 The number of environmental health practitioners employed at a point of entry must be adequate for the volume and frequency of travellers, traffic, type, size, conveyances and layout of the point of entry.

1.6.11 Administrative support staff must be provided for every environmental health unit at every level.

1.7 Professional standards and staff identity

1.7.1 Environmental health staff must be easily identifiable to the public.

1.7.2 The Employer or the person in control of the premises must ensure that Staff are provided with:

a) Name tags to be easily identifiable by name and organisation.

b) Official apparel to be worn when providing services and interacting with the public.

1.7.3 The official apparel consists of formal and combat attire designed for male and female workers, considering the types of work conducted by environmental health practitioners.

1.8 Training and development

1.8.1 Environmental health staff must be periodically trained and developed on technical aspects linked with environmental health functions, and records thereof are kept and updated.

1.8.2 Staff development and capacity-building needs must be determined every two years.

1.8.3 Skills development plans must be compiled annually and submitted to management for consideration.

1.8.4 Training must be aligned with the Health Profession Council's Continued Professional Development (CPD) Programme.

1.8.5 An orientation programme must be in place for newly appointed staff at all levels.

1.9 Information management

Provinces and districts must report environmental health data in the national district health information system and:

a) National Health Information Management System Policy must be accessible and implemented.

b) District Health Information System (DHIS) registers must be available and utilised.

c) Standard operating procedures for data flow and management must be available and implemented.

d) Data capturers must be provided and trained on the guidelines.

e) Validated environmental health data must be captured into the system monthly and timeously.

f) District data must be analysed quarterly, and feedback must be provided to operational environmental health practitioners.

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g) Environmental health data collected at the points of entry must be submitted to the district for reporting on the national district health information system.

1.10 Record management

10.1 Environmental health records must be kept and maintained up to date at all levels.

10.2 A record management system must be in place and meets the following standards:

a) A standard operating procedure/guideline for capturing, filing, accessing, tracking,archiving,and disposing of records is in place at all levels.

b) Records are kept electronically and manually.

c) Records are backed up through a backup system.

d) Records align with the provisions of the National Archives and Records Service of South Africa Act 1996 (Act No. 43 of 1996).

1. 11 Compliance monitoring and enforcement

1.11.1 Environmental health practitioners must conduct law enforcement to handle matters of public non-compliance.

1.11.2 Environmental health practitioners are:

a) Appointed and/or designated as health officers in terms of Section 80 of the National Health Act 2003 (Act No. 61 of 2003), as amended, by the National Minister of Health, the Provincial Member of the Executive Committee or the Mayor of a Metropolitan or District Council to enforce the Act.

b) Trained and appointed as Peace Officers in terms of the Criminal Procedures Act 1977 (Act No. 51 of 1977).

1.11.3 The Director-General and the Provincial Head of Department of Health must ensure that environmental health legislation is accessible to all environmental health practitioners electronically and/or manually for use and reference purposes.

1.11.4 Staff must beare trained and capacitated to implement and enforce legislation.

1.11.5 There must be a legal support system orunit within the Municipality and Border Management Authority to support environmental health law enforcement.

1.11.6 The Required law enforcement documents must be in place (legal notice books, Section 56 notices) for utilisation by environmental health practitioners in cases of non-compliance.

1.11.7 A law enforcement coordinator must be nominated by the relevant authority to coordinate environmental health law enforcement matters.

1.11.8 Environmental Health Practitioners may be trained and appointed as Environmental Management Inspectors in terms of the National Environmental Management Act No. 107 of 1998, as amended, amongst others, to implement other environmental health-related legislation outside the portfolio of the Ministry of Health .

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1.12 Cooperative governance

Governance structures must be in place at national, provincial, district and point-of-entry levels to cooperate and collaborate with various stakeholders on environmental health through the following means:

a) Official working structures, arrangements, memoranda of understanding, and/or official mechanisms.
b) Trans-provincial, district boundary relations, and cross-border relations.
c) Sharing environmental health reports outlining compliance rates and areas requiring urgent attention with various relevant stakeholders.

SECTION 2:
ACCEPTABLE MONITORING STANDARDS FOR ENVIRONMENTAL HEALTH PRACTITIONERS

2.1 Monitoring standards for health surveillance of premises

2.1.1 Environmental health practitioners must conduct inspections periodically to monitor conditions that may constitute a health hazard or a nuisance.

2.1.2 Inspections of premises must adopt a risk management approach to ensure that interventions are directed at achieving maximum impact and resources are utilised where there is a greater need.

2.1.3 Premises must beRisk profiled and classified as high, medium or low risk.

2.1.4 Records of risk profiles should be kept and updated where necessary.

2.1.5 The following are recommended inspection frequencies for premises, however inspection frequencies are determined based on levels of risk.

Type of premises	Inspection frequency
a) Childcare centres	At least once every quarter (4)
b) Children's care centres: homes/orphanages	At least once every quarter (4)
c) Old age homes/homes for the aged	At least twice a year (2)
d) Schools	At least twice a year (2)
e) Accommodation establishments	At least twice a year (2)
f) Beauty salons/hairdo and tattoo parlours	At least once a year (1)
g) Public swimming pools and spa baths	At least twice a year (2)
h) Laundry establishments	At least once a year (1)
i) Health establishments (as per the definition in the National Health Act 2003 (Act No. 61 of 2003)	At least once a month (4)

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j) Funeral undertaker's premises/mortuaries/crematorium	At least once a quarter (4)
k) Places for keeping animals, e.g., poultry farms, kennels, catteries	At least once a year (1)
l) Food handling premises (risk-based approach)	at least once every quarter (4)
m) Public gathering places:	
(i) Stadia (ii) Religious gathering establishments (iii) Community halls (iv) Make-shift gathering establishments	As and when necessary and prior to, during and after major events
n) Offensive trades	At least twice a year (2)
o) Prisons/police stations holding cells	At least twice a year (2)
p) Vacant land	As and when necessary
q) Office accommodation	As and when necessary
r) Initiation schools	Once every initiation season
s) Aircrafts	On arrival
t) Ships	On arrival
u) Other point-of-entry conveyances	On arrival
v) Point-of-entry facility	At least once a month (12)
w) Hazardous substances dealers (Group 1, Category A and B and manufacturers, wholesalers and retailers that ONLY supply household detergents, disinfectants, cosmetics, industrial chemicals and paint).	At least twice a year (2)

2.1.6 Inspections must be conducted in a structured manner, and formal documentation should be utilised as follows:

a) Inspection checklists are designed and utilised to inspect premises.

b) Inspection report is issued to the premises owner or person in charge after every inspection, outlining inspection findings and recommendations or areas requiring action.

c) Compliance notices are issued where conditions exist that may pose a health hazard and risk, in line with Sections 82 and 83 of the National Health Act 2003 (Act No. 61 of 2003).

d) Databases of all premises are kept electronically and maintained for control purposes.

e) Databases referred to in paragraph (d) are consolidated at sub-district, district and provincial levels.

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f) Records of premises and all other relevant information are kept and maintained manually and/or electronically, including a record of compliance notices and legal actions.

g) Health education forms an integral part of all environmental health inspections.

2.2 Monitoring standards for food safety monitoring

2.2.1 The municipality is authorised, in terms of Section 23 (1) of the Foodstuffs, Cosmetics and Disinfectants Act 1972 (Act No. 54 of 1972), as amended, to enforce food control provisions of the Act.

2.2.2 Inspections must be conducted in accordance with the provisions of Regulations Relating to the Powers and Duties of Inspectors and Analysts conducting inspections and Analysis on Foodstuffs and at Food Premises, R328 of 20 April 2007 published in terms of the Foodstuffs, Cosmetics and Disinfectants Act 1972 (Act No. 54 of 1972), as amended.

2.2.3 Food samples are periodically conducted as follows, and records are kept:

a) Bacteriological food analysis is conducted at least once a quarter.

b) Chemical food analysis is conducted at least twice annually.

c) Historiological sampling is to be conducted where necessary.

2.2.4 Food-related public complaints must be investigated within 24 hours of receipt.

2.2.5 Food-borne outbreaks and or community incidences muste be investigated within 24 hours, and reports are sent to the province and national office. A record of outbreaks and incidences is kept.

2.2.6 Environmental health practitioners may provide food safety training to informal food handlers as and when needed, and records are kept.

2.2.7 An updated database for all the food premises (certified and uncertified) is kept, including all the food manufacturing plants/production facilities, including their risk rating.

2.3 Monitoring standards for vector control

2.3.1 Premises must be monitored for the breeding of vectors to prevent conditions that may contribute to disease transmission and spread.

2.3.2 Inspections referred to in 2.3.1 must be structured as follows:

(a) Rodent proofing inspections on premises are guided by requirements outlined in the SANS Code 080: 1972, Code of Practice for the Rodent Proofing of Premises.

(b) Inspection checklists are designed and utilised for every vector control-related inspection and the checklists highlight the analysis of risk areas.

(c) Documentation of premises must be verified, including:

Records of chemical applications and quantities.

(i) Records of the name of chemicals utilised, the active ingredients, and their poison category.

(ii) Qualifications and skills of pest controllers, all the people applying chemicals.

(iii) Records of any other vector/rodent control methods utilised other than chemicals.

(d) Inspection records are kept and maintained.

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2.4 Monitoring standards for environmental pollution control

2.4.1 Key potential environmental hazards, polluting agents, critical points, populations at risk and infection pathways must be identified and mapped at a district level, and information therefrom utilised to plan for environmental health interventions.

2.4.2 Environmental health data must be monitored to detect changes in the environment and related health outcomes, including:

a) Emission inventories (records of the permitted or actual level of emissions from specified sources).

b) Ventilation and indoor air quality assessment.

c) Exposures to hazardous substances, e.g., chemical spillages.

d) Health data of exposed populations, including infectious disease monitoring data; healthcare utilisation data (hospital admissions, primary care consultations); births, congenital anomalies, and related data; cancer registrations; and mortality statistics.

e) Environmental health-related public complaints are recorded/registered and investigated within 72 (seventy-two) hours of receipt.

2.4.3 Complaints regarded as urgent or pose an immediate danger to human health must be investigated within 24 hours of receipt.

2.4.4 Feedback on the outcome of every complaint investigated must be provided to a complainant within seven days of receiving the complaint.

2.5 Monitoring standards for conveyances and consignment in points of entry

2.5.1 Environmental health services are provided at a point of entry, and the following systems must be in place to ensure the protection of the public and travellers:

a) Conveyances and consignments are inspected on arrival at the point of entry.

b) Inspection checklists are designed and utilised for every inspection conducted.

c) Free pratique is granted for:

(i) A ship to enter a port, embark or disembark, discharge or load cargo or stores.

(ii) An aircraft to land, embark or disembark, discharge or load cargo or stores.

(iii) A ground transport vehicle upon arrival, embark or disembark, discharge or load cargo or store.

d) Inspection records are kept electronically and manually, including the outcome is recorded.

e) A port health official issues inspection reports outlining reasons for non-compliance to the importer/client/agent or conveyance operator for non-complying products or conveyances.

f) Health documentation from conveyance operators is monitored for availability and validity.

g) A register is kept of all conveyances and consignments inspected or granted free pratique.

h) Protocols for the application of health measures on conveyances and consignments are in place (i.e., disinfection, disinsection, decontamination).

i) All conveyances from yellow fever and malaria endemic areas are monitored to determine the implementation of vector control measures.

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j) All conveyances intentionally transporting a sick passenger are granted permission if all the requirements are met.
k) All conveyances intentionally transporting sick passengers are monitored, and a register is kept.
l) Inspections of conveyances for the purposes of issuing ship sanitation certificates are conducted.
m) High-risk products are sampled upon arrival and before release.
n) Adequate inspection equipment is available and utilised for the inspection of consignments and conveyances.
o) A database of conveyance operators and agents is kept and regularly updated.

2.6 Monitoring standards for preventing the importation and exportation of communicable diseases through points of entry

The following measures must be in place and implemented at the point of entry for communicable disease control:

a) Simulation exercises on the public health contingency plan are conducted at least once every 18 to 24 months.
b) Travellers from listed countries are monitored for yellow fever certification, which is in line with the yellow fever policy.
c) All arriving travellers are screened for any signs and symptoms consistent with communicable diseases.
d) Travellers screened and presenting with elevated temperature are referred to a health facility for further assessment, and records of such are kept.
e) Travellers placed under quarantine surveillance are monitored.
f) Records of all travellers placed under quarantine surveillance are kept and maintained.
g) All suspected cases of communicable disease are reported to the Provincial Communicable Diseases Control Coordination and International Health Regulations focal point.
h) A plan for the implementation of entry and exit controls for the prevention and early detection of sick travellers is available for points of entry.
i) Contact details of stakeholders involved in the notification, surveillance, detection and response to suspect cases are kept and regularly updated.

2.7 Monitoring standards for point-of-entry facilities

2.7.1 Routine inspections of point-of-entry facilities must be conducted to prevent, identify and respond to health risks that may be detrimental to public health:

(a) Waste management activities at the point of entry are monitored to ensure associated health risks are detected timeously, and control measures are implemented.
(b) Monitoring point-of-entry facilities to ensure vector control measures are implemented and inclusive of a 400 m perimeter.

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(c) Inspections of ablution facilities to ensure they are maintained in good condition and regularly cleaned.
(d) Water quality monitoring is implemented within the point-of-entry facility in line with health-related water quality monitoring standards.
(e) Inspection checklists are developed and utilised for all inspections conducted to guide and ensure complete assessment.
(f) Records of inspections, findings, and recommendations for all inspections conducted on waste are kept.
(g) After every inspection, inspection reports with recommendations are provided to the person in charge.
(h) Joint inspections with municipal environmental health practitioners, where required, are conducted, and records of such inspections and reports are kept.

2.8 Monitoring standards for waste management

2.8.1 Waste management activities must be monitored to prevent conditions that may constitute a health hazard in the district, as follows:

(a) Waste management practices are monitored at health facilities and by the general public to ensure acceptable waste minimisation methods, segregation, labelling, colour coding, packaging, collection, storage, transportation, treatment and disposal of waste are adopted.
(b) General and hazardous landfill sites are inspected at least twice per year.
(c) The landfill sites referred to in sub-section (2) are inspected during the commissioning and decommissioning stages in conjunction with relevant competent authorities.
(d) All required licences, waste management plans, waste information records and environmental impact assessment reports are analysed during audits.
(e) Building and site plans of premises generating business, industrial, and hazardous waste, including healthcare risk waste, are evaluated for conformance with relevant legislation specifying requirements for waste storage areas.
(f) The management of waste during events (festivals, sports, etc.) is monitored throughout the event.
(g) Records of inspections, findings, and recommendations for all inspections conducted on premises generating waste, particularly hazardous waste, are kept.
(h) Inspection reports with recommendations are provided to the person in charge of the premises after every inspection.
(i) Joint multidisciplinary inspections with relevant stakeholders are established and strengthened on premises with waste management challenges.
(j) Health facilities are audited twice a year on waste management practices.

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2.9 Monitoring standards for health-related water quality monitoring

2.9.1 Water must be sampled and analysed for its microbiological, physical, and chemical quality to protect public health as follows:-

(a) Domestic water is sampled routinely for bacteriological quality at a point-of-entry, with 120 samples to be taken for every 100,000 people in the population (every quarter).

(b) Domestic water is sampled at least once a year for the full SANS (chemical and microbiological) determinants.

(c) Recreational waters are sampled at least once every six months.

(d) Bottled water and refilled water is sampled at least once a quarter.

(e) Water is sampled monthly at the distribution points.

(f) Water-related disease surveillance is conducted at least monthly.

2.9.2 Analysis of drinking water samples for compliance auditing is conducted at SANAS-accredited laboratories, especially where legal action is expected to be taken for non-compliance.

2.9.3 Untreated water sources, rural water supplies and temporary water supplies are monitored as part of water quality monitoring.

2.9.4 Adequate water quality sampling equipment must be available as follows:

(a) For microbiological water sampling at point of use, including (lakes, streams, rivers and dams):

(i) Sterile sample bottles.

Sealed container or cooler box and ice to keep the samples cooled.

A map showing sampling locations or GPS coordinates must be included when gathering sampling equipment.

A gas burner.

Field notebook/data sheet(s).

Latex gloves are used to prevent hand contamination of samples.

(b) For microbiological sampling at the treatment works and reservoirs:

(i) Clean laboratory glass beaker or any well-cleaned container, large enough in volume for the probes of the instruments to be lowered in (at least 250 ml in volume).

Electrical conductivity meter.

PH field instrument.

Nephelometric turbidity meter (if required) or Secchi disk.

Temperature meter: electronic or field thermometer (if required).

Distilled water for cleaning the probes.

Field notebook/data sheet(s).

Instrument for free available chlorine measurements.

A map showing sampling locations and GPS coordinates must be included when gathering sampling equipment.

(c) For chemical sampling:

(i) Correct, clean sample bottles.

Cooler box with ice packs.

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A map showing sampling locations or GPS coordinates must be included when gathering sampling equipment.

Data sheet (s).

2.9.5 There must be water supplies at health facilities with additional building-specific water sources to augment the external supply, e.g., boreholes and/or temporary water storage tanks, are monitored/sampled at least once every quarter.

2.9.6 Communities without municipal water supplies must be educated on the dangers of untreated water supplies, the use or application of household emergency water treatment methods, safe storage of domestic water and health and hygiene practices at the point of use regularly – as part of the water quality monitoring plan.

2.9.7 Wastewater systems must be monitored as part of disease surveillance.

2.9.8 Diarrhoeal disease clinic records must be monitored for possible linkages to water supplies.

2.10 Monitoring standards for hazardous substances control

The Systems must be in place at the provincial level to monitor Group 1, Categories A and B hazardous substance dealers for the protection of public health, as follows:

(a) Environmental health practitioners are authorised as Inspectors in terms of the Hazardous Substances Act 1973 (Act No. 15 of 1973) to enforce the provisions of the Act.

(b) Inspections of Group 1, Category A and B hazardous substances dealers' premises are conducted at least twice a year.

(c) Inspection checklists are designed and utilised for all inspections conducted to guide and ensure complete assessment.

(d) An Inspection report indicating the conditions of the premises and the recommendations applicable is issued to the owner or person in charge after every inspection.

(e) Inspections of dealers' premises include the assessment of aspects such as ventilation, indoor air quality, lighting, moisture-proofing, thermal quality, storage, labelling, conditions of sale and structural safety.

(f) Records of stock, invoices, or other appropriate documents for substances imported or acquired are checked, verified, and signed off during every inspection.

(g) A database of hazardous substances dealers and premises (both registered and unregistered) is kept and maintained for monitoring and control purposes.

(h) Group 1 hazardous substances consignments are inspected by authorised environmental health practitioners at a point of entry and released only to Group 1 licenced premises.

(i) Health and safety education is integral to all environmental health compliance monitoring inspections.

(j) Multidisciplinary monitoring of problematic hazardous and chemical substance dealers is coordinated with all other relevant stakeholders, such as DEL, SAPS, and other relevant institutions, to ensure the comprehensive provision of services and effective law enforcement and compliance where necessary.

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(k) A monitoring system is in place to manage and ensure that all pesticide and chemical poisonings are investigated by an environmental health practitioner and reported on the pesticide/chemical incident report form.

(l) Records of all poisoning cases investigated are kept for reference purposes.

2.11 Monitoring standards for chemical safety management

The Systems must be in place to monitor chemical safety management, as follows:

(a) Inspection checklist of manufacturers, wholesalers and retailers that ONLY supplies household detergents, disinfectants, cosmetics and industrial chemicals are designed and utilised to ensure a complete assessment.

(b) A database of importers, manufacturers, wholesalers and retailers that ONLY supplies household detergents, disinfectants, cosmetics and industrial chemicals is kept and maintained for monitoring and control purposes.

(c) A database of importers, manufacturers, wholesalers and retailers that ONLY supply paints is kept and maintained.

(d) Sampling of cosmetics is conducted as and when the need arises.

(e) Resources for sampling packaged cosmetics are available as follows:

(i) Sample lid sealant.

Labelling stickers.

Sample storage containers are used to ensure appropriate sample temperatures per the manufacturer's instructions.

(f) A monitoring system is in place to manage and ensure that all pesticide and chemical poisonings are investigated by an environmental health practitioner and reported on the pesticide/chemical incident report form.

(g) All investigated chemical poisoning cases are captured on a database, and quarterly analysis reports with interventions are compiled and disseminated to relevant stakeholders.

(h) Joint law enforcement operations on the sale of cosmetics or chemicals containing illegal or banned substances are conducted at least once a year in conjunction with relevant stakeholders.

(i) Records (incident investigation report forms, databases and surveillance reports) of all poisoning cases investigated are kept for reference purposes.

(j) Community awareness and education campaigns on chemical safety issues (chemical poisoning, lead poisoning, household chemicals, pharmaceuticals, poisonous plants, mercury and other public health concerns) are conducted at least once per year in conjunction with the relevant stakeholders.

(k) International Lead Poisoning Prevention Week is observed in October of each year.

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2.12 Monitoring standards for surveillance and prevention of communicable diseases

2.12.1 An environmental health surveillance plan must be in place at all levels to monitor diseases circulating in the environment, such as cholera, typhoid and other notifiable medical conditions.

2.12.2 An information system must be in place to monitor data relating to environmental health and communicable diseases surveillance (clinical data, etc.), including monitoring of water quality trends (drinking, recreational, etc.).

2.12.3 Protocols must be in place for environmental health measures for epidemics, outbreaks, diseases and migration of populations.

2.12.4 Environmental health-related disease trends should be monitored, and information regarding the trends is kept for use.

2.12.5 Water-borne, vector-borne, and food-borne disease outbreaks and other health emergencies, such as chemical-related incidences, must be investigated in geographic locations based on the occurrence, and reports are kept.

2.13 Monitoring standards for climate change and health adaptation

2.13.1 The Systems must be in place to strengthen environmental health to address climate change for health adaptation, prevention, management and control:

(a) A heat and health guideline is in place and implemented.

(b) There is formalised collaboration with the South African Weather Services (SAWS) on an early warning system for a proactive response to climate change-associated challenges at the provincial level.

(c) There are structured collaborative mechanisms with relevant stakeholders to address climate change challenges in provinces and districts.

(d) Champions are coordinating the implementation of climate change and health adaptation strategic plans in provinces and districts.

2.14 Monitoring standards for malaria control

2.14.1 The provinces must implement a malaria control programme to lower parasite levels in the population and prevent deaths through rapid diagnosis and prompt treatment as follows:-

(a) A malaria surveillance programme is in place and implemented.

(b) House-to-house surveys are conducted to actively detect malaria cases.

(c) A programme is in place to conduct blood smears on foreigners and people who have visited malaria-endemic countries for malaria parasitaemia screening.

(d) Screen the population randomly by conducting blood sampling for testing during seasonal changes in high-risk malaria areas.

(e) Epidemiological surveys are conducted to research the extent of transmission and gather data on the infected population.

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(f) A vector control programme is in place to apply residual insecticides on inner wall surfaces, roofs, and dwelling eaves in malaria areas.
(g) Malaria health education and awareness programmes are conducted.
(h) Collaborative mechanisms are in place with SAWS on Early Warning Systems for planning purposes and possible movement of malaria vectors.

2.15 Non-compliance records

2.15.1 Records or data must be kept and maintained for:
(a) Compliance notices issued.
(b) Court cases and their outcomes are kept and maintained.
(c) Number of inspections and related adherence/compliance rates are kept.
(d) Environmental health-related complaints and the resolution rate.
(e) Rate of seizure of items/goods that pose a risk to human health.

SECTION 3:
APPLICABLE GENERAL PROVISIONS

3.1 Assessment of performance

3.1.1 The National Department of Health or any other external organisation acting on its behalf may assess points of entry, provinces, district and metropolitan municipalities, and any other entity rendering environmental health services for adherence to these norms and standards, and issue a a report to the accounting officers.

3.1.2 A quality improvement plan must be developed by points of entry, provinces, district and metropolitan municipalities, and any other entity rendering environmental health services to address identified gaps during assessments.

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CHAPTER 3:
NORMS AND STANDARDS FOR USE ON THE PREMISES

SECTION 1

STANDARDS FOR CHILDCARE CENTERS

1.1 Standards for childcare centres

Children and staff must be protected from any physical, chemical or biological hazards in the environment.

1.2 Structural facilities

Premises are of a location, design, construction, and finish must enables children to be cared for hygienically and safely, and:

(a) The yard where the children are kept is enclosed and access-controlled for the safety of children on the premises.

(b) Where children in wheelchairs are cared for, the premises have a ramp and rails to enable access.

(c) Spaces used for indoor and outdoor activities are constructed to provide maximum protection against permeation by wind, sunlight, rain, or other adverse environmental conditions.

(d) The indoor play area:

(ii) Provides at least 1 to 1.5 m^2 free of unobstructed floor space for each child to prevent any overcrowding of children, and is adequately ventilated and illuminated.

(iii) Floors and interior walls have a smooth surface that is easily cleanable and prevents the permeation of dampness.

(iv) The roof is dust proof.

(v) Equipment used indoors is free from structural hazards, such as sharp corners, stairs, protruding nails, rust, slippery surfaces, or any conditions that may pose a danger to children on the premises, including entrapment or strangulation.

(e) The outdoor play area is safe and free from hazards, and the play equipment is safe, free from sharp edges, loose nails, unstable structures, structural hazards, sharp corners, protruding nails or any condition that may constitute a hazard to the children.

1.3 Water, sanitation and hygiene

1.3.1 An adequate potable water supply must be available for cooking, drinking, cleaning, and maintaining hygiene standards on the premises.

1.3.2 Where water is temporarily stored for use, it must be stored in clean containers that are always protected from contamination by dust, animals, flies, and people. Narrow-opening containers are recommended.

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1.3.3 Toilet facilities must be provided and are appropriate for use by children, ventilated, illuminated, maintained in good working order and always kept clean:

(a) At least 1 (one) toilet is provided for every 20-30 children, not exceeding 30 children, and a constant supply of toilet paper is provided.

(b) Where ventilated pit toilets are utilised, they are positioned at least 200 m from any habitable facility in the premises and constructed to provide safety for children.

(c) Potties are provided for use only by children between 0-2 years, and at least 1 (one) potty is provided for every 5 (five) children.

(d) Excreta from potties are only emptied hygienically in a toilet facility and washed and disinfected properly.

(e) A clearly demarcated nappy changing area equipped with an easily cleanable surface and water-proof mattress is provided, and this area shall be located away from the food preparation area.

1.3.4 Handwashing facilities must be available to enable good hand hygiene practices:

(a) One (1) handwashing basin is for every 20-30 children, not exceeding 30 children, equipped with running water and a constant supply of soap.

(b) Portable handwashing stations or functional Tippy Tap/s are provided in low-cost settings where running water is not available.

(c) Handwashing facilities are positioned near the toilet facilities and in food preparation areas.

(d) Alcohol-based hand sanitisers are provided and used in case of water failures or interruptions.

1.3.5 Where possible and practical, separate toilet and handwashing facilities may be provided for the staff.

1.4 General health and safety measures

The following measures must be in place to protect the health and safety of the children on the premises:

(a) Water-proof mattresses or cots are provided for sleeping purposes and adequately spaced to enable free movement by caregivers to monitor the children.

(b) Children are protected from fires, burns, injuries, dangerous fumes, gases, poisonous substances, animals, offensive smells, choking and drowning hazards.

(c) Good housekeeping practices are always implemented, and adequate storage facilities are provided.

(d) The premises are kept clean and free from pests, vectors, long grass, debris, litter, stagnant water, redundant equipment and other miscellaneous waste or dangerous goods or articles.

(e) Waste bins are available for the disposal of waste, and equipment is kept clean.

(f) Where artificial grass surfaces are used in outdoor and indoor play areas, measures are taken to keep them clean and free from offensive odours and high surface temperatures.

(g) Where a sandpit is provided, measures are taken to ensure the hygienic maintenance of the sandpit.

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1.5 Medical care for children

1.5.1 Children who fall ill must be separated from other children, and a separate area must be provided for their isolation where possible.

1.5.2 The isolation area must be adequately ventilated and illuminated, and a caregiver must monitor the sick child.

1.5.3 Where a child is suspected of being infected with a communicable disease, the centre must immediately notify the parent, environmental health practitioner or nearest health facility.

1.5.4 Children suspected or diagnosed with an infectious or communicable disease must be closely monitored, and where possible, parents may be advised to temporarily exclude the child from attending childcare until the condition or the illness has been cleared.

1.5.5 Children's medical records must include basic medical information about a child (allergies, immunisation, etc.).

1.5.6 Emergency telephone numbers list shall be available and easily accessible on the premises, including the fire brigade, ambulance, outbreak response, clinic, hospital, doctor and police.

1.5.7 Adequate provision mu best made for disposable gloves and disinfectants to protect staff and children and to disinfect contaminated areas and surfaces when dealing with illnesses or injuries where blood or bodily fluids have been excreted.

1.5.8 All areas and surfaces where treatment of a child or caregiver for an illness or injury has taken place shall be disinfected immediately.

1.5.9 A basic first aid kit shall be kept on the premises, and caregivers should be trained in basic first aid.

1.5.10 Medicines, cleaning substances and any dangerous substances must be kept in locked spaces and kept out of reach of children.

1.6 Safe and hygienic preparation of food

1.6.1 A food preparation area must be provided on the premises where food is prepared and handled.

1.6.2 Facilities are available for hygienic preparation, refrigeration, and storage of foodstuffs.

1.6.3 Facilities for washing of hands and washing of equipment and utensils must be available all the times.

1.6.4 Floors and walls must have a smooth finish and are easily cleanable.

1.6.5 The area must always be kept clean.

SECTION 2
STANDARDS AND REQUIREMENTS FOR CHILDREN'S HOMES

2.1 Enclosure of the premises

Premises are of location, design, and constructed to ensure that children are cared for hygienically and safely and protected from any physical, chemical or biological hazards in the environment.

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2.2 Indoor and outdoor facilities

2.2.1 Adequate living and sleeping accommodations must be provided for children and staff members, and there is no overcrowding.

2.2.2 Outdoor areas must be free from physical hazards, excavations and other objects that may pose health and safety hazards.

2.3 Water, sanitation and hygiene facilities

2.3.1 An adequate potable water supply must be available for cooking, drinking, cleaning, and maintaining hygiene standards on the premises.

2.3.2 Where water is temporarily stored for use, it must be stored in clean containers that are always protected from contamination by dust, animals, flies, and people. Narrow-opening containers are recommended.

2.3.3 Toilet facilities must be provided and are appropriate for use by children, ventilated, illuminated, maintained in good working order and always kept clean.

2.3.4 At least 1 (one) toilet must be provided for every 20-30 children, not exceeding 30 children, and a constant supply of toilet paper is maintained.

2.3.5 Where Ventilated Pit toilets are utilised, they must be positioned at least 200 meters from any habitable facility in the premises and constructed to provide safety for children.

2.3.6 Potties must be provided for use only by children between 0-2 years, and at least 1 (one) potty must be provided for every 5 (five) children.

2.3.7 Excreta from potties must only be emptied hygienically in a toilet facility and washed and disinfected properly.

2.3.8 A clearly demarcated nappy changing area equipped with an easily cleanable surface and water-proof mattress must be provided, and this area shall be located away from the food preparation area.

2.3.9 Handwashing facilities must be available to enable good hand hygiene practices:

(a) One (1) handwashing basin is for every 20-30 children, not exceeding 30 children, equipped with running water and a constant supply of soap.

(b) Portable handwashing stations or functional Tippy Tap/s are provided in low-cost settings where running water is not available.

(c) Handwashing facilities are positioned near the toilet facilities and in the food preparation area.

(d) Alcohol-based hand sanitisers are provided and used in case of water failures or interruptions.

2.3.10 Where possible and practical, separate toilet and handwashing facilities may be provided for the staff.

2.4 Medical care for children

2.4.1 Measures must be taken to ensure that children on the premises have access to medical care when required.

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2.5 General health and safety measures

2.5.1 The following measures must be in place to protect the health and safety of the children on the premises:

(a) Water-proof mattresses or cots are provided for sleeping purposes, and adequately spaced to enable free movement by caregivers to monitor the children.

(b) Children are protected from fires, burns, injuries, dangerous fumes, gases, poisonous substances, animals, offensive smells, choking and drowning hazards.

(c) Good housekeeping practices are always implemented, and adequate storage facilities are provided.

(d) The premises are kept clean and free from pests, vectors, long grass, debris, litter, stagnant water, redundant equipment and other miscellaneous waste or dangerous goods or articles.

(e) Waste bins are available for the disposal of waste, and equipment is kept clean.

2.6 Safe and hygienic preparation of food

2.6.1 The premises must operate under a valid Certificate of Acceptability issued by the local authority to certify that the premises comply with the Regulations Governing General Hygiene Requirements for Food Premises, the Transport of Food, and related matters, R638 of 22 June 2018.

SECTION 3

MINIMUM STANDARDS FOR OLD AGE HOMES

3.1 Structural requirements

3.1.1 The location, design, construction, and finish of the premises must be in such a condition that they enable service users to be cared for safely and hygienically and protect the users from any physical, chemical, or biological hazards.

3.1.2 The building structures meet the following requirements:

(a) Walls are constructed of brick, stone, concrete or other impervious material, plastered and brought to a smooth finish, and covered with a light-coloured paint, adequate plastic finish or other approved material.

(b) Floors are constructed of concrete, hardwood or other durable materials and brought to a smooth finish.

(c) Ceilings are constructed so as not to attract dust, and in the case of operating theatres, labour wards, sterilising rooms and wash-up rooms, the ceiling must have a hard, smooth and washable surface.

(d) Rooms are adequately and individually ventilated; the design must allow for cross-ventilation.

(e) The rooms are adequately illuminated.

3.1.3 Suitable accommodation is provided for residence service users, which meets the requirements of adequate floor space for all users to prevent overcrowding. At least 7.5 m^2 of floor space must be provided for every in-house patient.

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3.1.4 For frail care patients, additional floor space must be provided to allow free movement within wards.

3.1.5 Separate residential accommodations must be provided for staff required to reside on the premises.

3.1.6 The accommodation referred to in 3.1.4) is:

(a) Kept clean and hygienic at all times, free from offensive odours or smells.

(b) The dining, lounge and posh areas are constructed to allow free movement of service users, especially for those with morbidity challenges.

(c) All floor surfaces must be equipped with a non-slip surface, and all carpets, mats and other loose coverings must be suitably and tightly secured to the floors and adequately illuminated.

3.2 Water, sanitation and hygiene facilities

3.2.1 Adequate and accessible toilet, bathing and wash-up facilities must be provided to meet the needs of service users.

3.2.2 At least one toilet facility, one bath and one handwash basin must be provided for not more than 20 service users, and at least one handwash basin is provided for not more than 20 service users.

3.2.3 Facilities referred to in clause 3.2.2 must be within close proximity of service user's private accommodation and where they are cared for.

3.2.4 Additional toilet facilities must be provided, accessible and clearly marked next to the lounge and dining areas for use by service users.

3.2.5 Additional toilet facilities must be maintained in good working order at all times and kept clean and hygienic.

3.2.6 Facilities referred to in clause 3.2.2 must be fitted with porcelain, enamel or cast-iron enamel baths with a constant supply of potable hot and cold running water.

3.2.7 Facilities referred to in clause 3.2.2 must be adequately illuminated and ventilated.

3.2.8 Facilities referred to in clause 2.2 must be separated by gender.

3.2.9 Facilities referred to in clause 2.2 must have floors covered with a non-slip, non-shining surface.

3.2.10 Adequate potable water supplies must be provided on the premises for drinking, washing, cooking and other uses.

3.2.11 Hygiene products, such as handwashing soaps and toilet paper, should be provided for use at all times by service users, staff and visitors.

3.3 Facilities for the provision of healthcare services on the premises

3.3.1 Where healthcare services are provided on the premises, the premises must meet the standards for health establishment with regard to examination rooms, sluice rooms, healthcare waste management, general hygiene and infection control measures.

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3.4 Infection control and safety measures

3.4.1 Measures must be taken to prevent and control the transmission of infections and communicable diseases on the premises.

3.4.2 All areas of the premises must be maintained in good condition, including the kitchen equipment, laundry machinery, outdoor steps, pathways and gardening equipment, to ensure a safe environment for the service users.

3.4.3 Emergency standby electrical equipment must be provided, which is adequate to provide an immediate alternative supply of electricity to any part of the old age home to ensure the continued operation throughout the failure of all electrically operated appliances and equipment, which are or may be lifesaving in the opinion of an environmental health practitioner of any relevant professional.

3.4.4 Appropriate first aid emergency equipment must be available on the premises at all times.

3.4.5 Measures must be in place to control the breeding of vectors or pests.

3.4.6 A laundry area must be provided for laundering contaminated linen or other soiled articles on the premises.

3.4.7 Separate linen rooms for storing dirty and clean linen, with separate and adequate cupboards or shelves for storing clean linen, must be provided on the premises.

3.4.8 Where an outside contractor is utilised for laundry purposes, it must be done in an approved laundry by a qualified or registered service provider, especially for laundering highly contaminated linen.

3.4.9 Adequate and separate storage facilities must be available for the storage of medicines and drugs, storage of poisons, habit-forming drugs and potentially dangerous drugs and for each resident's personal items

3.5 General hygiene measures

3.5.1 Measures must be taken to ensure hygienic conditions are maintained on the premises at all times.

3.5.2 Alcohol-based hand-rubs (60-70% alcohol content) must be made available to all staff and service users to utilise where water is not closely available.

3.5.3 Alcohol-based hand rubs must be provided on all entrances and exits of the premises for visitors to use when entering the premises to protect service users from outside germs.

3.5.4 The premises must always be kept clean and sanitary.

3.5.5 Solid and healthcare waste must be managed in accordance with relevant legislation.

3.6 Food safety standards

3.6.1 The premises are operated under a valid Certificate of Acceptability issued by the local authority to certify that the premises comply with the Regulations Governing General Hygiene Requirements for Food Premises, the Transport of Food, and related matters, R638 of 22 June 2018.

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SECTION 4
STANDARDS AND REQUIREMENTS FOR SCHOOL PREMISES

4.1 Structural and physical facilities

4.1.1 The building structure should pose no hazard or risk to the children and staff on the premises and protects them against physical, chemical or biological hazards in the environment.

4.1.2 The premises must be enclosed with an adequate means of enclosure and provided with a gate to protect learners on the premises, and an entrance and exit are provided to control unauthorised entry to the school premises.

4.1.2 Adequate floor space must be provided for each child to prevent overcrowding and to prevent the easy spread of communicable diseases among learners.

4.1.3 Walls and roofs must be free of cracks, floors and walls are plastered, brought to a smooth finish, rendered easily cleanable, and ceilings are constructed to not attract dust.

4.1.4 Classrooms should be adequately illuminated and ventilated using natural or artificial ventilation.

4.2 Water, sanitation and hygiene facilities

4.2.1 An adequate supply of potable water must be provided on the premises for domestic use.

4.2.2 Where temporary storage tanks are utilised for water supply, an adequate supply of water must be available for all purposes (drinking, personal hygiene, cleaning and cooking) and protected from contamination.

4.2.3 Sanitation and handwash facilities that meet the needs of learners and staff members must be provided.

4.2.4 At least one toilet facility and one handwash basin is provided for every 25 learners on the premises, and one urinal for every 50 boys, and provided with a constant supply of toilet paper.

4.2.5 Hand wash basins are located in close proximity to toilet facilities and equipped with soap and running water.

4.2.6 Separate toilets and wash-up facilities are provided for use by staff members.

4.2.7 Toilet facilities must be kept in good working order and are kept clean and sanitary at all times.

4.2.8 Toilet facilities must be designated by gender, and facilities for girls must be provided with facilities for menstrual management and containers made of a durable and impervious material equipped with a close-fitting lid are provided.

4.2.9 Toilet facilities must be properly illuminated and ventilated.

4.2.10 Facilities must be accessible to staff and children with disabilities.

4.2.11 Toilets must provide privacy and security for children and staff.

4.2.12 Facilities must be kept operational and unlocked at all times during school hours,only toilets that are out of order must be locked, and a sign must be placed outside to indicate such.

4.2.13 A cleaning schedule and maintenance plan must be in place for the cleaning and maintenance of facilities.

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4.3 Non-waterborne sanitation technologies

4.3.1 Where non-waterborne toilets are utilised:-

(a) Ventilated pit toilets or other approved technologies must be used.

(b) Floors of the pit toilets should be constructed of concrete to provide a safe floor surface.

(c) Toilets used for smaller children must be of reduced pot size and height, and young children must always be supervised when using pit toilets.

(d) Doors to pit toilets must be openable from the outside.

(e) The toilets must be maintained in good order and cleaned regularly to prevent smells and flies from entering and exiting the toilet facilities.

4.4 Washroom facilities for boarders/residential learners and staff

4.4.1 Where boarding accommodation is provided, facilities for bathing and showering must be provided for residential students and staff on the premises:

4.4.2 Water closets and/or hand wash basins, bathtubs and/or showers are provided and easily accessible from the sleeping accommodation.

4.4.3 At leastone bath or shower must be provided for every 20 learners or staff members on the premises at a ratio 1:20, and or at leastone shower is available for every 20 learners or staff members.

4.4.4 Separate facilities must be provided for staff.

4.4.5 A supply of cold and hot running water is maintained in the washrooms.

4.5 Accommodation for learners and staff members in boarding schools

4.5.1 Adequate sleeping, living and accommodation facilities must be provided for boarders with adequate ventilation and lighting.

4.5.2 Separate sleeping accommodation must be provided for male and female learners, as well as staff.

4.5.3 Adequate space shall be provided for sleeping purposes, with no overcrowding.

4.5.4 Sleeping accommodation must be kept clean and in good repair.

4.5.6 Adequate storage facilities must be provided for the storage of equipment, personal belongings of residential learners and staff, and other consumables.

4.6 Medical care for learners

4.6.1 Adequate, timely and appropriate medical attention is accessible for learners requiring medical care.

4.6.2 An adequate and equipped room must be provided to isolate a learner/s who falls ill and/or is suspected to be infected with a communicable disease.

4.6.3 The area referred to in cluse 4.6.2 must be provided or equipped with a hand wash basin and a supply of running water.

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4.6.4 An approved, lockable and adequately equipped first aid kit must be available to treat minor injuries or illnesses.

4.6.5 The medical room must be equipped with a bed or water-proof mattress.

5.6.6 Proper supervision must always be provided for a learner placed in the room.

4.6.7 For any learner who becomes ill and is suspected of being infected with a communicable disease, an environmental health practitioner of the relevant municipality or local health facility must be notified; a telephone must be readily available for such a purpose or to summon medical assistance where necessary.

4.6.8 A list of emergency telephone numbers, which must include fire brigade, ambulance, outbreak response, clinic, hospital, doctor and police, must be available and easily accessible on the premises.

4.6.9 Adequate provision must be made for disposlof gloves and disinfectants to protect staff and children and to disinfect contaminated areas and surfaces when dealing with bodily fluids or blood-related illnesses or injuries.

4.7 General health and safety measures

4.7.1 The following health and safety measures must be taken in relation to learners on the premises:

(a) Learners are protected from fires, burns, injuries, dangerous fumes, gases, poisonous substances, animals, offensive smells, choking and drowning hazards.

(b) Good housekeeping practices are always implemented, and adequate storage facilities are provided.

(c) The premises are kept clean and free from pests, vectors, long grass, debris, litter, stagnant water, redundant equipment and other miscellaneous waste or dangerous goods or articles.

(d) Waste bins are available for the disposal of waste, and equipment is kept clean.

4.8 Food safety standards

4.8.1 The premises must be operated under a valid Certificate of Acceptability issued by the local authority to certify that the premises comply with the Regulations Governing General Hygiene Requirements for Food Premises, the Transport of Food, and related matters, R638 of 22 June 2018.

4.9 Standards and requirements for accommodation establishments

4.9.1 Guests and staff must be protected from any physical, chemical or biological hazards in the environment through the following measures:

4.10 Water, sanitation and hygiene

4.10.1 Water supply, toilet and wash-up facilities are available to meet guests' needs.

4.10.2 An adequate hot and cold potable running water supply is provided for all uses.

4.10.3 Baths and or showers are provided and suitably placed in each room, or they are otherwise easily accessible and designated by gender.

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4.10.4 Suitable and effective means of drainage and sewage disposal connected to the municipal sewer must be in place.

4.10.5 A waterborne sewage system connected to the municipal sewer, a septic tank or other approved disposal system must be available for sewage disposal in compliance with the local authority's relevant by-laws.

4.10.6 Drainages and sewage disposal systems or private sewage disposal systems are maintained in proper operating condition, free from defects, and comply with relevant by-laws of a specific local authority.

4.10.7 Toilet and handwashing facilities are available for guests to use.

4.10.8 Separate toilet and handwashing facilities are available for staff and visitors.

4.10.9 An adequate supply of toilet paper and handwashing soap is maintained for use by guests, staff and visitors.

4.10.10 All sanitary, ablution and water supply fittings must always be kept clean and in good working order.

4.10.11 A container made of a durable and impervious material, equipped with a close-fitting lid, should be provided in every toilet used by female persons for the disposal of sanitary towels.

4.11 Swimming pools and hot baths

4.11.1 Where swimming pools/hot baths facilities are provided, frequent monitoring of the quality of the swimming pool water, with regard to microbiological and chemical parameters, is in place to ensure the safety of guests, which include:

(a) The pH of swimming pool water is controlled to ensure efficient disinfection and coagulation, to avoid damage to the pool fabric and to ensure user comfort, the pH is maintained between 7.2 and 7.8 for chlorine disinfectants and between 7.2 and 8.0 for bromine-based and other non-chlorine processes.

(b) Heterotrophic plate counts of E. coli, Pseudomonas aeruginosa, and Legionella spp are taken.

(c) Children shall be accompanied by an adult at all times when utilising the facilities.

4.12 General hygiene and safety requirements

4.12.1 The premises and any other facility used in connection with the operation of an accommodation establishment are kept in a clean and sanitary condition at all times.

4.12.2 Sleeping beds, pillows, and other sleeping facilities must be maintained in a clean and sanitary condition at all times and are free from dust mites.

4.12.3 Sheets, towels and pillowcases provided must be laundered before each new guest or at least once weekly for long-term guests.

4.12.4 A laundry facility must be available on the premises, equipped with facilities for washing, drying, and ironing linen and other materials; otherwise, the facility has access to an external contracted laundering service.

4.12.5 Separate storage facilities must be provided for clean and soiled laundry storage.

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4.12.6 The premises and all equipment used in connection with the operation of the facility must be maintained in a clean and sanitary condition at all times.

4.12.7 Measures must be in place to prevent and control the breeding of rodents or pests on the premises.

4.12.8 An adequate number of refuse bags and or refuse bins with close-fitting lids must be provided for the collection of waste from the premises.

4.12.9 All the refuse bags must be collected, stored, and disposed of in an environmentally acceptable manner that is in line with the relevant by-laws of the local authority concerned.

4.12.10 Fire protection equipment, approved by the relevant authority of the local authority concerned, must be in place and complies with the relevant by-laws.

4.12.11 Adequate changing facilities must be made available and provided to non-resident employees, and individual lockers should be provided for the storage of each staff member's personal belongings.

4.13 Food safety standards

4.13.1 The premises are operated under a valid Certificate of Acceptability issued by the local authority to certify that the premises comply with the Regulations Governing General Hygiene Requirements for Food Premises, the Transport of Food, and related matters, R638 of 22 June 2018.

SECTION 5
STANDARDS AND REQUIREMENTS FOR BEAUTY PARLOURS

5.1 Structural and physical facilities

5.1.1 Customers, visitors and staff must be protected from any physical, chemical or biological hazards in the environment through the following measures.

5.1.2 The premises must be adequately ventilated and illuminated.

5.1.3 Toilet and handwashing facilities must be provided for staff and clients, and the facilities must be equipped with a constant supply of running water and soap.

5.1.4 Toilet facilities must be designated by gender, and the toilets for female persons must provide for effective menstrual management.

5.1.5 Suitable and effective means of drainage and sewage disposal connected to the municipal sewer must be in place and approved by the local authority.

5.1.5 A waterborne sewage system connected to the municipal sewer, a septic tank or other approved disposal system must be utilised for sewage disposal in compliance with the local authority's relevant by-laws.

5.1.6 Drainages and sewage disposal systems or private sewage disposal systems must be maintained in proper operating condition, free from defects, and comply with relevant by-laws of the specific local authority.

5.1.7 Adequate wash-up facilities with constant hot and cold running water must be provided for hair washing.

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5.1.8 Where five or more persons of the same gender are employed on the premises, adequate, separate change facilities must be provided to store personal belongings.

5.1.9 All working surfaces, including shelves, fixtures and tabletops, must be constructed of a durable, non-absorbent and easily cleanable material.

5.1.10 Adequate storage facilities must be provided for the storage of articles in connection with the services provided.

5.2 Waste management

5.2.1 Measures are in place to ensure that the collection, storage, disposal and management of waste on the premises complies with relevant legislation.

5.2.2 All sharp instruments and bloodied instruments must be regarded as infectious waste and are disposed of accordingly, including razors, blades, needles and other sharp instruments.

5.2.3 Approved methods of waste collection, storage, transportation and disposal must be adopted for the management of waste, and any sharps and blood-contaminated products shall be regarded as infectious waste and must be handled in line with the SANS 10248.

5.2.4 An approved first aid kit shall be available on the premises at all times for the treatment of minor injuries, which should be equipped with the following:

(a) Adhesive bandages.
(b) Sterile gauzes.
(c) Medical tape.
(d) Scissors.
(e) Liquid soap.
(f) First aid instruction book.
(g) Disposable gloves.

5.2.5 Containers used for the storage of waste must be equipped with close-fitting lids.

5.2.6 Employees must be trained in the handling of infectious waste.

5.2.7 Sharps must not disposed of with general waste, and measures shall be taken to ensure that a registered service provider removes the sharps from the premises.

5.3 Use of ultra-violet radiation for tanning

5.3.1 Where ultra-violet radiation equipment is used on the premises, the following requirements shall apply:

(a) Persons under the age of 18 are not allowed to use, operate, or be in contact with any operations of the sun bed business on the premises.

(b) Users of sunbeds are provided with all relevant health information in relation to the use of sunbeds, which are placed in a conspicuous place on the premises for easy access by the users.

(c) Adequate protective eyewear is available for use by the users at all times during tanning, and if not disposable, the eyewear is cleaned and disinfected after each use.

(d) Records must be kept of the following:

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(e) Clients who used the services, including contact details and residential addresses.

(f) Incidence reports, including the effects experienced by clients during sunbed usage.

(g) Maintenance, service and inspection monitoring reports should all be kept for a period of at least 3 (three) years before discarding.

5.4 Use of dyes, pigments, stencils and tattoo procedures

5.4.1 Measures must be in place to ensure that sound management practices are applied in the use of materials and equipment for tattooing:

(a) All dyes and pigments manufactured for the purpose of tattooing are used according to the manufacturer's specifications.
(b) Non-toxic materials are used to prepare dyes or pigments.
(c) Single-use, sterile, individual containers for dyes or pigments are used for each patron.
(d) The stencil, unless composed of acetate, should be used for a single tattoo procedure only. Acetate stencils may be disinfected and reused.
(e) Tattooing is done in such a manner as to prevent the transmission of communicable diseases from client to client and from artist to client.

5.4.2 The following minimum standards are maintained:

(a) The area of the body is to be tattooed, and all visible parts of the body are examined for signs of intravenous drug use, open sores, lesions, oozing wounds and skin diseases. If such are found or suspected, the person should not be tattooed.
(b) A tattoo artist wears water-proof and clean aprons at all times during tattooing. If the apron is contaminated with blood, the apron is changed between clients and washed.
(c) Storage facilities are provided for all instruments, dyes, pigments, stencils and other equipment used in tattooing. When not in use, equipment, especially sharps, shall be stored in an orderly manner within the facilities provided.
(d) Equipment used for tattooing and body piercing and the clippers are sterilised accordingly, utilising approved sterilisation methods.
(e) Good sanitary and hygiene practices are always applied.

5.5 General hygiene requirements

5.5.1 Measures must be taken to ensure that general hygiene is maintained on the premises.

5.5.2 An approved system for wastewater disposal must be in place on the premises.

5.5.3 The change rooms provided must have an individual locker for every employee, a hand wash basin with hot and cold running potable water, and an adequate supply of soap and disposable towels.

5.5.4 The salon premises must not used for food preparation or for sleeping unless a separate food preparation area is provided for such different purposes.

5.5.5 The premises and all equipment used in connection must be maintained in good, clean and sanitary condition at all times.

5.5.6 Employees on the premises must be equipped with adequate protective clothing, water-proof aprons, gloves and masks are utilised where necessary.

5.5.7 Animals are not permitted on the premises unless in the case of a guide dog.

5.5.8 Instruments used in the salon must be kept clean and disinfected after each use.

5.5.9 All instruments that come into contact with blood must be sterilised after each use.

5.5.10 Plastic, cloth towels, aprons and caps must be washed daily and after each use.

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5.5.11 Disposable gloves and wipes must be disposed of after each use.

5.5.12 Adequate numbers of towels must be provided for various uses associated with the running of the business and must be kept clean.

5.5.13 Laundry facilities for washing all linen and towels must be provided on the premises.

5.5.13 If beverages are provided on the premises, a separate area must be provided, equipped with a facility for cleaning crockery and utensils.

SECTION 6
STANDARDS AND REQUIREMENTS FOR PUBLIC SWIMMING POOLS AND SPA BATHS

6.1 Structural and physical facilities

6.1.1 All structural and physical facilities of a public swimming pool must be designed to ensure the health and safety of users.

6.1.2 The surface of the floor area surrounding the spa bath or swimming pool must be constructed of an approved, impervious, non-slip material.

6.1.3 Toilet facilities (flush water closets and urinals) and showers must be provided, and separate toilets and showers must be provided for male and female persons.

6.1.4 Toilet facilities must be accessible to disabled persons.

6.1.5 At least one water closet must be provided for every 50 people and one urinal for every 50 male swimmers expected at the time of full capacity.

6.1.6 At leastone shower must be provided for every 20 swimmers on the premises.

6.1.7 Floors, walls, and ceilings in the toilet and shower facilities must be constructed of an approved material which are not adversely affected by steam or water.

6.1.8 Toilet and shower facilities must be properly ventilated in accordance with the National Building Regulations to prevent the existence of odour nuisances.

6.1.9 Toilet and shower facilities must be kept clean and sanitary at all times.

6.1.10 The floors of toilets and shower rooms must be constructed of a non-slippery finish, which is impervious to moisture and easily cleanable.

6.1.11 Readily accessible change rooms must be provided for the convenience of users and must be separated for each gender.

6.1.12 Water used to fill swimming pools or to keep the level of the pool or spa baths must be from a treated water source.

6.2 Water quality

6.2.1 The bacteriological, physical and chemical quality of the swimming pool water must be safe for human use and does not pose any health risk to users.

6.2.2 The spa bath or swimming pool must be frequently monitored for turbidity, residual disinfectant and pH values.

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6.2.3 The pH of swimming pool water must be controlled to ensure efficient disinfection and coagulation, to avoid damage to the pool fabric and to ensure user comfort.

6.2.4 The pH must be maintained between 7.2 and 7.8 for chlorine disinfectants and between 7.2 and 8.0 for bromine-based and other non-chlorine processes:

(a) Where chlorine-based disinfectants are used, a minimum free available chlorine residual of 0.5 mg/l, with a maximum free available chlorine residual of 3 mg/l, is maintained;

(b) A high disinfectant concentration shall be maintained in hot tubs, and free chlorine should always be at least 1 mg/1 litre.

6.2.5 Measures must be taken to ensure that chlorate levels do not build up in stored hypochlorite disinfectants, therefore, exposure levelsmust be minimised with frequent dilution of pool water with fresh water.

6.2.6 The total viable bacteriological count of any sample submitted for analysis must not exceed 100 organisms per ml of water.

6.2.7 Heterotrophic plate count of *E. coli*, thermotolerant coliforms, *Pseudomonas aeruginosa* and *Legionella* spp must be monitored on a three-monthly basis.

6.2.8 *Escherichia coli* type 1 bacteria may not be detected in any 100 ml of spa bath or swimming pool water.

6.2.9 Surfaces are physically cleaned to control the growth of *Legionella* in hot tubs and natural spas.

6.3 Duties of public swimming pool and hot tub operators

6.3.1 A water safety plan must be in place and implemented, which consists of a description of the system, its monitoring and maintenance, normal operating procedures, a set of procedures for specified incidents, an emergency evacuation procedure and a generic emergency plan.

6.3.2 Swimming pool and spa bath operators shall ensure that a programme is implemented to verify control measures, including checking and adjusting residual disinfectant levels and pH (several times a day) and inspection and maintenance of cleaning operations (daily to weekly). Where microbial testing for *Legionella* is undertaken, ensure that *Legionella* levels are <1/100 ml.

6.3.3 Swimming pool water must be sampled/monitored for microbiological quality as follows per the following recommended frequencies:

Pool type	**Heterotrophic plate count**	***E. coli***	***Pseudomonas aeruginosa***	***Legionella* spp**
Disinfectant public swimming pools	Weekly	Weekly	As and when necessary	Quarterly
Disinfectant pools – semi-public	Monthly	Monthly	As and when necessary	Quarterly
Natural spas	n/a	Weekly	Weekly	Monthly
Hot tubs	n/a	Weekly	Weekly	Monthly

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6.3.4 Sampling frequency must be increased if operational parameters (i.e., turbidity, pH, residual disinfectant concentration) are not maintained within target ranges.

6.3.5 Sample numbers are determined based on pool size and complexity and include point(s) representative of general water quality and likely problem areas.

6.3.6 The sewer line serving the backwash for the filter shall be 1-1½ times the size of the backwash line or provide a containment vessel capable of holding a minimum offive minutes' volume of backwash water at the backwash design rate:

(a) Constant water circulation in the hot tub is done, and programming 'rest periods' during hot tub operation is done to discourage excessive use and allow disinfectant levels to 'recover'.

(b) Filters, including backwash filters, are cleaned frequently.

(c) Swimming pool surroundings are kept clean at all times.

(d) Hot tubs are completely drained and thoroughly cleaned at least weekly.

(e) Heating, ventilation and air-conditioning systems serving the room/s in which hot tubs are located are maintained and physically cleaned monthly.

(f) Sand filters are inspected quarterly.

(g) Features such as water sprays, etc., in pool facilities are periodically cleaned and flushed with a level of disinfectant adequate to eliminate *Legionella* spp (using a solution of at least 5 mg of hypochlorite per litre).

(h) There must be no direct physical connection between the sewer system and any drain from the swimming pool or reticulation system.

(i) Any swimming pool or gutter drain overflow from the recirculation system when discharged to the sewer system is connected through a suitable air gap so as to preclude the possibility of backflowing sewage or waste into the swimming pool piping system.

6.3.7 The facility and its surroundings must be kept clean and sanitary at all times.

6.3.8 The pool must be kept clean at all times to remove biofilms from surfaces, sediments from the pool floor, and particulates absorbed to filter material, and it shall not pose a health risk to the users.

6.3.9 In the case of an accidental faecal release or vomit, the operator shall ensure that:

(a) The facility is closed for use, all bathers are removed, and contaminants are removed and inactivated.

(b) The water chemistry is checked.

(c) If disinfection levels are within the required parameters, the pool remains closed for at least 60 minutes and then re-opened.

(d) If disinfection levels are not within the required parameters, the pool is closed, and disinfection levels are restored. The facility may re-open 60 minutes after acceptable disinfectant levels have been attained.

(e) If faeces are in the form of diarrhoea, the pool is closed for 24 hours. Remedial action is taken to remove the contaminants, disinfect the facility and attain acceptable quality standards before re-opening the facility.

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6.3.10 A properly maintained, approved and fully resourced first aid box is kept on the premises for the treatment of minor injuries.

6.3.11 A qualified and proficient life saver/s is available on the premises and is competent in life-saving, first aid, and the operation of the swimming pool.

6.4 Food safety standards

The premises are operated under a valid Certificate of Acceptability issued by the local authority to certify that the premises comply with the Regulations Governing General Hygiene Requirements for Food Premises, the Transport of Food, and related matters, R638 of 22 June 2018.

SECTION 7
STANDARDS AND REQUIREMENTS FOR HEALTH ESTABLISHMENTS

7.1 Structural facilities

7.1.1 The internal physical structure in clinical wards, kitchens, and bathrooms must be constructed to enable and facilitate easy cleaning.

7.1.2 Internal walls must be constructed of an impervious material brought to a smooth finish, are easily cleanable, and are painted with light-coloured paint.

7.1.3 Ceilings must be constructed of dust-proof material, are smoothly finished, and are painted with light-coloured washable paint.

7.1.4 Floor surfaces must be constructed of impervious material, brought to a smooth finish and properly drained.

7.2 Water, sanitation and hygiene

7.2.1 An improved water supply piped into the facility must be available.

7.2.2 Adequate and potable water must be available on the premises in sufficient quantities for all uses.

7.2.3 A risk management plan must be in place when a health establishment has additional building-specific water sources to augment the external supply or specific purposes that increase potential risk.

7.2.4 Water supply must continuously be tested for fitness of consumption, and where on-site water storage facilities are utilised, the storage capacity shall be sufficient for two days.

7.2.5 Water storage facilities, e.g., reservoirs and tanks, must adequately be protected from contamination.

7.2.6 Designated health facility staff shall continuously monitor the water in reservoirs and tanks for fitness for use.

7.2.7 The water in the storage facilities must be tested for compliance and fitness for consumption.

7.2.8 If a borehole is the main water source, it must be effectively protected from contamination by humans, animals and other environmental factors.

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7.2.9 To prevent organisms that grow in temperatures between 25°C and 50°C, e.g., *Legionella* spp, hot water temperatures must especially be kept above 50°C and cold water below 20 °C.

7.2.10 Taps and pipes containing water unsuitable for human consumption must be clearly marked.

7.2.11 Water quality records must be kept and made available to an environmental health practitioner on request.

7.2.12 Where temporary water storage tanks are provided for potable water storage, such tanks must be constructed of an approved material, rust-free, durable, fit for purpose, protected from contamination and kept clean at all times.

7.2.13 Adequate toilet and ablution facilities must be provided on the premises that meet the needs of patients, staff and visitors:

(a) At least one functioning toilet facility and one handwash basin is provided for not more than 20 in-patients.

(b) At least one functioning toilet facility and onehandwash basin is provided for not more than every 50 visitors.

(c) Separate toilet and hand washing facilities must be provided for staff members.

(d) At least one bath or shower is provided for every 40 patients.

(e) Staff required to sleep on the premises must be provided with adequate wash-up facilities, including a shower or bath.

(f) Toilet and bathing facilities referred to in paragraphs (a-e) must be designated by gender.

(g) Toilet facilities for female persons must be provided with the means to manage menstrual hygiene needs.

(h) Toilet facilities must meet the needs of people with reduced mobility.

(i) All facilities must adequately be ventilated and illuminated.

(j) A drainage system must be in place, and approved measuresmust be utilised for the removal of wastewater.

(k) An adequate supply of toilet paper, liquid soap and or alcohol-based hand rubs must be maintained at every wash hand basin in the facility.

7.3 Reception of dead bodies on the premises

7.3.1 Facilities used in connection with the handling, preparation, storage and transportation of dead bodies on the premises must be operated under a Certificate of Competence issued by an environmental health practitioner of the relevant municipality to certify that the premises comply with the Regulations relating to the Management of Human Remains, R363 of 22 May 2013, published in terms of the National Health Act 2003 (Act No. 61 of 2003).

7.4 Food safety standards

7.4.1 The premises must be operated under a valid Certificate of Acceptability issued by the local authority to certify that the premises comply with the Regulations Governing General Hygiene Requirements for Food Premises, the Transport of Food, and related matters, R638 of 22 June 2018.

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7Waste management

7.5.1 The management of healthcare risk waste must be in line with the SANS:10248.

7.5.2 Waste must be correctly segregated at all waste generation points.

7.5.3 Functional waste collection containers for general waste, infectious waste and sharps must be provided in close proximity to all waste generation points.

7.5.4 Effective means must be in place for the proper disposal of healthcare risk waste.

7.5.5 A protocol or standard operating procedure must be in place for the safe management of healthcare waste.

7.5.6 Only licenced waste management contractors must be contracted to render treatment and disposal of healthcare waste in a health establishment.

7.5.7 Contractual requirements between the health establishment and the waste management contractor include, but are not limited to:

(a) The specification or description of the types (categories) and volume of healthcare risk waste to be collected for treatment or disposal (or both).

(b) Where relevant, the treatment or disposal process is to be used, taking into account any special requirements.

(c) A method to account for the number of different healthcare risk waste units collected by the appointed waste management contractor.

(d) The verification of the physical condition of the healthcare risk waste packages received.

(e) The responsibility to sort, count and collect the healthcare risk waste packages.

(f) A timed collection schedule is designed to ensure the waste is timeously collected and transported.

(g) The personal and environmental health and safety measures to be implemented, including immunisation, personal protective equipment and management of spillage measures to be used for infection risks and other hazards associated with the waste.

(h) The transitional arrangements during mobilisation and termination of services, including interfaces with the current appointed waste management contractor and the succeeding appointed waste management contractor.

(i) The acceptable behaviour of personnel when collecting the waste at the health establishment.

(j) The reporting requirements, including the parameters, format and frequency.

(k) Emergency backup response measures in terms of service delivery challenges.

7.6 Classification of healthcare risk waste

7.6.1 All healthcare waste must be classified in accordance with the hazard and risk involved as per SANS 10234, Globally Harmonised System of Classification and Labelling of Chemicals.

7.6.2 Healthcare waste must be segregated correctly at the point of generation, containerised, and the correct liners must be used.

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7.6.3 Containers must be labelled with colour codes and the international biohazard symbol for healthcare risk waste as prescribed in the SANS 10248-1, Management of Healthcare Waste, Part 1: Management of healthcare risk waste from a healthcare facility.

7.7 Packaging of healthcare risk waste (HCRW)

7.7.1 The packaging of healthcare risk waste, infectious waste pathological (excluding sharps), sharps, and chemical waste must be as prescribed in the SANS 10248-1, Management of Healthcare Waste, Part 1: Management of healthcare risk waste from a healthcare facility.

7.7.2 Healthcare facilities and healthcare providers in rural and remote settings may use alternative measures as prescribed in the SANS 10248-2, Management of Healthcare Waste, Part 2: Management of healthcare risk waste for healthcare facilities and healthcare providers in rural and remote settings, for the packaging of infectious healthcare risk waste, anatomical waste and sharps in case of emergency situations when there is a delay in the delivery of correct containers or bags.

7.7.3 Healthcare providers travelling to rural areas must be provided with healthcare waste containers as prescribed in the SANS 10248-2, Management of Healthcare Waste, Part 2: Management of healthcare risk waste for healthcare facilities and healthcare providers in rural and remote settings, for the collection of sharps waste and other infectious waste such as used cottons, gloves and bandages.

7.7.4 Healthcare facilities and healthcare providers in rural and remote settings may use alternative methods to close plastic bags provided they are securely closed and do not cause any injury or negative effect on the environment or in any other way.

7.7.5 All sharps' containers utilised must be manufactured according to SANS 452, Non-reusable and reusable sharps containers.

7.7.6 Spilled mercury waste and waste from the dental amalgam must be handled as prescribed in the SANS 10248-3, Management of Healthcare Waste, Part 3: Management of healthcare risk waste from minor generators – Registered healthcare professionals and non-healthcare professionals.

7.7.7 Healthcare risk waste containers or bags, including alternative containers or bags used for the packaging of healthcare risk waste, and must be labelled and colour coded as per the standards.

7.8 Loading, storage, transportation and disposal of healthcare risk waste (HCRW)

7.8.1 Internal loading and transportation of healthcare risk waste within a facility must be conducted as follows:

(a) Wheeled trolleys, containers or carts with sufficient storage space are designed to avoid spillages.

(b) Waste at all major generators is collected and removed from the wards and departments daily and stored in a locked central storage area.

(c) The manual lifting of and carrying of waste is avoided and minimised.

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(d) Access to transportation vehicles is easy, safe and unobstructed.
(e) Containers are tightly closed and are secured when loaded.
(f) No waste container is left unattended during loading and transportation.
(g) The container, trolley, or cartwheel is always locked when not in motion.
(h) The equipment used for transportation is:
  (i) Easy to load and unload.
  (ii) Free from sharp edges that could damage containers during loading or unloading.
  (iii) Easy to clean and disinfect.
(i) The mode of transport to treatment and final disposal site must be labelled with the appropriate pictogram as prescribed in SANS 10229-1, Transport of Dangerous Goods, Packaging and Large Packaging for Road and Rail Transport, Part 1: Packaging.
(j) The following information must be recorded for offsite collection of healthcare risk waste:
  (i) Signatures of both the person in charge of the central storage facility and the waste management officer or team member responsible for effective waste management.
  (ii) Time and date of collection.
  (iii) The volume of waste collected for different categories of waste.

7.8.2 The designated temporary storage for healthcare risk waste in all healthcare facilities must be located so that there is minimal risk of contamination to main operations of that area, medicines, foodstuffs, textiles, employees, patients and visitors.

7.8.3 All healthcare risk waste stored at minor generators must be removed to the final storage area regularly to prevent the occurrence of any nuisances.

7.8.4 Healthcare risk waste storage areas must always be locked and not easily accessible to the public, patients and unauthorised personnel.

7.8.5 The temporary healthcare risk waste storage area should be adequately ventilated and illuminated, have nonporous floor surfaces, be equipped with a spill kit as prescribed in the waste management plan and be marked with international hazard signs on or adjacent to the exterior doors or lids.

7.9 Storage area for radioactive waste, infectious waste, anatomical waste, chemical and pharmaceutical waste and general healthcare waste

7.9.1 All radioactive waste, infectious waste, anatomical waste, chemical and pharmaceutical waste and general healthcare waste must comply with the storage requirements provisions outlined in the SANS 10248-1, Management of Healthcare Waste, Part 1: Management of healthcare risk waste from a healthcare facility.

7.9.2 All storage areas for healthcare risk waste streams must be appropriately marked and display the appropriate international hazard label per Table 1 in SANS 10248-1.

7.10 Central storage areas

7.10.1 The central storage area must clearly be demarcated and marked.

7.10.2 Bio-hazardous warning signs must be placed on or adjacent to the exterior doors or gates.

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7.10.3 The storage area must be:

(a) Adequately ventilated and illuminated.

(b) Protected from direct sunlight and be vermin-proofed.

(c) Floors and walls must be are smooth, slip-resistant, and non-porous, and the floor surface is equipped with an appropriate drainage system connected to the council sewer.

(d) Containers are locked away at all times and are regularly monitored by security guards to prevent unauthorised entry.

(e) Has the name of the person in charge of the storage facility and contact numbers displayed on or adjacent to the exterior doors or gates.

7.10.3 Refrigeration facilities must be provided for storage of waste that requires storage at low temperatures.

7.10.4 Healthcare risk waste storage period between generation and treatment or disposal and the required storage temperature must be kept as prescribed in SANS 10248-1.

7.10.5 Healthcare risk waste may not stored for more than 90 days in the central storage area:

(a) If an offensive odour emanates before 90 days, measures are taken to expedite the collection and disposal of the healthcare risk waste.

(b) In the event of a lack of electricity, a suitable backup supply of electricity or propane or kerosene freezers is available.

(c) If the refrigeration or a backup source supply is unavailable in rural and remote settings, alternative measures prescribed in the SANS 10248-2, Management of Healthcare Waste, Part 2: Management of healthcare risk waste for healthcare facilities and healthcare providers in rural and remote settings, for the storage of placenta, are taken.

(d) Measures prescribed in the SANS 10248-2, Management of Healthcare Waste, Part 2: Management of healthcare risk waste for healthcare facilities and healthcare providers in rural and remote settings are adhered to in terms of placentas given for traditional home burial. The central storage area is equipped with a fire extinguisher and a spill kit, as prescribed in the waste management plan.

(e) Temperatures of healthcare risk waste refrigerators are closely monitored.

7.10.6 Refrigerators used for storing healthcare risk waste are marked and used solely for that purpose.

7.11 Treatment and disposal of healthcare risk waste (HCRW)

7.11.1 All healthcare risk waste must be treated before disposal by a licenced treatment facility and only disposed of at a licenced disposal facility.

7.12 Storage facilities

7.12.1 Separate storage facilities are provided on the premises for the storage of:

(a) Medicines and drugs.

(b) Cleaning equipment, pesticides and other potentially dangerous hazardous substances.

(c) Expired medications, pending removal for disposal.

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(d) Clean linen and dirty linen, containing adequate cupboards or shelves.

(e) Personal belongings of employees if fiveor more staff members are employed.

(f) Food items.

7.12.2 Storage rooms must contain adequate moveable shelving made of impervious material.

7.12.3 Every shelf in any storeroom must have a minimum height of 225 mm above the floor.

7.12.4 All storerooms and store facilities must always be kept clean and cleaned routinely at least once every week.

7.12.5 Hazardous substances must be stored and disposed of in a safe manner, separate from other non-hazardous materials.

7.12.6 Expired medicines must be stored separately and disposed of in a safe manner.

7.12.7 Adequate storage facilities must be provided for the storage of any spare equipment, including particularly heavy equipment and gas cylinders.

7.12.8The equipment must be stored in a manner so as not to obstruct any passages, entrances or exits to the premises.

7.12.8 Adequate storage facilities for articles that are reasonably necessary to store on the premises for the day-to-day running of the facility must be provided.

7.13 Laundry services

7.13.1 A health establishment has access to laundry facilities for the effective laundering of linen.

7.13.2 If on-site laundry facilities are provided, the location must be such that it allows for easy access by various departments within the health establishment and prevents possible contamination of clinical areas.

7.13.3 Internal walls of the laundry must be constructed of a material that enables easy cleaning.

7.13.4 Floors must be constructed of impervious material, are non-slip in wet areas, and are adequately drained.

7.13.5 Ceilings must be constructed of a dust-proof material.

7.13.6 The facility must adequately be ventilated by natural or artificial ventilation and is adequately illuminated.

7.13.7 Drainage systems must be available and designed without open drains, with lockable inspection or rodding eyes, and with a flow from clean to dirty areas and not connected to stormwater drainage.

7.13.8 Areas receiving soiled linen must physically beseparated from areas handling clean linen.

7.13.9 Adequate ablution and toilet facilities must be provided, including an emergency shower or eye-wash facility in the washroom where chemicals are handled.

7.13.10 Suitable and hazard-free storage facilities for the storage of chemicals must be provided.

7.13.11 The capacity and the condition of the equipment used for laundering meet the hospital's laundering needs.

7.13.12 Vehicles, containers, trolleys or other manually operated equipment for transporting linen must be operated to ensure prevention of contamination.

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7.13.13 All dirty linen and hospital clothes regarded as infectious waste must be removed from wards, passages or any other place where patients are treated and must be stored only in the designated storage area.

7.13.14 Laundry staff must be provided with appropriate personal protective equipment.

7.13.15 Where coal and fuel-burning equipment such as boilers are utilised for heating purposes, such boilers must be operated effectively to minimise emissions of pollutants into the atmosphere.

7.14 Operational requirements for linen handling

7.14.1 A policy for the management of linen must be in place.

7.14.2 Adequate resources must be provided to ensure the effective laundering of linen, including for proper maintenance of buildings and equipment.

7.14.3 A quality management system must be established incorporating:

(a) Work instructions and procedures.

(b) Process control procedures.

(c) Quality control procedures.

(d) Control of linen (clean/soiled) procedures.

7.14.4 A procedure specifically for infection/contamination control must be made available to staff handling linen.

7.14.5 The procedure includes control measures through differentiation between categories of soiled linen, i.e., of high-risk to normal soiled linen; containers are colour coded in accordance with SANS 10248-1 (as amended):

(a) Category A (red bag) = high-risk infection for immediate incineration.

(b) Category B (yellow bag) = infectious/contaminated linen for loading in washing machines.

(c) Category C (white bag) = normal linen of no risk during handling.

7.14.6 Measures must be in place to prevent air pollution, improve occupational and environmental hygiene and manage hazards.

7.14.7 Procedures for the use of protective clothing and personal hygiene where staff is in contact with high-risk areas or linen amust be documented to include precautionary measures.

7.14.8 The laundry management or controller and other designated staff must be trained and be competent to:

(a) Carry out their functions effectively.

(b) Handle hazardous goods in the laundry service.

(c) Follow procedures (including first aid) with regard to prevention and control of infection.

(d) Use protective clothing and follow procedures for decontamination.

(e) Operate laundry machines to ensure optimum results, including general safety procedures.

7.14.9 Laundry staff must be tested and pass the appropriate medical examinations on appointment, followed by routine health monitoring prescribed by occupational health and safety legislation.

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7.15 General hygiene standards

7.15.1 The premises must be maintained to be clean and free from offensive odours, unsightly accumulation of debris, litter and miscellaneous waste at all times.

7.15.2 Cleaning staff are trained and competent in cleaning techniques and processes to be utilised for various areas in the health facility.

7.15.3 Cleaning materials and detergent must be available and properly stored at all times, the materials are required to ensure a hygienic environment in the health facility.

7.15.4 A cleaning schedule must be kept for all maintained areas in the facility.

7.15.5 Appropriate cleaning materials and equipment must be utilised.

7.15.6 All toilet facilities on the premises must be kept clean and in good repair at all times.

7.15.7 All hand wash facilities are consistently supplied with potable running water.

7.15.8 Measures are taken to prevent the spread of infection in the facility.

SECTION 8

STANDARDS AND REQUIREMENTS FOR COMMUNITY RESIDENTIAL MENTAL HEALTHCARE FACILITIES

8.1 Structural facilities

8.1.1 The internal physical structure in clinical wards, kitchens, and bathrooms must be constructed to enable and facilitate easy cleaning.

8.1.2 Internal walls must be constructed of an impervious material brought to a smooth finish, easily cleanable, and painted with light-coloured paint.

8.1.3 Ceilings are must be constructed of dust-proof material, smoothly finished, and painted with light-coloured washable paint.

8.1.4Floor surfaces should be constructed of impervious material, brought to a smooth finish and properly drained.

8.2 Water, sanitation and hygiene

8.2.1 An improved water supply piped into the facility must be available.

8.2.2 Adequate and potable water must be available on the premises in sufficient quantities for all uses.

8.2.3 A risk management plan must be in place when a health establishment has additional building-specific sources of water used to augment the external supply or have specific purposes that increase potential risk.

8.2.4 Water supply must continuously be tested for fitness for consumption, and where on-site water storage facilities are utilised, the storage capacity shall be sufficient for two days.

8.2.5 Water storage facilities, e.g., reservoirs and tanks, must adequately be protected from contamination.

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8.2.6 Designated health facility staff shall continuously monitor the water in reservoirs and tanks for fitness for use, the water in the storage facilities must be tested for compliance and fitness for consumption.

8.2.7 If a borehole is the main water source, it must be effectively protected from contamination by humans, animals and other environmental factors.

8.2.8 To prevent organisms that grow in temperatures between 25°C and 50°C, e.g., Legionella spp, hot water temperatures must especially be kept above 50°C and cold water below 20°C.

8.2.9 Taps and pipes containing water unsuitable for human consumption must clearly be marked.

8.2.10 Water quality records must be kept and made available to an environmental health practitioner on request.

8.2.11 Where temporary water storage tanks are provided for potable water storage, such tanks must be constructed from an approved material, be rust-free, durable, fit for purpose, protected from contamination and kept clean at all times.

8.2.12 Adequate toilet and ablution facilities must be provided on the premises that meet the needs of patients, staff and visitors:

(a) At least one functioning toilet facility and one handwash basin is provided for not more than 20 in-patients.

(b) At least one functioning toilet facility and one handwash basin is provided for not more than every 50 visitors.

(c) Separate toilet and hand washing facilities are provided for staff members.

(d) At least one bath or shower is provided for every forty patients.

(e) Staff required to sleep on the premises are provided adequate wash-up facilities, including a shower or bath.

(f) Toilet and bathing facilities referred to in sub-regulations (a-e) are designated by gender.

(g) Toilet facilities for female persons are provided with means to manage menstrual hygiene needs.

(h) Toilet facilities meet the needs of people with reduced mobility.

(i) All facilities are adequately ventilated and illuminated.

(j) A drainage system is in place, and approved measures are utilised to remove wastewater.

(k) An adequate supply of toilet paper, liquid soap and/or alcohol-based hand rubs is provided at every wash hand basin in the facility.

8.3 Food safety standards

8.3.1 The premises must be operated under a valid Certificate of Acceptability issued by the local authority to certify that the premises comply with the Regulations Governing General Hygiene Requirements for Food Premises, the Transport of Food, and related matters, R638 of 22 June 2018.

8.4 Waste management

8.4.1 The management of healthcare risk waste must be in line with the SANS 10248.

8.4.2 Waste must be correctly segregated at all waste generation points.

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8.4.3 Functional waste collection containers for general waste, infectious waste and sharps must be provided in close proximity to all waste generation points.

8.4.4 Effective means must be in place for the proper disposal of healthcare risk waste.

8.4.5 A protocol or standard operating procedure must be in place for the safe management of healthcare waste.

8.4.6 Only licenced waste management contractors must be contracted to render treatment and disposal of healthcare waste in a health establishment.

8.4.7 Contractual requirements between the health establishment and the waste management contractor include, but are not limited to:

(a) The specification or description of the types (categories) and volume of healthcare risk waste to be collected for treatment or disposal (or both).

(b) Where relevant, the treatment or disposal process is to be used, taking into account any special requirements.

(c) A method to account for the number of various healthcare risk waste units collected by the appointed waste management contractor.

(d) The verification of the physical condition of the healthcare risk waste packages received.

(e) The responsibility to sort, count and collect the healthcare risk waste packages.

(f) A timed collection schedule is designed to ensure that the waste is timeously collected and transported.

(g) The personal and environmental health and safety measures to be implemented, including immunisation, personal protective equipment and management of spillage measures to be used for infection risks and other hazards associated with the waste.

(h) The transitional arrangements during mobilisation and termination of services, including interfaces with the current appointed waste management contractor and the succeeding appointed waste management contractor.

(i) The acceptable behaviour of personnel when collecting the waste at the health establishment.

(j) The reporting requirements, including the parameters, format and frequency.

(k) Emergency backup response measures in terms of service delivery challenges.

8.5 Classification of healthcare risk waste (HCRW)

8.5.1 All healthcare waste must be classified in accordance with the hazard and risk involved as per SANS 10234, Globally Harmonised System of Classification and Labelling of Chemicals.

8.5.2 Healthcare waste must be segregated correctly at the point of generation, containerised, and the correct liners are used.

8.5.3 Containers must be labelled with colour codes and the international biohazard symbol for healthcare risk waste as prescribed in the SANS 10248-1, Management of Healthcare Waste, Part 1: Management of healthcare risk waste from a healthcare facility.

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8.6 Packaging of healthcare risk waste (HCRW)

8.6.1 The packaging of healthcare risk waste, infectious waste pathological (excluding sharps), sharps, and chemical waste must be as prescribed in the SANS 10248-1, Management of Healthcare Waste, Part 1: Management of healthcare risk waste from a healthcare facility.

8.6.2 Healthcare facilities and healthcare providers in rural and remote settings may use alternative measures as prescribed in the SANS 10248-2, Management of Healthcare Waste, Part 2: Management of healthcare risk waste for healthcare facilities and healthcare providers in rural and remote settings, for the packaging of infectious healthcare risk waste, anatomical waste and sharps in case of emergency situations when there is a delay in the delivery of correct containers or bags.

8.6.3 Healthcare providers travelling to rural areas must be provided with healthcare waste containers as prescribed in the SANS 10248-2, Management of Healthcare Waste, Part 2: Management of healthcare risk waste for healthcare facilities and healthcare providers in rural and remote settings, for the collection of sharps waste and other infectious waste such as used cottons, gloves and bandages.

8.6.4 Healthcare facilities and healthcare providers in rural and remote settings may use alternative methods to close plastic bags provided they are securely closed and do not cause any injury or negative effect on the environment or in any other way.

8.6.5 All sharps' containers utilised must be manufactured according to SANS 452: Non-reusable and reusable sharps containers.

8.6.6 Spilled mercury waste and waste from the dental amalgam must be handled as prescribed in the SANS 10248-3, Management of Healthcare Waste, Part 3: Management of healthcare risk waste from minor generators – Registered healthcare professionals and non-healthcare professionals.

8.6.7 Healthcare risk waste containers or bags, including alternative containers or bags used for packaging healthcare risk waste, must be labelled and colour-coded per the standards.

8.7 Loading, storage, transportation and disposal of healthcare risk waste (HCRW)

8.7.1 Internal loading and transportation of healthcare risk waste within a facility must be conducted as follows:

(a) Wheeled trolleys, containers or carts with sufficient storage space are designed to avoid spillages.

(b) Waste at all major generators is collected and removed from the wards and departments on a daily basis and stored in a locked central storage area.

(c) The manual lifting of and carrying of waste is avoided and minimised.

(d) Access to transportation vehicles is easy, safe and unobstructed.

(e) Containers are tightly closed and are secured when loaded.

(f) No waste container is left unattended during loading and transportation.

(g) The container, trolley, or cartwheel is always locked when not in motion.

(h) The equipment used for transportation is:

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(i) Easy to load and unload.

(ii) Free from sharp edges that could damage containers during loading or unloading.

(iii) Easy to clean and disinfect.

(i) The mode of transport to treatment and final disposal site is labelled with the appropriate pictogram as prescribed in SANS 10229-1, Transport of Dangerous Goods, Packaging and Large Packaging for Road and Rail Transport, Part 1: Packaging;

(j) The following information is recorded for offsite collection of healthcare risk waste:

(i) Signatures of both the person in charge of the central storage facility and the waste management officer or waste management team member responsible for the effective management of waste.

(ii) Time and date of collection.

(iii) The volume of waste collected for different categories of waste.

8.7.2 The designated temporary storage for healthcare risk waste in all healthcare facilities is located so that there is minimal risk of contamination to main operations of that area, medicines, foodstuffs, textiles, employees, patients and visitors.

8.7.3 All healthcare risk waste stored at minor generators must be removed to the final storage area regularly to prevent the occurrence of any nuisances.

8.7.4 Healthcare risk waste storage areas must always be locked and not easily accessible to the public, patients and any unauthorised personnel.

8.7.5 The temporary healthcare risk waste storage area must adequately be ventilated and illuminated, has nonporous floor surfaces, is equipped with a spill kit as prescribed in the waste management plan, and is marked with international hazard signs on or adjacent to the exterior doors or lids.

8.8 Treatment and disposal of healthcare risk waste (HCRW)

8.8.1 All healthcare risk waste must be treated before disposal by a licenced treatment facility and is only disposed of at a licenced disposal facility.

8.9 Storage facilities

8.9.1 Separate storage facilities are provided on the premises for the storage of:

(a) Medicines and drugs.

(b) Cleaning equipment, pesticides and other potentially dangerous hazardous substances.

(c) Expired medications, pending removal for disposal.

(d) Clean linen and dirty linen, stored on adequate cupboards or shelves.

(e) Personal belongings of employees if five or more staff members are employed.

(f) Food items.

8.9.2 Storage rooms must contain adequate moveable shelving made of impervious material.

8.9.3 Every shelf in any storeroom must have a minimum height of 225 mm above the floor.

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8.9.4 All storerooms and store facilities must always be kept clean and cleaned routinely at least once every week.

8.9.5 Hazardous substances must be stored and disposed of in a safe manner, separate from other non-hazardous materials.

8.9.6 Expired medicines must be stored separately and are disposed of in a safe manner.

8.9.7 Adequate storage facilities must be provided for the storage of any spare equipment, including particularly heavy equipment and gas cylinders.

8.9.8 The equipment must be stored in a manner that does not obstruct any passages, entrances, or exits to the premises.

8.9.9 Adequate storage facilities must be provided for articles that are reasonably necessary to store on the premises for the day-to-day running of the facility.

8.10 Laundry services

8.10.1 A health establishment has access to laundry facilities for the effective laundering of linen:

8.10.2 If on-site laundry facilities are provided, the location should be such that it allows for easy access by various departments within the health establishment, but it also prevents possible contamination of clinical areas.

8.10.3 Internal walls are constructed of a material that enables easy cleaning.

8.10.4 Floors are constructed of impervious material, are non-slip in wet areas, and are adequately drained.

8.10.5 Ceilings are constructed of a dust-proof material.

8.10.6 The facility is adequately ventilated by natural or artificial ventilation and is adequately illuminated.

8.10.7 Drainage systems are available and designed without open drains, with lockable inspection or rodding eyes, and with a flow from clean to dirty areas and not connected to stormwater drainage.

8.10.8 Areas receiving soiled linen are physically separated from areas handling clean linen.

8.10.9 Adequate ablution and toilet facilities are provided, including an emergency shower or eye-wash facility where chemicals are handled in the washroom.

8.10.10 Suitable and hazard-free storage facilities for the storage of chemicals are provided.

8.10.11 The capacity and the condition of the equipment used for laundering meet the hospital's laundering needs.

8.10.12 Vehicles, containers, trolleys or other manually operated equipment for transporting linen must be operated to ensure prevention of contamination.

8.10.13 All dirty linen and hospital clothes regarded as infectious waste must be removed from wards, passages or any other place where patients are treated and are stored only in the designated storage area.

8.10.14 Laundry staff are provided with appropriate personal protective equipment.

8.10.15 Where coal and fuel-burning equipment such as boilers are utilised for heating purposes, such boilers must be operated effectively to minimise emissions of pollutants into the atmosphere.

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8.11 Operational requirements for linen handling

8.11.1 A policy for the management of linen must be in place.

8.11.2 Adequate resources must be provided to ensure the effective laundering of linen, including for proper maintenance of buildings and equipment.

8.11.3 A quality management system must be established incorporating:

(a) Work instructions and procedures.

(b) Process control procedures.

(c) Quality control procedures.

(d) Control of linen (clean/soiled) procedures.

8.11.4 A procedure specifically for infection or contamination control must be made available to staff handling linen.

8.11.5 The procedure includes control measures through differentiation between categories of soiled linen, i.e., of high-risk to normal soiled linen; containers must be colour coded in accordance with SANS 10248-1 (as amended):

(a) Category A (red bag) = high-risk infection for immediate incineration.

(b) Category B (yellow bag) = infectious/contaminated linen for loading in washing machines.

(c) Category C (white bag) = normal linen of no risk during handling.

8.11.6 Measures must be in place to prevent air pollution, improve occupational and environmental hygiene, and manage hazards.

8.11.7 Procedures for the use of protective clothing and personal hygiene where staff is in contact with high-risk areas or linen must be documented to include precautionary measures.

8.11.8 The laundry management or controller and other designated staff must be trained and be competent to:

(a) Carry out their functions effectively.

(b) Handle hazardous goods in the laundry service.

(c) Follow procedures (including first aid) with regard to prevention and control of infection.

(d) Use protective clothing and follow procedures for decontamination.

(e) Operate laundry machines to ensure optimum results, including general safety procedures.

8.11.9 Laundry staff must be tested and pass the appropriate medical examinations on appointment, followed by routine health monitoring as prescribed by occupational health and safety legislation.

8.12 General hygiene standards

8.12.1 The premises must be maintained to be clean, free from offensive odours, unsightly accumulation of debris, litter and miscellaneous waste at all times.

8.12.2 Cleaning staff must be trained and competent in cleaning techniques and processes to be utilised for various areas in the health facility.

8.12.3 Cleaning material and detergent are required to ensure that a hygienic environment in the health facility is available and properly stored at all times.

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8.12.4 A cleaning schedule maintained maintained to clean all areas in the facility.

8.12.5 Appropriate cleaning materials and equipment must be utilised.

8.12.6 All toilet facilities on the premises must be kept clean and in good repair at all times.

8.12.7 All hand wash facilities must consistently be supplied with potable running water.

8.12.8 Measures must be taken to prevent the spread of infection in the facility.

SECTION 9
STANDARDS AND REQUIREMENTS FOR LAUNDRY FACILITIES OR ESTABLISHMENTS

9.1 Structural facilities

9.1.1 Internal walls of the laundry must be easily cleanable.

9.1.2 Floors must be constructed of impervious material, are non-slip in wet areas, and are adequately drained.

9.1.3 Ceilings must be constructed of a dust-proof material.

9.1.4 The facility must adequately be ventilated by natural or artificial ventilation and is adequately illuminated.

9.1.5 Drainage systems must be designed without open drains, with lockable inspection or rodding eyes, with a flow from clean to dirty areas, and not connected to a stormwater drainage system.

9.1.6 Areas receiving soiled linen are physically separated from areas handling clean linen.

9.1.7 Any room or area's minimum height from floor to ceiling is at least 2.4 m.

9.2 Water supply and sanitation facilities

9.2.1 Adequate water supply, sanitation and handwashing facilities must be provided on the premises for use by staff members, with a constant supply of toilet paper and soap.

9.2.2 Where five or more persons of the same gender are employed on the premises, toilet facilities must be segregated by gender.

9.2.3 Change rooms must be provided for staff members and equipped with a hand wash basin and a supply of running hot and cold potable water.

9.2.4 An approved, suitable and effective means of drainage must be in place on the premises and is approved by the local authority.

9.3 Storage, work areas and facilities

9.3.1 Facilities, work areas and equipment used in connection with the operation of a laundry facility provided.

9.3.2 A workroom or area used for housing dry-cleaning machines, washing machines, and all other fixed or movable equipment used for the operation of a dry cleaning or laundry facility must be provided on the premises.

9.3.3 In the case of receiving depots, a separate area with a minimum width of not less than 2 m is provided, and 50% (fifty per cent) of that area must be unobstructed.

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9.3.4 A floor area of not less than 2.5 m^2 per person must be provided in the work area for persons employed on the premises.

9.3.5 A separate area with separate designated counters and an impervious surface must be provided for receiving and dispatching articles.

9.3.6 A separate area must be provided for receiving and marking of soiled and dirty articles, and the area is equipped with:

(a) Working tables are constructed of a durable material with an impervious surface.

(b) Adequate containers constructed of washable material are used for the storage of dirty articles.

(c) Hanging rails and shelves constructed of impervious material in the area to mark clean articles.

9.3.7 A storage room with facilities for packaging material and other articles must be provided and equipped with adequate packing shelves for clean linen.

9.3.8 Suitable and separate hazard-free lockable storage for chemicals must be provided.

9.3.9 All packaging shelves should be a height of at least 250 mm above floor level.

9.3.10 A separate room or area with separate designated counters or with an impervious surface must be provided for the receipt and dispatch of articles.

9.3.11 All machinery and equipment must be equipped with adequate suction fans to remove any noxious gas, steam and hot air from any room and to release it in the open air in an adequate manner.

9.3.12 If reusable nappies are laundered on the premises, a separate pre-rinsing area must be provided for rinsing nappies before washing.

9.4 General requirements

9.4.1 Measures must be in place to ensure compliance with the local authority and fire department requirements.

9.4.2 Suitable and hazard-free storage facilities for the storage of chemicals must be provided.

9.4.3 Laundry staff must be provided with appropriate personal protective equipment.

9.4.4 Where coal and fuel-burning equipment such as boilers are utilised for heating purposes, such boilers must be operated effectively to minimise emissions and pollutants into the atmosphere.

9.4.5 The premises must be well maintained, cleaned and free from offensive odours, unsightly accumulation of debris, litter and miscellaneous waste at all times.

9.4.6 C leaning material and detergents are required to ensure a hygienic environment is available and stored at all times.

9.4.7 The premises, as well as all fittings, equipment, appliances, and machinery, are kept clean and hygienic must be in good repair at all times.

SECTION 10

STANDARDS AND REQUIREMENTS FOR SEASONAL TRADITIONAL SCHOOLS

10.1 General requirements for Seasonal Tradidional Schools

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10.1.1 Seasonal traditional initiations must be provided with a permit/authorisation by the relevant municipality and/or local traditional leaders.

10.1.2 Facilities used for housing initiates must protect initiates from extreme/adverse environmental conditions (i.e., heat, cold and rain).

10.1.3 Only safe food that is suitable for human consumption is served to initiates.

10.1.4 The area where the school is established must allows easy access in cases of emergency.

10.1.5 Means must be made to ensure an adequate supply of potable water, and sanitation facilities must be provided for the use by initiates.

10.1.6 Care is taken to ensure that the circumcision process is safe, and measures are taken to provide medical care for initiates as and when necessary:

(a) Care is taken to ensure that initiates are in good health and fit for circumcision.

(b) The medical officer has a right of access to any area where circumcision is performed or an initiate is treated.

(c) Initiates are not exposed to any potential harm or danger.

(d) Circumcisions are only conducted by a certified traditional surgeon or any other person authorised by a traditional surgeon.

(e) All instruments, especially sharps used in connection with the circumcision procedures, are cleaned and disinfected.

(f) An approved and adequately equipped first aid kit is available, and traditional surgeons are trained in basic first aid.

(g) Initiates are taken to the nearest health facility when it is suspected that wounds are infected.

10.1.7 The environment where initiates are kept is reasonably clean and free from debris.

SECTION 11

STANDARDS AND REQUIREMETNS FOR CONSTRUCTION SITES

11.1 General Standards and requirements for construction sites

11.1.1 Construction sites adhere to the following standards:

(a) Water, sanitation and hygiene facilities are provided for workers to use.

(b) If more than 5 (five) employees of the same gender are working on site, separate toilet facilities are provided for each gender, and toilet facilities intended for female workers enable effective menstrual management.

(c) Toilet facilities are adequately ventilated and illuminated.

(d) An adequate supply of toilet paper and handwash soap is always provided in the toilet facilities.

(e) Wash-up facilities equipped with hot and cold running water are provided for employees, especially employees engaged in applying paints, coating, pesticides, etc.

(f) Toilet and washing facilities are maintained in a sanitary condition at all times.

(g) The toilet and shower facilities are adequately ventilated and illuminated.

(h) A suitable, effective and approved drainage and sewage disposal system is in place on the premises in compliance with the relevant municipal by-laws of a specific local authority.

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11.1.2 Measures are taken to ensure that the construction does not pose a risk to neighbouring properties or the public:

(a) The site is properly fenced off, and no unauthorised entry is permitted.

(b) Construction areas, ramps, runways, corridors, offices, shops, and storage areas are adequately lit while any work is in progress.

(c) Where food is prepared and served on the premises, facilities used for handling, preparing, and serving foodstuffs are kept clean.

(d) Whenever employees are required to wear protective clothing when engaged in work, especially because of the possibility of contamination with toxic materials, change rooms and showers are provided on-site and designated by gender.

(e) Change rooms are equipped with separate lockers for storage of each employee's personal belongings.

11.1.3 Waste is managed to prevent a nuisance from occurring on the premises:

(a) Waste material and debris is removed to a disposal area, and reusable material is sorted and moved to a storage area at least once daily to prevent a hazardous condition from arising;

(b) The building rubble generated is temporarily stored in a designated area on-site, and access to the area must be strictly controlled prior to removal for disposal.

SECTION 12
STANDARDS AND REQUIREMENTS FOR PUBLIC GATHERING PLACES

12.1 General standards and requirements for public gathering places

12.1.1 The management of waste on the premises complies with the by-laws of the relevant local authority:

(a) Refuse bins with close-fitting lids are provided at strategic points throughout the premises for collection or disposal of litter.

(a) A central refuse area is provided on the premises where the storage of waste is pending removal.

(b) The central refuse area is maintained in such a manner to prevent the occurrence of a nuisance.

(c) Access control is available at all times in the central refuse area.

(d) In the case of stadia, on-site waste management is available on the premises during public events to manage overflowing, spillages, and littering and prevent a nuisance from occurring.

12.2 Adequate potable water supply is available on the premises-

(a) In the case of public events, water points are made available at strategic points throughout the premises.

(b) Where water tankers are utilised as drinking water points, the water is potable, fit for human consumption and protected from contamination.

12.3 Adequate ablution facilities are provided on the premises to meet the needs of the public:

(a) For a population of up to 50 (fifty) people, 1 (one) toilet facility/water closet and 1 (one) wash hand basin are provided for every 50 (fifty) male persons.

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(b) One (1) urinal is provided for every 50 (fifty) male persons.

(c) One (1) toilet facility/water closet and 1 (one) wash hand basin are provided for every 25 (twenty-five) female persons.

(d) Toilet facilities for women enable the management of menstrual hygiene.

(e) A suitable, effective drainage and sewage disposal system is in place on the premises to satisfy and comply with the by-laws of the relevant local authority.

(f) The use of non-waterborne sanitary services on the premises complies with the specifications of the SANS 10400.

(g) At least 5% of the total number of toilets to be provided is accessible by persons with mobility challenges.

12.4 Where chemical closets are used to augment toilets in a public gathering place for the purpose of an event, an on-site maintenance team shall be available on the premises for the duration of the event to deal with blockages and leakages and prevent the creation of a nuisance and health hazard from occurring.

(a) A site plan detailing the location and type of sanitary facilities to be utilised for an event is submitted to an environmental health practitioner of the relevant local authority for consideration before the event.

12.5 The premises are operated under a valid Certificate of Acceptability issued by the local authority to certify that the premises comply with the Regulations Governing General Hygiene Requirements for Food Premises, the Transport of Food, and related matters, R638 of 22 June 2018.

SECTION 13
STANDARDS AND REQUIREMENTS FOR AIRCRAFT, SHIPS AND POINTOF ENTRY PREMISES

13.1 Structural facilities

13.1.1 The aircraft and ship design must comply with the international standards and recommendations for traveller health and safety and facilitates proper cleaning and disinfection, and that the interior is made of a material that reduces the risk of harbouring insects, rodents and other vectors.

13.2 Waste management

13.2.1 The collection, storage and disposal of general waste generated by on-board conveyances and in the Point of Entry facility comply with national legislation and by-laws of the relevant local authority.

13.2.2 The management of waste on board the aircraft must adhere to the requirements as specified in the WHO Guide to Hygiene and Sanitation in Aviation and IATA Cabin Waste Handbook.

13.2.3 The management of waste on board vessels adheres to the requirements as specified in the WHO Guide to Ship Sanitation.

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13.2.4 Sufficient waste containers must be provided for on-board conveyances for storage of all types of waste.

13.2.5 Waste containers must promptly emptied from the conveyances upon arrival, and waste management procedures must be implemented for disposal.

13.2.6 The collection, storage and disposal of general waste at any land, sea or airport must be managed in accordance with the by-laws of the relevant local authority.

13.3 Water, sanitation and hygiene

13.3.1 A potable water supply and adequate toilet and wash-up facilities are provided on board the aircraft and ship.

13.3.2 Hot and cold running water is provided at every hand wash basin.

13.3.3 Toilet facilities are maintained in good working order and in good repair at all times.

13.3.4 Floors of the toilets are constructed of a durable surface that is easily cleanable.

13.3.5 Sanitary waste on board the aircraft is, upon arrival, discharged into a municipal-approved sewerage system by a designated service provider.

13.3.6A potable water supply and adequate toilet and wash-up facilities are provided at all air, sea and land borders for use by travellers and staff members:

13.3.7 The toilet facilities are separated by gender.

13.3.8 Facilities for female persons enable the management of menstrual hygiene.

13.3.9 Always kept in good repair and clean and sanitary, with an adequate supply of toilet paper and soap.

13.3.10 Sewage disposal systems on board the ship conform to the specifications per the WHO Guide to Ship Sanitation and the Handbook for Inspection of Ships and Issuance of Ship Sanitation Certificates.

13.4 Accommodation establishments on board the ship

13.4.1 Accommodation establishments on board conform to the specifications as per the Handbook for Inspection of Ships and Issuance of Ship Sanitation Certificates:

13.4.2 Adequate ventilation and heating systems, with adequate natural or artificial lighting, must be provided.

13.4.3 Adequate water supply, sanitation and wash-up facilities must be provided for accommodation establishments.

13.4.4 An adequate supply of soap and toilet paper is maintained in sanitation facilities.

13.4.5 Accommodation establishments must be kept clean at all times.

13.4.6 The waste management on board adheres to the requirements specified in the WHO Guide to Ship Sanitation and the Handbook for Inspection of Ships and Issuance of Ship Sanitation Certificates.

13.4.7 Ships must be equipped with facilities for storage and managing wastes generated from all areas within the ship.

13.4.8 Waste containers must be designed appropriately to facilitate proper cleaning.

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13.4.9 Waste holding rooms must be well ventilated, and humidity and temperature must be controlled.

13.4.10 Waste holding areas must have accessible hand washing facilities, and hot and cold running water must be provided.

13.4.11 Healthcare waste must be stored and treated in a safe manner.

13.4.12 Facilities for treating and/or storing healthcare waste must be available on board.

13.4.13 Ships must be equipped with facilities for managing waste from toilets and urinals, medical facilities and food sources.

13.4.14 Ships discharging waste at the port must do so in compliance with National Environmental Management, Waste Act 2008 (Act No. 59 of 2008) and the specific by-laws of the relevant local authority.

13.5 Food safety and hygiene

13.5.1 Food safety and hygiene on board the aircraft and on board the ship conforms to the specifications as per the WHO Guide to Hygiene and Sanitation in Aviation:

13.5.2 All food on board must be stored and maintained at safe temperatures before and during serving.

13.5.3 On-board storage compartments must be made of a material that is easily cleanable and is cleaned and disinfected regularly.

13.5.4 All equipment must be maintained in a serviceable condition and must be kept clean at all times.

13.5.5 Containers used for serving food can only be used for the intended purpose.

13.5.6 All utensils and equipment intended for single use shall not be re-used.

13.5.7 Food waste must be removed from the aircraft as soon as possible after arrival and must be disposed off appropriately.

13.5.8Only food that is fit for human consumption is supplied on board.

13.6 General requirements

13.6.1 Engine rooms, recreational water environments, cargo holds, medical facilities, childcare and all other facilities on board the ship conform to the specifications as per the WHO Guide to Ship Sanitation and the Handbook for Inspection of Ships and Issuance of Ship Sanitation Certificates.

13.6.2 A cleaning and maintenance programme must be in place for all areas of a ship.

13.6.3 Aircraft and ships must be kept free of any vectors/pests and flies.

13.6.4 Aircraft cargo holds must be kept in a clean condition and free of infectious materials, vectors/pests, and rodents and the holds are constructed of a material that facilitates easy cleaning.

13.6.5 Adequate sanitation and hand washing facilities must be provided on board the vessel.

13.6.6 Hot and cold running water must be provided at every hand wash basin.

13.6.7 Toilet facilities must be kept clean at all times, and adequate supplies of toilet paper, soap, and drying towels are provided.

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13.6.8 Cargo holds must be kept free of any infectious materials, vectors and rodents.

13.6.9 Integrated vector control programmes must be in place to control the breeding of vectors on board ships, aircraft, and point-of-entry environments.

SECTION 14
STANDARDS AND REQUIREMENTS FOR VACANT LANDS

14.1 Standards for vacant land

14.1.1 No owner or person in charge of any undeveloped/vacant land causes or allows to occur on any such land:

(a) Accumulation of refuse and debris, including glass, paper, rags, tins, trash, ash and coal, and dead animals.
(b) Overgrown weeds, trees, long grass, and existence of undergrowth, shrubs or any poisonous plants; accumulation of wrecked motor vehicles, chassis, engine or other part of a motor vehicle which is unsightly and may pose a health nuisance.
(c) Offensive smells; stagnant waters.
(d) Burning of refuse/waste material.
(e) Any conditions that result in the breeding of flies, mosquitoes or other insects and the harbourage of rodents and other vermin.

SECTION 15
STANDARDS FOR CARAVAN PARKS AND CAMPING SITES

15.1 Standards and requirements for caravan parks and camping sites

15.1.1 Caravan parks and camping sites are only operated under a valid permit/licence issued by the relevant local authority.

15.1.2 The entrance to the caravan park or camping ground, roadways, paths, water closets, urinals, ablution and other facilities, and firefighting and first aid points are adequately illuminated during the hours of darkness.

15.2 Water and sanitation facilities

15.2.1 An adequate and constant supply of potable water, toilet and wash-up facilities is available on the premises:

(a) One permanent standpipe is available in a convenient position for every 4 (four) caravan or camping sites, and under every standpipe tap, there is a gully trap set in a dished and properly rendered surround and connected to an approved drainage system.
(b) At least 1 (one) toilet and 1 (one) urinal are provided for every 8 (eight) caravans or camping sites or part thereof. The bucket and channel of the urinal are made of stainless steel or other approved material.
(c) At least 2 (two) toilet facilities are provided for every 6 (six) caravans or camping sites or part thereof in excess of 12 (twelve) sites.
(d) Handwashing facilities and an adequate supply of soap are provided.
(e) Toilets for female persons enable menstrual hygiene management.
(f) All baths, showers, and hand wash basins are provided with an adequate and constant supply of hot and cold running water and fitted with waste pipes suitably trapped and discharging over and into an external gully connected to an approved drainage system.
(g) The internal wall surfaces of all bathrooms, shower cubicles, and water closets are painted with light-coloured oil paint and are provided with a wall covering of an approved material.
(h) All water closets, urinals, ablution and other facilities are suitably designated, and the entrances to ablution facilities are screened from public view.
(i) An approved slop sink unit with an adequate and constant supply of cold running water is provided for caravanners and campers where chemical toilet receptacles are emptied and

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cleaned. The unit is installed within a separate compartment adjacent to an ablution block with access for both genders. The floor of such a compartment is graded and drained to an approved drainage system.

(j) Every 20 (twenty) caravan sites or part thereof and every 10 (ten) camping sites or part thereof are provided under a roofed area on an approved impervious floor, which is graded and drained to an approved drainage system with a double compartment washup sink unit for the washing of caravanners or camper's culinary utensils.

SECTION 16
STANDARDS FOR PROSONS, INCLUDING POLICE TATTION HOLDING CELLS

3.1 Standards and requirements for prisons, including police station holding cells

16.1.1 Prisons, including police station holding cells, comply with the following standards:

(a) The building structure promotes the health and safety of inmates: walls are constructed of an approved material, brought to a smooth finish and painted with a light-coloured paint.
(b) Prisoners are not overcrowded in cells to prevent the spread of communicable diseases.
(c) Cells are kept clean at all times, free from debris, litter and other miscellaneous rubbish and are maintained in good repair.
(d) Adequate storage facilities are provided for the storage of personal belongings of each occupier.
(e) An adequate water supply, sanitation and hygiene facilities are provided to meet the needs of prisoners.
(f) A potable water supply is provided on the premises for drinking, cooking, and other uses.
(g) At least 1 (one) toilet facility and 1 (one) hand wash basin are provided for every 50 (fifty) male inmates. At least 1 (one) urinal must be provided for every 50 (fifty) prisoners.
(h) At least 1 (one) toilet facility and 1 (one) hand wash basin are provided for every 25 (twenty-five) female prisoners.
(i) Toilet facilities for women enable the management of menstrual hygiene.
(j) Toilet and wash-up facilities are adequately illuminated and ventilated.
(k) At least 1 (one) shower is provided for every 50 (fifty) inmates on the premise.
(l) Toilet facilities provide privacy and security.
(m) Potable running hot and cold water is available at all wash-up sinks and showers.
(n) Toilet facilities are kept clean at all times, and an adequate supply of toilet paper, soap and drying towels is provided.
(o) Toilet facilities are maintained in good working order and in good repair at all times.
(p) Floors and walls of the toilet and wash-up facilities are constructed of an easily cleanable material.
(q) Prisons have access to a well-managed laundry facility for effectively laundering bedding and clothing.

SECTION 17
STANDARDS FOR OFFICE ACCOMMODATION

17.1 Standards and requirements for office accommodation

17.1.1 Office buildings and accommodations must comply with the following environmental health standards.

(a) The building structure is structurally safe and promotes the health and safety of occupants, and it is adequately ventilated and illuminated. Where an artificial ventilation system is utilised, it is maintained in good working order and enables adequate air circulation.
(b) Adequate toilet and hand washing facilities are available on the premises for use by occupants-
(c) At least 1 (one) toilet facility and 1 (one) hand wash basin are provided for every 30 (thirty) male employees on the premises, equipped with running water, and 1 (one) urinal is provided for every 30 (thirty) male employees on the premises.

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(d) At least 1 (one) toilet facility and 1 (one) hand wash basin are provided for every 20 (twenty) female employees, equipped with potable running water on the premises and toilets for female persons enable menstrual hygiene management.
(e) Toilet facilities are properly illuminated and ventilated.
(f) Floors of the toilet facilities are constructed of a smooth finish and easily cleanable surface.
(g) An adequate supply of toilet paper is available in all toilet facilities, and soap is provided at all handwash basins.
(h) Toilet facilities are kept clean at all times and maintained in good repair.
(i) An adequate potable drinking water supply is provided on the premises at all times for use by occupants:
(j) In high-rise buildings, where water is pumped into gravity-feed tanks, the water quality in the tanks is continuously monitored for possible contamination and fitness for consumption.
(k) The management of waste on the premises is in line with the by-laws of the relevant local authority:
(l) Refuse bins with close-fitting lids are provided at strategic points throughout the premises for collection or disposal of litter.
(m) A central refuse area is available on the premises for storage of waste pending removal.
(n) The central refuse area is maintained in such a manner as to prevent the occurrence of a nuisance.
(o) Access control is available and is maintained.

SECTION 18
STANDARDS FOR KEEPING OF ANIMALS

18.1 Standards and requirements for keeping animals on premises

18.1.1 Premises used in connection with the keeping of breeding animals are operated under a permit issued by the relevant local authority.
(a) Cattle, horses, mules, donkeys, goats, sheep, poultry, rabbits, pigs, dogs and bees are kept in structures or enclosures designed for the purpose of keeping such animals.
(b) Lighting and ventilation are provided by openings or glazed opening windows or louvres.
(c) The walls, partitions, and floors are designed with materials that will keep the structures clean and free from debris, odours, and other unsightly conditions.
(d) Enclosures or structures are not situated within the boundaries of any land, dwelling or other structure used for human habitation.
(e) Adequate space is provided for each animal kept on the premises.
(f) The height of the enclosures is adequate to prevent any nuisance and hazards.
(g) Animal feed is stored in a rodent-proof storeroom, and the manure storage area has a roofed platform constructed of concrete or other impervious material. The platform is graded and drained.
(h) A potable water supply for drinking and cleaning is provided and situated in or next to every aviary.
(i) Adequate washing facilities are available to clean structures, enclosures or shelters.
(j) Structures, enclosures and shelters are kept clean to eliminate pests.

18.2 General hygiene requirements for keeping animals and poultry

18.2.1 The premises and any equipment, apparatus, container or receptacle used in connection with keeping animals are maintained in a clean and sanitary condition and in good repair:
(a) Portable storage receptacles of impervious material with close-fitting lids are provided for the storage of manure and/or animal waste.
(b) A potable drinking water supply is provided and situated next to or in every stable, pigsty, stable structure, container or any enclosure used to accommodate animals, including poultry.
(c) Manure storage receptacles are kept on a platform that enables the surface underneath the receptacle to be cleaned.
(d) Manure is removed at least once every three (3) days, or as and when necessary, and placed in the manure storage receptacles.
(e) The contents of the manure storage receptacles are removed from the premises at least once every 7 (seven) days, and the manure is disposed of in a way that will not create a public health nuisance.

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(f) All feed is stored in a rodent-proof storeroom, and all loose feed is stored in rodent-proof receptacles with close-fitting lids in the storeroom.
(g) Adequate measures are taken to keep the premises free of pests and to prevent offensive odours due to keeping such animals.
(h) All bedding is removed from the stables and enclosures at least once a week and shall be stored in the manure receptacles or manure container or area until it is removed from the premises.
(i) All saddles, bridles, harnesses and other equipment or articles used in connection with the keeping of the animals are stored in a storeroom or other adequate storage facility provided for that purpose.
(j) Animals that die are removed from the premises within 24 hours of death to prevent a health hazard from occurring and disposed of in line with municipal by-laws.
(k) Disposal of dead animals is conducted in an acceptable manner and in compliance with the relevant by-laws of the local authority concerned.
(l) Wild animals may not be kept on residential premises without prior approval of the relevant nature conservation authorities and/or without a permit by the relevant local authority authorising the keeping of such animals on the premises.
(m) Premises used as pet shops and parlours have washing facilities, clipping or grooming of pets, a bathroom fitted with a bath or similar fitting, and a wash hand basin supplied with running water is provided on the premises:
    (i) A clipping and grooming room fitted with impervious topped tables and an adequate number of portable storage receptacles of an impervious durable material with close-fitting lids for the storage of cut hair pending removal is provided.
    (ii) Measures are taken to control the breeding of rodents.
(n) The slaughtering of any animal for one's own consumption and religious purposes is only done in an open area:
(o) The meat from the slaughtered animals is only utilised for one's own consumption or religious or ceremonial purposes and may not be sold to any person.
(p) The meat is always handled in a hygienic manner.
(q) Blood and other waste products from the carcass are disposed of in a manner that does not become a public health hazard or nuisance.

SECTION 19
STANDARDS OFFENSIVE TRADES

19.1 Standards for offensive trades on premises

19.1.1 The owner or occupier of such premises ensures that:

(a) The operation of such activity in or on such premises is conducted in such a manner as not to create or cause a public health nuisance or hazard or, injury or danger to health.
(b) The premises used in connection with such activity are maintained in a clean, hygienic and good condition at all times.
(c) The accumulation of any waste on or in such premises is avoided, and all walls and floors of such premises are maintained in a manner and condition as to prevent the absorption of any waste or wastewater; maintain all machinery, plant, apparatus, furniture, fittings, tools, implements, vessels, containers, receptacles and vehicles in a clean, hygienic and good condition at all times.
(d) No emissions of noxious, injurious or offensive gases, fumes, vapours or dust matter are emitted due to the operations of such activities.

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DEFINITION OF TERMS

Any definition in the Act and the Regulations shall have the same meaning.

Accommodation establishment	Means a hotel, guest house, lodge or boarding house, bed and breakfast and any other establishment where accommodation is provided to people temporarily or semi-permanently.
Aircraft	Means an aircraft making an international voyage.
Chemical	Means a substance, whether by itself or in a mixture or preparation and whether manufactured or obtained from nature, but does not include any living organism.
Childcare centre	Means partial care facility as categorised in terms of Section 76 to 90 of the Children's Act and shall include partial care: ECD and after-school care, hostel and respite care, child and youth care centres as well as drop-in centres.
Community residential mental healthcare facilities	Means mental health halfway houses, residential facilities/care and rehabilitation facilities.
Determinants	Refers to microorganisms, physical or aesthetic property or chemical substance of which the risk posed is classified as chronic health -1, chronic health -2, aesthetic, chronic health or operational category.
Disinfectant	Means any article or substance used or applied or intended to be used or applied as a germicide, preservative or antiseptic, or as a deodorant or cleansing material which is not a cosmetic or a chemical agent that kills most vegetative forms of pathogenic and other micro-organisms (but not necessarily all bacterial and fungal spores, mycobacteria, rickettsiae or viruses) on inanimate surfaces.
Disinfection	Means the procedure whereby health measures are taken to control or kill infectious agents on human diseases in baggage, cargo, containers, conveyances, goods and postal parcels.
Environmental health practitioner	Means, subject to the provisions of the Health Professions Act, 1974 (Act No. 56 of 1974) as amended, any person registered with the Health Professions Council of South Africa, including environmental health practitioners doing compulsory community service as health officers are described under the Act.
Hazard	Means an intrinsic potential or ability of an agent, equipment, material, activity or process to cause harm.
Healthcare general waste	Means healthcare general waste as defined in the SANS 10248, Management of Healthcare Waste.
Healthcare professional	Means a healthcare professional as defined in the SANS 10248-3, Management of Healthcare Waste, Part 3: Management of healthcare risk waste from minor generators – Registered healthcare professionals and non-healthcare professionals.
Healthcare risk waste (HCRW)	Means to healthcare risk waste as defined in SANS 10248, Management of Healthcare Waste.
Health certificate	Means a health certificate is issued to certify that the premises comply with the relevant norms and standards.
Health establishments	Refer to a "health establishment" and "military health establishment" as defined in the National Health Act.
Improved water sources	Includes water sources that, by nature of their construction or through active intervention, are protected from outside contamination, particularly

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	faecal matter. Such sources comprise piped water, public taps or standpipes, tube wells or boreholes, protected dug wells, protected springs and rainwater collection.
Industrial waste	Refers to waste generated as a result of industrial activities such as manufacturing, maintenance, fabricating, processing or dismantling activities, mining activities or the operation of power stations.
Integrated pest management	Refers to an approach to managing pests that seeks to maximise the effectiveness of biological and cultural control factors, utilising chemicals only as needed and with minimal application. Such management is designed to place stress on the pest population through a series of processes that reduce breeding areas and pest entry points.
Major generator	Means a generator that generates more than 20 kg per day of healthcare risk waste, including the container, calculated monthly as a daily average.
Microbiological quality	Refers to the presence of micro-organisms such as protozoa, bacteria and viruses in water.
Minor generator	Means a generator that generates up to 20 kg per day of healthcare risk waste, including the container, calculated monthly as a daily average, but does not include domestic generators:
Monitoring	Refers to the long-term, standardised measurement and observation of the aquatic environment to define status and trends.
Non-healthcare professional	Means non-healthcare professionals as defined in the SANS 10248-3, Management of Healthcare Waste, Part 3: Management of healthcare risk waste from minor generators – Registered healthcare professionals and non-healthcare professionals.
Normal	Means the desired status.
Nursing home	Means a place of residence for people who require constant nursing care, as well as people who might have significant deficiencies with activities of daily living. These may include rest homes and care homes and exclude homes for the aged.
Operational	Refers to a determinant essential for assessing the efficient operation of treatment systems and risks to infrastructure.
Pathological waste	Refers to diseased animals or animal parts infected with zoonotic diseases. Human and animal tissues, organs, body parts, blood, fluid blood products and body fluids. Containers or equipment containing blood that is fluid or blood from animals known or suspected to be infected with any zoonotic disease and human fetuses.
Pest	Means any animal, which includes insects and rodents, that may transmit disease.
Pest control programme	Means a written programme that outlines activities to be conducted for the control of pests on a premises.
Pesticide	Refers to any substance or mixture of substances of chemical or biological ingredients intended for repelling, destroying or controlling any pest or regulating plant growth.
Pharmaceutical waste	Refers to pharmaceutical products and medical chemicals that are no longer usable in human or animal treatment, have become outdated or contaminated or are no longer required and items contaminated with cytotoxic pharmaceuticals.
Physical quality	Refers to turbidity, colour, taste, odour and other physical aspects of water.
Point of delivery	Physical fixed interface between a water services provider or a water services authority and a customer.

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Point of entry	Means a passage for international entry or exit of travelers, baggage, cargo, containers, conveyances, goods and postal parcels, as well as agencies and areas providing services to travellers on entry or exit.
Point of use	Refers to taps, buckets, tanks or drums from where people utilise the water.
Potable water	Refers to water from treated sources, taps, jojo storage tanks, standpipes, and reservoirs.
Public gathering places	Refers to public places, such as shopping malls, airports, cinemas, stadia, public events, including government-owned or occupied premises.
Radioactive waste	Means liquid, solid or gaseous materials that contain or are contaminated, with radio nuclides.
Recreational water	Refers to public and private swimming pools and spa baths.
Risk	Refers to the probability and severity of an adverse health or environmental effect occurring as a function of a hazard and the likelihood and extent of exposure to a pesticide.
Risk management	Refers to the process of identifying and documenting all hazards and risks within the water supply system.
Routine monitoring programme	An ongoing monitoring programme is intended to validate the effectiveness of control measures at critical control points and assess the quality of water based on the location of routine sampling points, sampling frequency, and determinants.
Rural and remote settings	Means rural and remote settings as defined in SANS 10248-2, Management of Healthcare Waste, Part 2: Management of healthcare risk waste for healthcare facilities and healthcare providers in rural and remote settings.
Scrapping or recovery facility	Means scrapping or recovery facility as defined in the National Standards for the Scrapping or Recovery of Motor Vehicles, No. 925 of 29 November 2013.
Segregation	Means the separation of healthcare waste into different categories.
Ship	Means a seagoing or inland navigation vessel on an international voyage.
Standard	Means a qualitative statement that describes what constitutes acceptable or adequate performance, resources or services.
Surface water	Refers to untreated water sources like streams, rivers, springs and boreholes.
Surveillance	Refers to the continuous, specific measurement and observation for water quality management and operational activities.
Toxicity	Means a physiological or biological property which determines the capacity of a chemical to do harm or produce injury to a living organism by other than mechanical means.
Traveller	Means a natural person undertaking an international voyage.
Unimproved water sources	Include unprotected dug well, unprotected spring, cart with small tank/drum, tanker truck, and surface water (river, dam, lake, pond, stream, canal, irrigation channels).
Vacant land	Refers to private or public unoccupied or empty stands or any land without a structure on it, a pavement or open field.
Water safety plan	A systematic process that aims to consistently ensure acceptable drinking water that does not exceed the numerical limits within SANS 241 by implementing an integrated water quality management plan, which utilises

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	a risk assessment and risk management approach from catchment to point of delivery.
Water services authority (WSA)	Any municipality that has the executive authority to provide water services within its area of jurisdiction in terms of the relevant national legislation or the ministerial authorisations made in terms of the relevant national legislation.
Water services provider	Any person who has a contract with the water services authority or water services provider to sell water to that authority or provider. or any person who has a contract with a water services authority to assume operational responsibility for providing water services to one or more consumers within a specific geographic area.

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APPENDICES

Appendix A:
Database for food premises

Province	District	Sub-district	Name of business	Street number and name	Suburb, town, area	Ward	Contact number	Person in charge	Type of premises (e.g., general dealer, café, restaurant, butchery, etc.)	Certificate of Acceptability Number	Date/s of inspection

Appendix B:
Database for other premises

Province	District	Sub-district	Name of premises	Street number and name	Suburb, town, area	Ward	Contact number	Person in charge	Type of premises (e.g. guest house, ECD, funeral undertakers)	Health Certificate Number, where applicable	Date/s of inspection

Appendix C:
Record of fines/prosections

Province	District	Sub-district	Name of offender	Name of business premises	Address of business premises	Ward	Offence description (name of legislation and sections)	Penalty fee (if applicable)	Penalty paid (Yes/No)	Imprisonment (Yes/No/N/A)

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Appendix D:
Record of complaints

Province	District	Sub-district	Name of complainant	Full address of the complainant	Contact number	Ward	Address of premises referred to	Type of complaint								Date complaint lodged	Dates of investigation	Action taken	Date resolved
								Air pollution	Noise pollution	Waste pollution	Water pollution	Non-compliant business premises	Non-compliant foodstuffs	Other	Description of the complaint				

Appendix E:
Database for hazardous substances dealers

Province	District	Sub-district	Name of Business	Street number and name	Suburb, town, area	Ward	Contact number	E-mail address	Licence holder	Category (IA or IB)	Product name	Licence number	Date/s of inspection

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Appendix F:
Record notifiable medical conditions investigations

Province	District	Sub-district	Name of patient	Residential address	Suburb, town, area	Ward	Contact number	Medical condition	Source and cause	Confirmed/suspected	Date of notification	Date of investigation	Environmental health Intervention

Appendix G:
Database for paint suppliers

Province	District	Sub-district	Name of business	Street number and name	Suburb, town, area	Contact number	E-mail address	Person in charge	Type of business (e.g. Importer, manufacturer, distributor, retailer)	Names of supplied paint products	Comply with labelling requirements (Yes/No)	Samples taken for lead in paint (Yes/No)	Samples comply with lead in paint standard (Yes/No)	Names of non-compliant products with lead in paint standard	Date/s of inspection

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Appendix H:
Database of retailers specialising in disinfectants, detergents, cosmetics and industrial chemicals

Province	District	Sub-district	Name of business	Street no and name	Suburb, town, area	Ward	Contact number	E-mail address	Person in charge	Type of products sold (e.g. disinfectants, detergents, cosmetics and industrial chemicals)	Comply with labelling requirements (Yes/No)	Samples taken (Yes/No)	Samples comply with chemical standards (Yes/No)	Names of non-compliant products with chemical standard	Date/s of inspection

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DEPARTMENT OF HIGHER EDUCATION AND TRAINING

NO. 6741 **17 October 2025**

HIGHER EDUCATION ACT, 1997 (ACT NO.101 OF 1997)

POLICY FOR THE RECOGNITION OF SOUTH AFRICAN HIGHER EDUCATION INSTITUTIONAL TYPES DETERMINED IN TERMS OF SECTION 3 OF THE HIGHER EDUCATION ACT

I, Minister of Higher Education and Training, Mr KB Manamela, hereby promulgate the *Policy for Recognition of the South African Higher Education Institutional Types*, in terms of the Higher Education Act, 1997 (Act 101 of 1997), as set out in the Schedule. The purpose of this policy is the classification of the Institutional types in the Higher Education Act, thereby charactering the distinct scope and range of operations. By setting clear parameters for the recognition/ declaration/ establishment and registration of the various types of higher education institutions, the policy aims to create enabling mechanism for the expansion, differentiation and articulation within higher education sector.

This policy is promulgated after consultation with the Council on Higher Education as required in terms of section 3 (1) of the Act.



MR KB MANAMELA, MP

MINISTER OF HIGHER EDUCATION AND TRAINING



higher education & training

Department:
Higher Education and Training
REPUBLIC OF SOUTH AFRICA

POLICY FOR THE RECOGNITION OF SOUTH AFRICAN HIGHER EDUCATION INSTITUTIONAL TYPES

DETERMINED IN TERMS OF SECTION 3 OF THE HIGHER EDUCATION ACT, 1997 (ACT NO. 101 OF 1997), AS AMENDED

March 2025

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PREAMBLE

The Higher Education Act, 1997 (Act No. 101 of 1997), as amended (the Act), establishes the legal framework for the existence and recognition of Higher Education Colleges, University Colleges and Universities.

Section 3(1) of the Act, states that:

"(1) the Minister must, taking into consideration the provisions of the Constitution and after consulting the CHE, determine policy on higher education, which policy includes, but is not limited to —

(a) transformation goals and oversight mechanisms for these goals;
(b) articulation and recognition of prior learning frameworks across the education system; and
(c) criteria for recognition as a university, university college, or higher education college".

Once published in the Gazette and tabled in Parliament in terms of section 3(2) of the Act, institutions that meet the criteria contemplated in section 3(1)(c) of the Act may be established, converted or declared as a public university, university college, or higher education college, with the following sections regulating the process:

(a) Section 20 of the Act, governing the establishment of a public higher education institution;
(b) Section 21 of the Act, governing the declaration of education institutions as public higher education institutions;
(c) Section 22 of the Act, governing the consequence of declaration as public higher education institutions;
(d) Section 23 of the Act, governing the merger of public higher education institutions;
(e) Section 24 of the Act, governing the incorporation of subdivisions of public higher education institutions.

Chapter 7 of the Act governs the registration of private higher education institutions (PHEIs). Any institution seeking to operate as a private higher education college, private university college or private university must first be registered as a private higher education institution in accordance with Chapter 7 of the Act.

Private higher education institutions registered in accordance with section 54(1)(c) of the Act may apply to the registrar to have their registration classified as a private higher education college, private university college, or private university, with this classification reflected on their registration certificate and in the official register.

The regulations governing the registration of private higher education institutions will be revised and updated to align with changes in the Act and this policy.

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In terms of section 3(3) of the Act:

"(3) The Minister may, in terms of the policy contemplated in subsection (1) and in the interest of the higher education system as a whole, determine the scope and range of operations of —

(a) public higher education institutions;
(b) private higher education institutions; and
(c) *individual public or private higher education institutions".*

Higher education colleges, university colleges and universities will be subject to a scope and range of operations that meet the criteria for recognition as prescribed by the Minister under section 3(1)(c) of the Act, with the authority to regulate such matters derived from section 69(d), which empowers the Minister to make regulations on any policy matter contemplated in section 3 of the Act.

In terms of funding, public higher education colleges, university colleges and universities are subject to section 39(1), (2) and (3) of the Act. Accordingly, the Minister, after consulting the Council on Higher Education (CHE) and with the concurrence of the Minister of Finance, must determine and publish a funding policy for public higher education, ensuring fairness, transparency and redress of past inequalities (Section 39(1) of the Act).

Public funds must be allocated fairly and transparently (Section 39(2) of the Act), and the Minister may impose reasonable conditions on such allocations (Section 39(3) of the Act). Should a public higher education institution fail to comply with any legal provision or funding condition, the Minister may request compliance within a specified period (Section 39(3A) of the Act). Failure to comply may result in the withholding of funds, subject to due process, including written notice, an opportunity for representations and parliamentary reporting (Sections 39(3B) - (3D) of the Act).

Public higher education institutions must also comply with the planning and reporting framework established under section 69(c) of the Act. The Minister may publish additional regulations for each institutional type in line with section 3(1) of the Act.

This policy establishes a typology for higher education institutions without creating a hierarchical ranking. Instead, it provides a framework that allows institutions to position themselves according to their own objectives and ambitions, ensuring alignment with South Africa's higher education needs.

The criteria, scope and range of operations are determined and published in terms of section 3 of the Act.

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1. ACRONYMS AND ABBREVIATIONS

CAT	Credit Accumulation Transfer
CHE	Council on Higher Education
GFETQSF	General and Further Education and Training Qualification Sub-Framework
HEI	Higher Education Institution
HEQF	Higher Education Qualification Framework
HEQSF	Higher Education Qualification Sub-Framework
NQF	National Qualifications Framework
OQSF	Occupational Qualification Sub-Framework
PHEI	Private Higher Education Institution
PQM	Programme Qualification Mix
PSET	Post School Education and Training
QCTO	Quality Council for Trade and Occupations
RPL	Recognition of Prior Learning
SAQA	South African Qualifications Authority

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2. DEFINITIONS

In this policy, unless otherwise indicated by the context, the following words and expressions have the meanings assigned to them by the Act:

TERM	DEFINITION
Academic employee	means a person appointed to teach or to conduct research at a higher education institution and any other employee designated as such by the council of that institution.
Act	refers to the Higher Education Act, 1997 (Act No. 101 of 1997), as amended.
Articulation	means the process of forming connections between qualifications and/or part-qualifications to allow for the vertical, lateral, and diagonal movement of students within the formal education and training system and its linkages with the world of work.
CHE	means the Council on Higher Education established in terms of section 4 of the Act.
Cognate	means similar or related in content or discipline.
Comparability	means extent of similarity between two or more qualifications or part-qualifications in terms of purpose, level, credits and learning outcomes to determine credit accumulation and/or transfer between institutions. Curricular alignment should also be considered when assessing comparability.
Convert	means the process of conversion as contemplated in section 20(1) of the Act in terms of which an identified higher education institution or subdivision, faculty, school, department, section or component of a public higher education institution or education institution becomes a juristic or new juristic person, as the case may be, on a date specified by the Minister in the Notice contemplated in section 20(1).
Council	means the governing body of a PSET institution.
Hard skills	mean the technical skills required for employment, acquired and enhanced through education and experience.
Higher Education	means all learning programmes which must be registered in accordance with the provisions of the National Qualifications Framework Act, 2008 (Act 67 of 2008), as a qualification or part-qualification on the HEQSF, regardless of whether such programmes are in fact registered or not on the sub-framework.
Higher Education College	means a higher education institution providing higher education, but with a limited scope and range of operations

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TERM	DEFINITION
	and which meets the criteria for recognition as a higher education college as prescribed by the Minister in terms of Section 69(d); and a) Established, merged, converted, deemed to have been established or declared as a public higher education college; or b) Registered as a private higher education college.
Institutional statute	means any statute made by the council of a public higher education institution under section 32 of the Act.
National Qualification Framework	means the national qualifications framework contemplated in the National Qualifications Framework Act, 2008 (Act No. 67 of 2008).
Minister	means the Minister responsible for Higher Education and Training.
Part qualification	means an assessed unit of learning with a defined outcome that is, or will be, registered as part of a qualification on the NQF.
Private higher education institution	means any institution registered or conditionally registered as a private higher education institution in terms of Chapter 7 of the Act.
Programme	means a structured set of learning experiences leading to a qualification, which may be discipline-based, professional, career-focused, trans/inter- or multi-disciplinary in nature. A programme has recognised entry and exit points. All higher education programmes and qualifications must have a core component and may have a fundamental and or elective component depending on the purpose of the programme or the qualification. The credit allocation for core, fundamental and elective learning will depend on the purpose of the programme or qualification. The internal organisation of programmes is otherwise not prescribed by this document.
Provide higher education	means the performing any or all of the following functions: a) Registering of students for higher education; b) taking responsibility for the provision and delivery of a higher education curriculum; c) assessing a of student's performance in a higher education programme; and d) conferring a higher education qualifications; *In the name of the higher education institution concerned.*
Public higher education institution	means any higher education institution that is established, deemed to be established, converted or declared a public higher education institution under the Act.
Qualification	means (a) a qualification or part-qualification that is : (i) registered on the NQF; (ii)offered by a registered, established, declared, or merged and accredited education institution or

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TERM	DEFINITION
	skills development provider in terms of [the NQF Act] the applicable law; and (iii)which has been lawfully obtained; and (b)in relation to a foreign qualification means a qualification or part-qualification – (i) that is lawfully offered by a foreign institution; (ii)obtained from a foreign country; and is evaluated by the SAQA in terms of this Act and found to be authentic.
Range	means the diversity of functions and activities performed by a higher education institution. This may entail the variety of programmes registered on the NQF and activities that an institution may choose to have or offer. It encompasses whether an institution is single-field focused or diversified within a study field or across academic fields such as information technology, health or life sciences. The internationalisation footprint and transformation agenda must be visible.
Recognition of Prior Learning (RPL)	means the principles and processes through which prior knowledge and skills of a person are made visible, mediated and assessed for the purposes of alternative access and admission, recognition and certification, or further learning and development.
SAQA	means the South African Qualifications Authority originally established under the now repealed South African Qualifications Authority Act, 1995 (Act No. 58 of 1995) and continuing under the National Qualifications Framework Act, 2008 (Act No. 67 of 2008). SAQA oversees the further development and implementation of the NQF, ensures the achievement of its objectives and co-ordinates its three sub-frameworks.
Scope	refers to the primary focus area of a higher education institution, including teaching and learning, research and development and community engagement initiatives. It defines the breadth of academic fields in which a higher education institution may operate and highlights areas of specialisation and diversity. This includes the types and levels of qualifications the institution may offer, the skills programs it may provide and its involvement in research activities.
Senate	means the body contemplated in section 28 of the Act and includes an academic board.
Soft skill	means character traits and interpersonal skills that complement hard skills, including but are not limited to critical thinking, problem solving, public speaking, teamwork, leadership and work ethic.
Student	means any person enrolled as a student at any PSET institution.

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TERM	DEFINITION
The Department	means the Department of Higher Education and Training.
University	means a higher education institution providing higher education and with a scope and range of operations, including undergraduate and postgraduate higher education programmes, research and community engagement, which meets the criteria for recognition as a university as prescribed by the Minister under section 69 (d); and (a) established, merged, converted, deemed to have been established or declared as a public university; or (b) registered as a private university, in terms of this Act;
University college	means a higher education institution providing higher education, but with a limited scope and range of operations and which meets the criteria for recognition as a university college as prescribed by the Minister under section 69 (d); and (a) established merged, converted, deemed to have been established or declared as a public university college; or (b) Registered as a private university college.

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3. Introduction

3.1. Schedule 4 of the Constitution of the Republic of South Africa, 1996 (the Constitution) designates tertiary education as a national competence, requiring higher education institutions' programmes and qualifications to be accredited by the relevant Quality Council (QC) and aligned with the Higher Education Qualifications Sub-Framework (HEQSF).

3.2. The *White Paper for Post-School Education and Training* (PSET) (2013) defines the post-school system as comprising all education and training provisions for individuals who have completed; not completed; or never attended school. This system provides a diverse range of educational opportunities and institutional types, offering multiple entry points into the PSET system to support an effective, efficient, responsive and transformed higher education sector.

3.3. These diverse institutions offer various programmes and learning modes that shape the post-school system. While programme content may vary, all qualifications will be aligned with the National Qualifications Framework (NQF) to ensure curriculum comparability and accessible entry points. This approach deliberately establishes an articulated, differentiated PSET system rather than one formed by default.

Background and context

3.4. The development of this policy takes place within the context of the ongoing transformation agenda in South African higher education. In 2001, colleges of education were fully incorporated into the higher education sector as subdivisions of universities and technikons *(Government Gazette, Vol. 426, No. 21913, December 2000)*. However, other public colleges offering higher education qualifications such as colleges of Agriculture, Emergency Medical Services and Nursing continue to operate outside the mandate of the Department. These colleges remain under concurrent national and provincial jurisdiction, with transitional arrangements in place to ensure alignment with the HEQSF.

3.5. The amendments to the Act introduced higher education college category to expand undergraduate programmes in technical and professional fields. These institutions, established under a specific ministerial mandate, are intended to be smaller, less costly and less complex than universities while still offering accredited higher education qualifications and other sub-framework certifications. Public colleges that previously fell outside the post-school education system were intended to be the first of these institutions. Through structured academic pathways, these colleges would collaborate with universities, enabling graduates to pursue postgraduate studies at partner institutions while also providing alternative higher education options for National Senior Certificate holders.

3.6. The university college model was introduced in the Act following the establishment of two new universities in 2013, namely the University of Mpumalanga (UMP) and Sol Plaatje University (SPU). Although classified as universities, these institutions initially did not meet full university requirements. The Council on Higher Education

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(CHE) recommended that future universities be established as university colleges first and transition into fully-fledged universities over ten years. However, the Act did not originally make provisions for this. UMP and SPU were therefore established as universities with ten-to-fifteen-year development plans, relying on accredited programmes from established universities and funding through earmarked grants, which they continue to receive.

3.7. The university college model has historically shaped university development in South Africa, as seen with the University of the Cape of Good Hope (1873), which later became the University of South Africa (UNISA) (1916). This model, widely used internationally, enables gradual institutional growth, allowing universities to develop governance structures, quality assurance mechanisms, policies and systems while solidifying their institutional identity.

3.8. The current higher education landscape includes private providers classified as private higher education institutions. These institutions are registered under section 54 of the Act, which outlines the requirements and process for their registration or provisional registration. Private institutions are generally smaller in scale, often focusing on specialized fields, mainly at the undergraduate level, though some offer qualifications across the three national qualification sub-frameworks. Registration is subject to the fulfilment of section 53 requirements, with provisional registration available in cases where institutions are expected to meet the requirements within a reasonable period.

3.9. The amendment of the Act introduced provisions allowing PHEIs to register as private higher education colleges, private university colleges or private universities. Previously, the registrar could impose conditions under section 60(1) of the Act preventing PHEIs from using "university" or its derivatives in their names. However, amendments now permit registered PHEIs that meet specific criteria to apply for designation as private universities, private university colleges or private higher education colleges. This registration remains subject to the revision of the Regulations for the Registration of PHEIs, ensuring compliance with quality assurance and governance requirements.

The current context

3.10. The National Plan for Post-School Education and Training (NPPSET) (2023) envisions a diverse and high-quality education and training system spanning both public and private sectors. This system comprises distinct institutional missions, specialised programmes, varied delivery methods, research priorities, and community engagements. The Department will oversee planning, funding, quality assurance and monitoring to ensure alignment with national objectives.

3.11. In the public sector, the expansion of multi-site campuses and the establishment of additional campus sites within capable universities and colleges will broaden access to higher education programmes. In the private sector, registered PHEIs will be encouraged to align with the broader PSET system, ensuring that their qualifications promote articulation within and between institutions.

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3.12. Nonetheless, the *White Paper 3* warns against "homogenising pressures" and underscores the importance of recognising the distinct functions and missions of higher education institutions. While institutional types are no longer regarded as entirely separate sectors with exclusive missions, they must still support articulation, collaboration and multi-institutional engagements based on shared objectives and mutual interests. The unique roles of institutions, even within collaborative frameworks, remain central to fostering a diverse and responsive higher education system. This diversity is essential for balancing specialised missions and programme offerings to meet national and regional social, cultural and economic development priorities.

3.13. The implementation of this policy creates opportunities to expand access for first-time entrants into the higher education system. Public institutions currently offering higher education programmes but operating outside the legal framework of the Act may be classified as higher education colleges, ensuring compliance with regulatory requirements.

3.14. To effectively implement the Act and realise its policy objectives, it is essential to establish clear criteria for recognising the three institutional types (private universities, private university colleges and private higher education colleges); and develop precise guidelines defining their scope, range of operations and quality assurance requirements.

4. LEGISLATIVE AND POLICY PROVISIONS

4.1. This policy is developed in alignment with the Constitution (Section 29(2) and (3), and Schedule 4); the Act. The policy aims to fulfil the objectives and goals of the following key legislative and policy frameworks:

4.1.1. *White Paper 3* - A Programme for Higher Education Transformation (1997);
4.1.2. The National Development Plan (NDP) 2030 (2012);
4.1.3. The White Paper for Post-School Education and Training (2013);
4.1.4. The National Qualifications Framework Act (2019);
4.1.5. NQF sub-Frameworks coordinated by SAQA, including: (i) General and Further Education and Training Qualifications Sub-Framework (GFETQSF, 2020), overseen by Umalusi, Council for Quality Assurance in GENFET; (ii) Occupational Qualifications Sub-Framework (OQSF, 2021), overseen by QCTO; (iii) Higher Education Qualifications Sub-Framework (HEQSF, 2014), overseen by CHE; Credit Accumulation and Transfer (2014); and (iv) the National Plan for Post School Education and Training (NPPSET, 2023).

4.2. In ensuring equitable access and quality education across the PSET system, the classification of institutional types is guided by the NQF and its sub-frameworks. The table below outlines qualification types as determined by the Ministerial Determination in Government Notice 1391, published in Gazette No. 44031 on 24 December 2020.

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NQF Sub-Framework/ Quality Council	NQF Level	NQF Sub-Framework and Qualification Type		NQF Sub-Framework/ Quality Council
Higher Education Qualifications Sub-Framework (HEQSF)/Council on Higher Education (CHE)	10	Doctoral Degree (including Professional Doctorate)		
	9	Master's Degree (including Professional Master's Degree)		
	8	Bachelor Honours Degree Postgraduate Diploma Bachelor's Degree		
	7	Bachelor's Degree Advanced Diploma	Specialised Occupational Diploma	Occupational Qualifications Sub-Framework (OQSF) Quality Council for Trades and Occupations (QCTO)
	6	Diploma Advanced Certificate	Advanced Occupational Diploma	
	5	Higher Certificate	Occupational Diploma Advanced Occupational Certificate	
	4	National Certificate	Higher Occupational Certificate	
General and Further Education and Training Qualifications Sub-Framework (GFETQSF)/ Umalusi	3	Intermediate Certificate	National Occupational Certificate	
	2	Elementary Certificate	Intermediate Occupational Certificate	
	1	General Certificate	Elementary Occupational Certificate	
			General Occupational Certificate	

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5. PURPOSE

5.1. This policy determination is made in terms of sections 3(1(c) and 3(3) of the Act. By defining the scope and range of the operational framework of different institutional types, the policy aims to:

5.1.1. promote expanded access to a broad range of higher education institutions through strengthening learning pathways that are clear, and articulation barriers are removed.

5.1.2. promote the development of a flexible learning system that progressively covers the entire higher education sector, featuring diverse institutional missions, varied programme mixes, and a combination of distance and face-to-face delivery methods. This system should blend appropriate, cost-effective resource-based learning and teaching technologies with robust support systems.

5.2. The ultimate purpose, therefore, is to develop a higher education system that has a common goal of meeting national and regional needs in social, cultural and economic development based on diversified institutional types with varied and appropriate programme choices and combinations, thus contributing to diminishing distinction between historically advantaged and historically disadvantaged institutions which are a legacy of South Africa's history, memory and consciousness.

6. HIGHER EDUCATION COLLEGES

6.1. The classification of Higher Education Colleges are based on their scope of operations, programme offerings, and governance structures, as prescribed by the Act, regarding council composition and functions. These institutions primarily focus on undergraduate education and skills development, specialising in fields that integrate theoretical knowledge with practical application.

Scope and Range

To qualify as a Higher Education College, an institution must meet the following criteria regarding its scope and range of operations:

6.2. Specialise in professional programmes in niche areas and continuous skills development. It must offer programmes within a specific field or discipline, or across a limited number of interconnected fields or domains.

6.3. Prioritise undergraduate teaching and learning, adopting a holistic approach that integrates both 'soft' and 'hard' skills across a limited number of cognate fields. Qualifications offerings must begin at the Higher Certificate level to ensure articulation and progression.

6.4. At least 80% of the programmes must be aligned with the HEQSF, primarily leading to:

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6.4.1. Higher Certificates (occupational, vocational, foundational, academic);
6.4.2. Advanced Certificates;
6.4.3. Diplomas (occupational, vocational, academic);
6.4.4. Advanced Diplomas;
6.4.5. Bachelor's Degrees;

6.5. May offer short skills courses that, while not linked to formal qualifications, support continuous professional development or help individuals acquire specific industry-related skills.
6.6. May conduct applied research and engage in community development. Institutions should be well-resourced to pursue these objectives. They should locate themselves in the broader development agenda of where they are geographically located.
6.7. A limited number of programmes may lead to qualifications or part qualification under the OQSF in one or 2 specialised fields. It may allocate up to 20% of its formal qualifications to programmes at NQF Levels 3 to 8 under the OQSF, primarily leading to industry-relevant credentials, such as:

6.7.1. National Occupational Certificate;
6.7.2. Higher Occupational Certificate;
6.7.3. Advanced Occupational Certificate;
6.7.4. Occupational Diploma;
6.7.5. Advanced Occupational Diploma.

6.8. Once an institution has established a proven track record, it may be permitted to offer a Specialised Occupational Diploma (NQF Level 8).
6.9. Higher Education Colleges that specialise in fields such as nursing, emergency medical care and agriculture will initially offer Higher Certificates and Diplomas (NQF Levels 5 to 7). As a minimum requirement, newly established institutions must graduate at least three cohorts before applying to offer Advanced Diplomas and Bachelor's Degrees. However, institutions with a proven track record may apply to offer postgraduate qualifications.
6.10. Higher Education Colleges may apply to offer postgraduate qualifications (NQF Levels 8), provided they already offer Bachelor's degrees and have adequate resources to support postgraduate programs. However, such qualifications must be registered on the HEQSF in compliance with section 65D of the Act. Approval is subject to compliance with the HEQSF, demonstration of adequate institutional capacity and formal approval by the Minister for public institutions or the Registrar for private institutions.
6.11. Qualifications must articulate vertically, diagonally, and horizontally within and across institutions. Partnerships and collaborations with other higher education institutions are encouraged to facilitate seamless articulation into university colleges and Universities.

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Governance

Public Higher Education colleges

6.12. The governance and management structures of public Higher Education Colleges shall adhere to the provisions outlined in Chapter 4 of Act. For the purposes of this policy, it is proposed that the governance and management of these institutions shall include the following:

6.13. The council of a Higher Education College, which shall consist of 10 members made up of;

6.13.1. A chairperson; and

6.13.2. three persons appointed by the relevant minister

6.13.3. a member of senate elected by the senate

6.13.4. an academic employee of the public higher education college elected by such employees

6.13.5. a student of the public higher education college, elected by the students' representative council

6.13.6. an employee other than academic employees, elected by such employees of the public higher education college

6.13.7. such additional persons as may be determined by the institutional statute.

6.14. The majority of the council members shall possess knowledge and expertise in: –

6.14.1. higher education in general; and

6.14.2. the specific scope for which the institution has been established, particularly for specialised higher education colleges.

6.15. The council may co-opt persons to the board for a period not exceeding the term of office of the board. These co-opted persons shall have no voting rights.

6.16. The Chairperson of the Council shall be appointed following the procedure outlined in the Institutional Statute, as prescribed in section 32 of the Act. If the institution has not yet developed its own institutional statute, the standard institutional statute provided by the Minister shall apply.

6.17. For the purposes of this policy, it is proposed that the council must establish:

6.17.1. an executive committee;

6.17.2. an audit and risk committee;

6.17.3. a human resources and remuneration committee; and

6.17.4. any other committee(s) as prescribed by the Minister.

6.18. The senate shall be responsible for the academic functions within the institution and, as stipulated in section 28 of the Act, it is "*accountable to the Council for the academic*

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functions of the public higher education institution and must perform such other functions as may be delegated or assigned to it by the Council". The senate must consist of:

6.18.1. principal;
6.18.2. vice-principals;
6.18.3. academic employees of the public Higher Education College;
6.18.4. employees of the public Higher Education College other than academic employees;
6.18.5. members of the students' representative council; and
6.18.6. such additional persons as may be determined by the institutional statute, which must be approved by the Minister as per section 33 of the Act, or if no institutional statute exists, as determined by the standard institutional statute prescribed by the Minister.

6.19. The number of persons contemplated in subsections **6.18.1** to **6.1.6,** as well as the manner of their appointment or election, shall be defined in the institutional statute or, if no institutional statute exists, as defined in the standard institutional statute prescribed by the Minister.

6.20. The majority of the senate members must be academic employees of the of the public Higher Education College.

6.21. The management of a public Higher Education College shall be overseen by a principal, supported by an executive team, as outlined in the institutional statute and approved by the Minister.

Private Higher Education colleges

6.22. Registered PHEIs, regulated under Chapter 7 of the Act, are registered as companies in terms of the Companies Act 2008 (Act No. 17 of 2008) (the Companies Act). Their governance structure shall align with the Companies Act, as specified in the Regulations for Private Higher Education Institutions. The Registrar will align these governance structures with the Companies Act through the Regulations for Private Higher Education Institutions.

7. UNIVERSITY COLLEGE

7.1. A university college is a higher education institution that offers higher education with a limited scope and range focusing on undergraduate, continuing skills and professional programmes. It must establish niche areas of specialisation supported by both academia and industry. A public university college may be declared as an incorporated subdivision of a university, facilitating the developmental trajectory of new universities. The integration of a university college into an established university strengthens articulation pathways and expands market opportunities for graduates.

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7.2. A university college is designed to develop into a university over time. It may operate as a standalone institution or as an incorporated subdivision of an established university, with funding allocated for this purpose.

7.3. Higher education institutions may progress towards declaration as a university, there is also a possibility for them to remain as a higher education college or University College. This approach strengthens the diversity of higher education institutions, guaranteeing that students have access to a variety or multitude of educational opportunities aligned with their interests and career aspirations.

7.4. To be recognised as a public university college, an institution must be established as a new institution, converted from an existing higher education institution, or declared as a university college by the Minister in accordance with section 21 of the Act, read with any other relevant provisions governing the classification and conversion of higher education institutions (i.e. Sections 3(1), 20(4), 23 and 65AB of the Act, where applicable).

7.5. Any contemplated public university college must demonstrate their evolution/ developmental trajectory from a Higher Education College. This phased approach advances the development of essential administrative, management, academic, and quality assurance systems, which are crucial for the successful establishment of an autonomous or independent university. The process is supported and guided by the institution to which the university college is governed by.

7.6. A university college may co-operate with another higher education institution, that is aligned with their planned growth trajectory (i.e. traditional, comprehensive or university of technology), while maintaining a level of autonomy. The nature of the co-operation can vary and could involve aspects such as academic oversight, governance structures, research collaboration and degree conferment. The Minister may determine the conditions in accordance with the provisions of the Act and relevant policies.

7.7. For a public institution, the decision to declared a university college shall be based on a national plan for the expansion and diversification of university education, with funding allocated for this purpose in the relevant government budget vote.

7.8. For an existing private higher education institution, an application for classification as a private university college must be made in accordance with the applicable regulations governing registration.

7.9. A solid foundation in administration, management, academics and governance must be established before a fully autonomous university can be created.
The Minister may, after consulting the CHE and by notice in the Gazette, establish a public University College, provided that funding for its infrastructure and operations has been appropriated by Parliament for this purpose (section 20(1) of the Act).

7.10. Private University Colleges may be established by independent entities, subject to registration with the Registrar in terms of section 54(1) and compliance with the Act.

7.11. Private higher education institutions seeking classification as a private university college must apply through the registrar.

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Scope and Range

7.12. Initially, a university college will offer a selected range of undergraduate qualifications aligned with its future mandate, as determined by a feasibility study. For newly established public university college, this phase may take up to nine (9) years. However, if it is converted or declared from an existing college or campus of a university, it should immediately offer a full range of undergraduate programmes, and possibly some postgraduate programmes, with a much faster developmental trajectory. This rapid expansion is supported by the existing infrastructure, resources, and institutional framework inherited from the affiliated higher education institution.

7.13. Focused on undergraduate teaching and learning, a university college shall offer a broader range of cognate fields than Higher Education Colleges, ensuring alignment with its developmental trajectory. The programme qualification mix of the university college will be in line with its planned trajectory. Should it envisage to be a University of Technology, it must offer certificates and diplomas as well as bachelor's degrees in technology related fields. Should it be intended to be research led, research intensive university, it would not be expected to offer certificates and diplomas, but would be expected to offer 360C and 480C Bachelor Degrees.

7.14. At least 85% of a university college's qualifications must be on the HEQSF. Depending on its development trajectory as a traditional, comprehensive or university of technology, it will offer a selection of undergraduate qualifications primarily leading to:

7.14.1. Higher Certificates (occupational, vocational, foundational, academic);
7.14.2. Advanced Certificates;
7.14.3. Diplomas (occupational, vocational, academic);
7.14.4. Advanced Diplomas;
7.14.5. Bachelor's Degrees;
7.14.6. Bachelor's Honours Degrees;
7.14.7. Postgraduate Diplomas.

7.15. Additionally, a university college may offer short skills courses that, while not linked to formal qualifications, support continuous professional development or industry-specific skills.

7.16. Once undergraduate programmes are established, a university college will expand its offerings, introduce postgraduate qualifications and engage in community development. Within ten (10) years, it should provide a full range of undergraduate and substantive postgraduate programmes in line with its future university mandate.

7.17. A university college must develop a research niche aligned with its teaching and learning focus, ensuring consistency with its intended trajectory, whether as a traditional university, comprehensive university or university of technology. Sufficient resources must be allocated to support this objective.

7.18. Qualifications must articulate vertically and horizontally within and across institutions, facilitating seamless progression and collaboration.

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Governance

7.19. The governance and management structures of public university colleges shall align with Chapter 4 of the Act. For registered Private Higher Education Institutions, regulated under Chapter 7 of the Act, governance structures shall comply with their registration as companies under the Companies Act.

7.20. The council of a public university college shall govern the institution in accordance with its statute and applicable Ministerial determinations. Where a university college is established as part of an existing public university structure, its governance may include collaboration with the university's council, subject to approval by the Department.

7.21. The council of a university college consists of 15 ordinary members made up of -

7.21.1. A chairperson; and
7.21.2. four persons appointed by the relevant minister

7.21.3. a member of senate elected by the senate

7.21.4. an academic employee of the public higher education institution elected by such employees

7.21.5. a student of the public higher education institution, elected by the students' representative council

7.21.6. an employee other than academic employees, elected by such employees of the public higher education institution

7.21.7. such additional persons as may be determined by the institutional statute.

7.22. The majority of members of the council must possess specific knowledge and experience in: -

7.22.1. higher education in general; and
7.22.2. the scope of application for which a specialised institution has been established, in the case of a university college that was initially established as a specialised Higher Education College.
7.22.3. The council may co-opt persons to the board for a period not exceeding the term of office of the board. These co-opted persons shall have no voting rights.

7.23. The Chairperson of the Council shall be appointed in accordance with the procedure outlined in the Institutional Statute, as contemplated in section 32 of the Act.

7.24. The council must establish:

7.24.1. an executive committee;
7.24.2. an audit and risk committee;
7.24.3. a human resources and remuneration committee; and
7.24.4. any other committee(s) as prescribed by the Minister.

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7.25. The Senate of a university college is responsible for the academic functions of the institution and, as stipulated in section 28 of the Act, is *"accountable to the Council for the academic functions of the public higher education institution and must perform such other functions as may be delegated or assigned to it by the Council"*. The senate must consist of: -

7.25.1. principal;
7.25.2. vice-principals;
7.25.3. academic employees of the university college;
7.25.4. employees of the university college other than academic employees;
7.25.5. members of the council;
7.25.6. members of the students' representative council; and
7.25.7. such additional persons as may be determined by the institutional statute.

7.26. The number of persons contemplated in each of the subsections from **7.25.1** to **7.25.7**, as well as the manner of their appointment or election, shall be defined in the institutional statute or, if no institutional statute exists, as defined in the standard institutional statute prescribed by the Minister.

7.27. The majority of members of the Senate must be academic employees of the university college.

7.28. University college shall be managed by a principal and supported by an executive team as stipulated in the Institutional Statute and approved by the Minister.

8. UNIVERSITY

8.1. In general, universities are large-scale institutions with a significant student population, faculty, staff and infrastructure. Depending on the typology classification (comprehensive, traditional or university of technology), they have the capacity to accommodate a diverse range of academic programs, research activities, community development and support services. Universities focus on both undergraduate and postgraduate higher education qualifications across a wide range of disciplines, fields or domains of study. They are active in research, knowledge production, and innovation and are engaged within local, national and international communities.

8.2. There are three typologies recognised for universities in South Africa, namely: -

8.2.1. *Comprehensive Universities*: These institutions offer a combination of general formative/academic degrees, professional degrees and career-oriented vocational undergraduate programs. They also provide a blend of research-focused and professionally oriented diplomas and degrees at the postgraduate level.

8.2.2. *Traditional Universities*: These institutions offer a range of general formative, academic degrees and professional degrees at the undergraduate level, as well as a variety of research-oriented degrees at the postgraduate level.

8.2.3. *Universities of Technology:* These institutions focus on career-oriented vocational, technology-based degrees, professional degrees, diplomas and certificates at the

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undergraduate level. They also offer applied technical and professionally oriented degrees at the postgraduate levels.

8.3. Depending on the range of operations across undergraduate and postgraduate teaching and research, the emphasis on these activities will determine whether a university is teaching-led, comprehensive or research-led. In the case of a public university, the Minister shall determine the mandate of a university as traditional, comprehensive or university of technology. This mandate will be maintained through the Programme and Qualification Mix (PQM) and enrolment plan.

8.4. Private university colleges seeking classification as a private university must apply through the Registrar.

Scope and Range

8.5. To be recognized as a university, an institution must offer a range of HEQSF qualifications from levels 5 to 10.

8.6. Traditional universities are mandated to offer HEQSF qualifications from NQF levels 7 to 10.

8.7. Universities of Technology are mandated to offer HEQSF qualifications from NQF level 5-10 alongside the OQSF in the areas of technology, vocational and career-related programs.

8.8. Comprehensive universities can offer a broad range of HEQSF qualifications from NQF level 5-10 alongside OQSF qualifications.

8.9. At least 95% of formal qualifications must be on the HEQSF. The remaining 5% may comprise some program offerings that may lead to qualifications or part qualifications on the OQSF and may also include short skills programs designed for continuous professional development of graduates or general continuing education for adults.

8.10. A university: -

8.10.1. must undertake research and produce knowledge that contributes to national development needs and international scholarship. They must also demonstrate a culture of sustained scholarship, evidenced by peer-reviewed academic publications that inform teaching and learning across all academic fields.

8.10.2. must be involved in activities within its locality contributing to the wider development of its community.

8.10.3. must demonstrate tangible outcomes in academic internationalization activities.

8.10.4. must ensure that its research activities are aligned with its vision, mission and mandate, thereby supporting the institution's broader goals and strategic objectives.

8.11. A fair number of HEQSF programmes must be at doctoral level.

8.12. At least 5% of the enrolments in HEQSF qualifications must be at the postgraduate level.

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Governance

8.13. The governance and management structures of universities shall adhere to the provisions set out in Chapter 4 of the Act.

8.14. Registered Private Higher Education Institutions, governed under Chapter 7 of the Act, are incorporated as companies under the Companies Act, which establishes their governance structure. The Registrar has the authority to further define the governance structure of private higher education institutions, beyond what is stipulated in the Companies Act. Additionally, the Minister may issue regulations that align with the Act regarding the classification (comprehensive, traditional or university of technology) of private higher education institutions.

9. PROGRESSION

9.1. The Minister may establish public higher education institutions based on societal needs and available funding. The establishment of higher education institutions will be influenced by economic demands and aligned with the District Development Model to ensure responsiveness to regional and national priorities.

9.2. Over time, the Minister may establish or declare additional public higher education institutions, allowing identified higher education colleges the opportunity to progress to university college status should they choose to pursue this trajectory. Such progression will be contingent upon meeting the requirements set out in this policy, with a strong emphasis on enhancing educational quality and strengthening niche areas of expertise.

9.3. A public Higher Education College or a campus of an existing university may be identified for conversion or declaration as a university college, in accordance with section 21 of the Act, if it demonstrates the potential to evolve into a university over time. The institution must show stability, offer a diverse range of undergraduate qualifications (NQF Levels 5 to 7) and possess the capability to conduct research and offer postgraduate qualifications (NQF Levels 8 to 10) in specific fields or domains subject to ministers approval.

9.4. Once the university college demonstrates sustained and sufficient student enrolments across undergraduate and postgraduate programmes, along with active research, community engagement and stable management capability, the Minister may, subject to section 21 of the Act, declare it an independent university following due diligence.

9.5. The progression of an institution within the higher education framework is not mandatory but based on institutional readiness, capacity and compliance with the stipulated criteria. Some higher education colleges may opt to remain as such, reinforcing the Department's commitment to fostering a diverse and sustainable post-school education and training landscape.

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10. TRANSITIONAL ARRANGEMENTS

10.1. The existing institutional statutes and rules of public higher education institutions shall remain in force upon the commencement of this policy and shall continue to apply until amended in accordance with the provisions of the Act.

10.1. Registered private higher education institutions shall remain subject to the regulations published in terms of the Act.

10.2. In cases where a public higher education institution has not yet developed an institutional statute, the standard institutional statute, as contemplated in section 33(3) of the Act, shall apply.

10.3. The Act shall continue to govern the registration of private higher education institutions. By default, registered private higher education institutions shall be classified as higher education colleges.

10.4. Institutions seeking reclassification as private university colleges or private universities must submit an application in accordance with the prescribed regulations. Such applications must include evidence of institutional progression from a higher education college to a university college and ultimately to university status, along with supporting documentation. Additional requirements applicable to private university colleges and private universities shall also apply.

11. CHANGE OF TYPE AND SCOPE OF HIGHER EDUCATION INSTITUTION

11.1. In terms of section 65AB of the Act, the Minister may, at the request of the council of the institution concerned, and after consultation with the CHE, by notice in the Gazette, change the type of a higher education institution or amend or remove any restrictions on its scope and operations, as contemplated in sections 3(1) and 20(4) of the Act.

11.2. Any such decision must be taken in accordance with procedurally fair administrative action, which may vary depending on the circumstance of each case. The Department will ensure compliance with the Promotion of Administrative Justice Act, 2000 (Act No. 3 of 2000) (PAJA).

11.3. Higher education institutions will be given adequate notice and a reasonable opportunity to make representation or appeal, in line with the applicable regulations. If it is determined that an institution is unable to fulfil its objectives within its current classification as defined in the Act and policy, a recommendation for conversion may be made.

11.4. Before exercising the powers outlined in paragraph 11.1, the Minister must comply with the provisions of section 23(2) of the Act, with the necessary contextual adaptations.

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11.5. The provisions of sections 65AB (1), (2) and (3) of the Act apply to registered private higher education institutions, subject to necessary modifications. These provisions enable the Minister to alter the type or scope of private institutions under similar conditions, ensuring alignment with legislative and regulatory frameworks.

11.6. Before the establishment, conversion or declaration of an institution as a higher education college, university college or university, feasibility studies must be undertaken. A funded development plan must be produced, and funding (whether through the public higher education institution's budget or private funds for private institutions) must be identified and secured for the Minister to consider its establishment, conversion or declaration in the case of a public institution, or registration in the case of a private institution. Private institutions must demonstrate sufficient funding. Each institution may have the potential to expand, develop and transition into a different institutional type over time.

12. APPLICATION, REPORTING AND IMPLEMENTATION

12.1. This policy applies to all Higher Education Institutions as defined in section 1 of the Act.

12.2. Compliance with the criteria set out in this policy will be monitored through existing reporting regulations applicable to both public and private higher education institutions. Where necessary, these reporting tools may be revised to enhance oversight and ensure alignment with the policy objectives.

12.3. Public higher education institutions that fail to meet the criteria for their officially recognised institutional type will be subject to a formal review to assess their suitability. Based on the review, the Minister may take appropriate action, including reclassification as a different institutional type or incorporation as a subdivision of an existing higher education institution in terms of section 21 of the Act. Institutions deemed unsustainable may be subject to closure in accordance with section 25 of the Act.

12.4. Private higher education institutions that fail to meet the criteria for their designated institutional type will be subject to deregistration and/or modification of their registration status, in accordance with the regulations governing the registration PHEIs as published under section 60 of the Act.

13. REVIEW OF THE CRITERIA

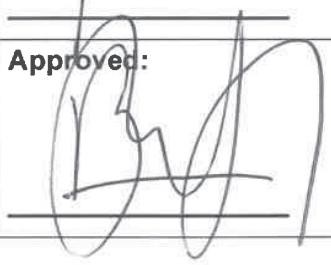
13.1. The criteria for the recognition of institutional types shall be reviewed and updated every five (5) years or as necessary, in response to developments within the higher education landscape.

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14.EFFECTIVE DATE OF IMPLEMENTATION

14.1. This policy shall come into effect on the date of its publication in the Gazette.

15.APPROVAL

JOB DESIGNATION	NAME	SIGNATURE	DATE
Director General	Dr. Nkosinathi Sishi	**Recommended:** 	18/09/2025
Minister: Higher Education and Training	Mr. Buti Kgwaridi Manamela, MP	**Approved:** 	19/9/2025

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NON-GOVERNMENTAL ORGANIZATION

NO. 6742 **17 October 2025**

AGRICULTURAL PRODUCT STANDARDS ACT, 1990 (ACT No. 119 OF 1990)

INVITATION OF PUBLIC COMMENTS IN RELATION TO THE PROPOSED INSPECTION FEES FOR 2026 BY THE DESIGNATED ASSIGNEE, FOOD SAFETY AGENCY (PTY) LTD

The Executive Officer: Agricultural Product Standards hereby invites comments on the proposed inspection fees in terms of section 3 of the Agricultural Product Standards Act, 1990 (Act no. 119 of 1990), as amended. The proposed inspection fees are derived from the business plan and budget, which can be accessed on the Department's website, thus enabling stakeholders to make informed comments or representations to the Executive Officer.

The proposed inspection fees for 2026 by **Food Safety Agency (Pty) Ltd** are as follows:

Category of fees	**Current Gazetted Fees**	**Proposed Fees for 2026 (Inflationary increase of 6%)**
Inspection fees:		
Normal time (08:00 – 16:00)	R510.00 per hour	R540.60 per hour
Normal overtime (Mon - Sat)	R567.00 per hour	R601.02 per hour
Sundays and public holidays	R680.00 per hour	R720.80 per hour
Kilometre rate	R6.50 per kilometre	R6.50 per kilometre
Sampling fees:		
Protein content (Meat content)	R503.00 per sample	R533.18 per sample
Fat content	R826.00 per sample	R875.56 per sample
Soya content	R1 665.00 per sample	R1 764.90 per sample
Starch content	R1 472.00 per sample	R1 560.32 per sample
Calcium determination (MRM only)	R379.00 per sample	R401.74 per sample
Meat species identification (DNA)	R2 605.00 per sample	R2 761.30 per sample
Physical test (Coated products)	R200.00 per sample	R212.00 per sample

Comments and representations must be submitted within **30 days** from the date of publication of this Notice to the following address:

Executive Officer: Agricultural Product Standards
Department of Agriculture
Harvest House Building, 30 Hamilton Street, Room no. 130, Arcadia, Pretoria
Tel: 012 319 6121
Email: MbulaheniM@nda.gov.za
Departmental website: https://www.nda.gov.za/index.php/core-business/agricultural-production/inspection-services/food-safety-quality-assurance



BILLY MALOSE MAKHAFOLA
EXECUTIVE OFFICER: AGRICULTURAL PRODUCT STANDARDS

DEPARTMENT OF SOCIAL DEVELOPMENT

NO. 6743 **17 October 2025**

CHILD JUSTICE ACT 75, 2008

ACCREDITED DIVERSION SERVICE PROVIDERS AND DIVERSION PROGRAMMES

The Minister of Social Development in terms of Section 56 (3) (a) of the Child Justice Act, 2008 (Act No. 75 of 2008) publishes particulars of each accredited diversion service provider and diversion programme in the schedule.

This notice covers diversion programmes and diversion service providers that are granted an accredited status.

Diversion programmes and diversion service providers that have been granted candidacy status, have received certificates and are allowed to operate, based on condition(s) set by the accrediting committee. The Policy Framework on Accreditation of Diversion Services in South Africa defines candidacy status as a 'pre-accreditation status, awarded to an organization pursuing accreditation... Candidacy indicates that an organization or programme has achieved recognition and is progressing towards receiving full accreditation, and has the potential to achieve compliance with standards within two years'.

1

ACCREDITED DIVERSION PROGRAMMES.

SECTION 56(3) (a) of the Child Justice Act 75/2008.

NAME OF ENTITY	REG. NUMBER/ ACCREDITATION CERTIFICATE NUMBER	OPERATIONAL SITE	PROGRAMME	STATUS AWARDED
PUBLIC ENTITY				
NATIONAL DEPARTMENT OF SOCIAL DEVELOPMENT ACCREDITED DIVERSION PROGRAMMES				
National Department of Social Development 134 Pretorius Street HSRC Building, Pretoria 0001	National- 06-2025-P01	All provinces	• Rhythm of life • Reverse your Thinking • Wakeup call • Mind the gap • In the Mirror • Stop to Start • Playing through the forest • I am me • Planting Hope	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.

EASTERN CAPE PROVINCE. ACCREDITED DIVERSION PROGRAMMES.

SECTION 56(3) (a) of the Child Justice Act 75/2008.

NAME OF ENTITY	REG. NUMBER/ ACCREDITATION CERTIFICATE NUMBER	OPERATIONAL SITE	PROGRAMME	STATUS AWARDED
PUBLIC ENTITY				
EASTERN CAPE ACCREDITED DIVERSION SERVICES				

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Aberdeen Library Hall Eastern Cape Department of Social Development Aberdeen, 6270	EC- 06-2025-P01	Aberdeen Library Hall	• Rhythm of life • Reverse your Thinking • Wakeup call • Mind the gap • In the Mirror • Stop to Start • Playing through the forest • I am me • Planting Hope	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
Adelaide Service Delivery Point Eastern Cape Department of Social Development Adelaide, 5760	EC- 06-2025-P02	Adelaide Service Delivery Point	• Rhythm of life • Reverse your Thinking • Wakeup call • Mind the gap • In the Mirror • Stop to Start • Playing through the forest • I am me • Planting hope	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.

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Davies Secondary School Eastern Cape Department of Social Development Butterworth, 4960	EC- 06-2025-P03	Davies Secondary School	• Rhythm of life • Reverse your Thinking • Wakeup call • Mind the gap • In the Mirror • Stop to Start • Playing through the forest • I am me • Planting Hope	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
Butterworth Service Delivery Point Eastern Cape Department of Social Development Butterworth, 4960	EC- 06-2025-P011	Butterworth Service Delivery Point	• Rhythm of life • Reverse your Thinking • Wakeup call • Mind the gap • In the Mirror • Stop to Start • Playing through the forest • I am me • Planting Hope •	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
Coghlan Service Delivery Point Eastern Cape Department of Social Development	EC- 06-2025-P04	Coghlan Service Delivery Point	• Rhythm of life • Reverse your Thinking • Wakeup call	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four

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221 Power Station Street, Coghlan 5054			• Mind the gap • In the Mirror • Stop to Start • Playing through the forest • I am me • Planting hope	years, from 30/06/2025 – 01/07/2029.
Graaff-Reinet Service Delivery Point Eastern Cape Department of Social Development Graaff-Reinet, 6280	EC- 06-2025-P06	Graaff-Reinet Service Delivery Point , 11 Murray Street, Graaff-Reinet, 6280	• Rhythm of life • Reverse your Thinking • Wakeup call • Mind the gap • In the Mirror • Stop to Start • Playing through the forest • I am me • Planting hope	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
Jansenville Service Delivery Point Eastern Cape Department of Social Development Jansenville, 6265	EC- 06-2025-P10	Jansenville SAPS Office	• Rhythm of life • Reverse your Thinking • Wakeup call • Mind the gap • In the Mirror	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
Masonwabe Primary School Eastern Cape Department of Social Development Engcobo, 5050	EC- 06-2025-P08	Masonwabe Primary School	• Rhythm of life • Reverse your Thinking	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four

			• Wakeup call • Mind the gap • In the Mirror • Stop to Start • Playing through the forest • I am me • Planting hope	years, from 30/06/2025 – 01/07/2029.
Ngcobo Service Delivery Point Eastern Cape Department of Social Development Engcobo, 5050	EC- 06-2025-P12	Ngcobo Service Delivery Point	• Rhythm of life • Reverse your Thinking • Wakeup call • Mind the gap • In the Mirror • Stop to Start • Playing through the forest • I am me • Planting hope	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
Ngqeleni Service Delivery Point Eastern Cape Department of Social Development King George Street, Ngqeleni 5140	EC- 06-2025-P07	Ngqeleni Service Delivery Point	• Rhythm of life • Reverse your Thinking • Wakeup call • Mind the gap • In the Mirror • Stop to Start • Playing through the forest	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.

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			• I am me • Planting Hope	
Peddie Service Delivery Point : Family Resource Centre Eastern Cape Department of Social Development ERF 311 Main Road, Peddie, 5650	EC- 06-2025-P09	Peddie Service Delivery Point : Family Resource Centre	• Rhythm of life • Reverse your Thinking • Wakeup call • Mind the gap • In the Mirror • Stop to Start • Playing through the forest • I am me • Planting hope	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.

EASTERN CAPE PROVINCE. ACCREDITED DIVERSION SERVICE PROVIDERS.
SECTION 56(3) (a) of the Child Justice Act 75/2008

NAME OF ENTITY	REG. NUMBER/ ACCREDITATION CERTIFICATE NUMBER	PHYSICAL ADDRESS	CONTACT DETAILS	CONTACT PERSON	STATUS AWARDED
PUBLIC ENTITY					
EASTERN CAPE DEPERTMENT OF SOCIAL DEVELOPMENT					
Aberdeen Library Hall Eastern Cape Department of Social Development	EC-06-2025-SP 01	Voortrekker Street, Aberdeen	Mobile: 0609145431	Nomsa Foloti	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four

Aberdeen, 6270					years, from 30/06/2025 – 01/07/2029.
Adelaide Service Delivery Point Eastern Cape Department of Social Development Adelaide, 5760	EC-06-2025-SP 11	16 William Street Adelaide 5760	Landline: 046 684 0820 Mobile: 063 340 3977	Mrs Fundiswa Badi	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
Davies Secondary School Eastern Cape Department of Social Development Butterworth, 4960	EC-06-2025-SP 09	No. 39 Blanck Street Butterworth 4960	Landline: 047 401 9362 Mobile: 073 327 9570	Phumza Kiviet	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
Coghlan Service Delivery Point Eastern Cape Department of Social Development 221 Power Station Street, Coghlan 5054	EC-06-2025-SP 02	ERF N0. 59, Coghlan Service Delivery Point, Ngcobo, 5050	Landline: 0475485421 Mobile: 0769105803	Zimasa Mjikwa	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
Graaff-Reinet Service Delivery Point Eastern Cape Department of Social Development Graaff-Reinet, 6280	EC-06-2025-SP 03	21 Somerset Street Graaff-Reinet 6280	Landline: 049 807 3900 Mobile: 064 605 9912	Joy Ngcwangu	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
Jansenville Local Service Office	EC-06-2025-SP 04	3 Brug Street Jansenville 6265	Landline: 049 -836 0127 Mobile: 0646059187	Hazel Wanga	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008

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Eastern Cape Department of Social Development Jansenville, 6265					(Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
Masonwabe Primary School Eastern Cape Department of Social Development Ngcobo, 5050	EC-06-2025-SP 10	Ngcobo 5050	Mobile: 0834387339/ 829265989	Neseka Mageleni	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
Ngcobo Service Delivery Point Eastern Cape Department of Social Development Ngcobo, 5050	EC-06-2025-SP 05	NO 221 Powerstation Street Ngcobo 5050	Mobile: 0834387339/ 829265989	Neseka Mageleni	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
Ngqeleni Service Delivery Point Eastern Cape Department of Social Development King George Street, Ngqeleni 5140	EC-06-2025-SP 06	Ngqeleni Service Delivery Point, Extension 4, Ngqeleni, 5140	Mobile: 0660686813	Veliswa Mkosana	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
Ntabethemba Service Delivery Point Department of Social Development Ntabethemba, 5365	EC-06-2025-SP 08	Tentergate Village, Ntabethemba 5365	Landline: 040 084 0135 Mobile: 064 603 0015	Kholokazi Maxhwane	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.

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Peddie Service Delivery Point : Family Resource Centre Eastern Cape Department of Social Development ERF 311 Main Road, Peddie, 5640	EC-06-2025-SP 07	Peddie, 5640	Landline:040 673 3304 Mobile: 079 487 6205	Luleka Gugwana	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.

GAUTENG PROVINCE. ACCREDITED DIVERSION SERVICE PROVIDERS.
SECTION 56(3) (a) of the Child Justice Act 75/2008

NAME OF ENTITY	REG. NUMBER/ ACCREDITATION CERTIFICATE NUMBER	PHYSICAL ADDRESS	CONTACT DETAILS	CONTACT PERSON	STATUS AWARDED
PUBLIC ENTITY					
Roodepoort Service Office Gauteng Department of Social Development	GP-06-2025-SP 01	40 Hoofd Street, Roodepoort, 1700	Landline: 011 950 7790 Mobile: 079 883 7152	Ms Kgomotso Phofa	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
NAFCOC Centre Service Office Gauteng Department of Social Development	GP-06-2025-SP 02	303 Soutpan Road, Block F, Soshanguve 0152	Landline:012 359 3300 Mobile: 079 527 1752	Ms Fhatuwani Musie	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.

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MES Kempton Park Service Office Gauteng Department of Social Development	GP-06-2025-SP 03	06 Kempton Street, Kempton Park 1620	Mobile: 066 291 4734	Ms Shirley Hlungwane	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
Palm Ridge Magistrates' Court Service Office Gauteng Department of Social Development	GP-06-2025-SP 04	K146 Palm Ridge Road, Palm Ridge 1458	Landline: 011 820 0595 Mobile: 082 469 3125	Ms Zakithi Msomi	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
Thusong Multipurpose Centre: Khutsong Service Office (SAPS) Gauteng Department of Social Development	GP-06-2025-SP 05	RL 004 Plot Sompane, Khutsong 2499	Landline: 011 950 7790 Mobile: 079 883 7152	Ms Kgomotso Phofa	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
Kagiso Multipurpose Centre: Kagiso Service Office Gauteng Department of Social Development	GP-06-2025-SP 06	15048 Ext 6 Mcundule Section, Utlwanong, Kagiso 1754	Landline: 011 950 7790 Mobile: 079 883 7152	Ms Kgomotso Phofa	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
Krugersdorp Service Office	GP-06-2025-SP 07	SA Dutch Centre, 16 Human Street,	Landline: 011 950 7790 Mobile: 079 883 7152	Ms Kgomotso Phofa	Accreditation status granted in line with Section 56 (2) (f) of

Gauteng Department of Social Development		Krugersdorp 1739			the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.

GAUTENG PROVINCE. ACCREDITED DIVERSION PROGRAMMES.
SECTION 56(3) (a) of the Child Justice Act 75/2008

NAME OF ENTITY	REG. NUMBER/ ACCREDITATION CERTIFICATE NUMBER	OPERATIONAL SITE	PROGRAMME	STATUS AWARDED
PUBLIC ENTITY				
Roodepoort Service Office Gauteng Department of Social Development	GP-06-2025-P 01	40 Hoofd Street, Roodepoort, 1700	Rhythm of life	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
Johannesburg Service Office Gauteng Department of Social Development	GP-06-2025-P 02	41 Fox Street, Endura Building, Johannesburg 2001	Wakeup call	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
Orange Farm Skills Centre Service Office Gauteng Department of Social Development	GP-06-2025-P 03	15744 Ext 4, Orange Farm 1805	Rhythm of life Wakeup call	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.

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MES Kempton Park Service Office Gauteng Department of Social Development	GP-06-2025-P 04	06 Kempton Street, Kempton Park 1620	Rhythm of life	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
Palm Ridge Magistrates' Court Service Office Gauteng Department of Social Development	GP-06-2025-P 05	K146 Palm Ridge Road, Palm Ridge 1458	Rhythm of Life Mind the Gap	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
Krugersdorp Service Office Gauteng Department of Social Development	GP-06-2025-P 06	SA Dutch Centre, 16 Human Street, Krugersdorp 1739	Rhythm of Life	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.

KWAZULU-NATAL PROVINCE. ACCREDITED DIVERSION SERVICE PROVIDERS.
SECTION 56(3) (a) of the Child Justice Act 75/2008

NAME OF ENTITY	REG. NUMBER/ ACCREDITATION CERTIFICATE NUMBER	PHYSICAL ADDRESS	CONTACT DETAILS	CONTACT PERSON	STATUS AWARDED
PUBLIC ENTITY					
Dannhauser Service Office	KZN-06-2025-SP 01	15 Main Road, Dannhauser, 3080	Mobile: 082 955 3646 Email: Mpumelelo.gumede@kzndsd.gov.za	Mrs. N.O Gumede	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four

Kwa-Zulu Natal Department of Social Development					years, from 30/06/2025 – 01/07/2029.
Greytown Service Office Kwa-Zulu Natal Department of Social Development	KZN-06-2025-SP 02	125 Voortrekker Street, Greytown, 3250	Mobile: 082 955 3171 Email: thulisile.hlatshwayo@kzndsd.gov.za	Ms. T.L Hlatshwayo	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
Indaka Service Office Kwa-Zulu Natal Department of Social Development	KZN-06-2025-SP 03	A1410 Ekuvukeni, Indaka, 2920	Landline: 034 261 1386 Mobile: 082 955 4362	Ms. N.P Mbatha	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
Louwsburg Service Office Kwa-Zulu Natal Department of Social Development	KZN-06-2025-SP 04	Private Bag X08 Louwsburg 3150	Landline: 034 908 5083 Mobile: 060 998 9677	Mrs. Thabisile Msane	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
Mbazwana Service Office Kwa-Zulu Natal Department of Social Development	KZN-06-2025-SP 05	Private Bag x 246 Mbazwana 3973	Landline: 035 5710 143 Mobile: 060 998 9718	Zanele Ngwenya	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
Mnambithi Service Office	KZN-06-2025-SP 06	12 Murchison Street	Landline: 036 631 1170 Mobile: 078 916 1456	Ms. Nonhle Duze	Accreditation status granted in line with Section 56 (2) (f) of

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Kwa-Zulu Natal Department of Social Development		Ladysmith 3370			the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
Msinga Service Office Kwa-Zulu Natal Department of Social Development	KZN-06-2025-SP 07	R33 Tugela Ferry, Msinga, 3010	Mobile:082 955 1447 Email: Thobelani@Khanyile@kzndsd.gov.za	Mr. TC Khanyile	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
Babanango Service Office Kwa-Zulu Natal Department of Social Development	KZN-06-2025-SP 08	ERF 59-60 Babanango 3850	Landline: 035 935 0176 Mobile: 066 394 5468 Email: phethele.mthembu@kzndsd.gov.za	Ms. ZP Mthembu	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
uMtsheni Service Office Kwa-Zulu Natal Department of Social Development	KZN-06-2025-SP 09	uMtsheni, Escourt, 3310	Mobile: 060 998 9705 Mobile: 082 665 5020	Ms. Ntombenhle Memela	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
Bergville Service Office Kwa-Zulu Natal Department of Social Development	KZN-06-2025-SP 10	Bergville, 3350	Mobile:082 955 1447 Email: Thobelani@Khanyile@kzndsd.gov.za	Mr. TC Khanyile	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
Msane Service Office	KZN-06-2025-SP 11	Lot 1318 Belsheza	Landline: 035 551 1850 Mobile: 072 360 7540	Nokuthuthuka Nozibusiso Mthethwa	Accreditation status granted in line with Section 56 (2) (f) of

Kwa-Zulu Natal Department of Social Development		Street, KwaMsane Township 3935			the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
Phoenix Service Office Kwa-Zulu Natal Department of Social Development	KZN-06-2025-SP 12	Phoenix, 4068	Mobile: 082 804 8845 Email: Fikile.Mthembu@kzndsd.gov.za	Ms. F Mkhize	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
Sinethemba Child & Youth Care Centre: Secure Care Centre Kwa-Zulu Natal Department of Social Development	KZN-06-2025-SP 13	113 Panorama Drive, Lennoxton, Newcastle, 2930	Landline: 034 317 3233 Mobile: 082 955 4299	Zandile Dladla	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
Ubombo Service Office Kwa-Zulu Natal Department of Social Development	KZN-06-2025-SP 14	Lot 15 near Magistrate's Court, Ubombo P/Bag X634 Ubombo 3970	Landline: 035 595 1000 Mobile: 060 9989 707	Ms P.T. Ndlovu	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
Madlangeni Service Office Kwa-Zulu Natal Department of Social Development	KZN-06-2025-SP 15	Utrecht, 3970	Mobile: 082 955 0805 Email: ntombifuthi.mthethwa@kzndsd.gov.za	Ms. P.N Mthethwa	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.

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Valleyview Child & Youth Care Centre: Secure Care Centre Kwa-Zulu Natal Department of Social Development	KZN-06-2025-SP 16	Claire Road, Sydenham, 4091	Mobile: 072 094 9117 Email: Vannessa.singh@kznsd.gov.za	Ms. V Singh	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
Ezakheni Service Office Kwa-Zulu Natal Department of Social Development	KZN-06-2025-SP 17	108 Rolihlahla Drive Pieter's Industrial area Ladysmith 3370	Landline: 036 636 1255 Mobile: 067 909 6059	Bongiwe Mbeje	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.

KWAZULU-NATAL PROVINCE. ACCREDITED DIVERSION PROGRAMMES.

SECTION 56(3) (a) of the Child Justice Act 75/2008

NAME OF ENTITY	REG. NUMBER/ ACCREDITATION CERTIFICATE NUMBER	OPERATIONAL SITE	PROGRAMME	STATUS AWARDED
PUBLIC ENTITY				
Dannhauser Service Office Kwa-Zulu Natal Department of Social Development	KZN-06-2025-P 01	Dannhauser Service Office 15 Main Road, Dannhauser, 3080	Rhythm of life Reverse your thinking Mind the gap In the mirror Wakeup call	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.

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Greytown Service Office Kwa-Zulu Natal Department of Social Development	KZN-06-2025-P 02	Greytown Service Office 125 Voortrekker Street, Greytown, 3250	Rhythm of life Reverse your thinking Mind the gap In the mirror Wakeup call	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
Osizweni Service Office Kwa-Zulu Natal Department of Social Development	KZN-06-2025-P 03	Osizweni Service Office Osizweni, 2952	Rhythm of life Reverse your thinking Mind the gap In the mirror Wakeup call	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
Umtshezi Service Office Kwa-Zulu Natal Department of Social Development	KZN-06-2025-P 04	Umtshezi Service Office Umtshezi, 3310	Rhythm of life Reverse your thinking Mind the gap In the mirror Wakeup call	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
Kwa-Dukuza Service Office Kwa-Zulu Natal Department of Social Development	KZN-06-2025-P 05	Kwa-Dukuza Service Office Dukuza Next to Dukuza Magistrate Court, Bergville 3370	Rhythm of life Reverse your thinking Mind the gap In the mirror Wakeup call	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.

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Madadeni Service Office Kwa-Zulu Natal Department of Social Development	KZN-06-2025-P 06	Madadeni Service Office 2585 Dr Mandela drive Section 2, Madadeni 2951	Rhythm of life Reverse your thinking Mind the gap In the mirror Wakeup call	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
Sinethemba Child & Youth Care Centre: Secure Care Centre Kwa-Zulu Natal Department of Social Development	KZN-06-2025-P 07	Sinethemba Child & Youth Care Centre: Secure Care Centre 113 Panorama Drive, Newcastle 2930	Rhythm of life Reverse your thinking Mind the gap In the mirror Wakeup call	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
Utrecht Service Office Kwa-Zulu Natal Department of Social Development	KZN-06-2025-P 08	Utrecht Service Office Utrecht, 3970	Rhythm of life Reverse your thinking Mind the gap In the mirror Wakeup call	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
Ubombo Service Office Kwa-Zulu Natal Department of Social Development	KZN-06-2025-P 09	Ubombo Service Office Ubombo 3970	Rhythm of life Reverse your thinking Mind the gap Wakeup call	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/04/2024 – 02/05/2028.
Msinga Service Office Kwa-Zulu Natal Department of Social Development	KZN-06-2025-P 10	Msinga Service Office R33 Tugela Ferry, Msinga 3010	In the mirror Wakeup call	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/04/2024 – 02/05/2028.

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Msane Service Office Kwa-Zulu Natal Department of Social Development	KZN-06-2025-P 11	Msane Service Office Kwa-Msane, 3940	Wakeup call Rhythm of life Mind the gap In the mirror	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/04/2024 – 02/05/2028.
Ingwavuma Service Office Kwa-Zulu Natal Department of Social Development	KZN-06-2025-P 12	Ingwavuma Service Office 392 Lot, Magistrate Road, 3968	In the mirror	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/04/2024 – 02/05/2028.
Indaka Service Office Kwa-Zulu Natal Department of Social Development	KZN-06-2025-P 13	Indaka Service Office A 1410 Ekuvukeni, Indaka 2920	Rhythm of life	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/04/2024 – 02/05/2028.
Babanango Service Office Kwa-Zulu Natal Department of Social Development	KZN-06-2025-P 14	Babanango Service Office ERF 59-60, Babanango, 3850	Rhythm of life	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/04/2024 – 02/05/2028.

NORTHWEST PROVINCE. ACCREDITED DIVERSION PROGRAMMES. SECTION 56(3) (a) of the Child Justice Act 75/2008

NAME OF ENTITY	REG. NUMBER/ ACCREDITATION CERTIFICATE NUMBER	OPERATIONAL SITE	PROGRAMME	STATUS AWARDED
PUBLIC ENTITY				

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Lekwa Temane Council of Churches Northwest Department of Social Development	NW- 06-2025-P01	Bloemhof, 2660	Wakeup call	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
Lekwa Temane Service Point Northwest Department of Social Development	NW- 06-2025-P02	145 Kerkstraat, Bloemhof 2660	Wakeup call	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
Tswaing Service Point Northwest Department of Social Development	NW- 06-2025-P03	61 General Delarey Street, Delareyville 2770 Contact details: Ms J. Mogokonyane – 060 542 7210 Ms T. Motshedi – 060 537 8598	Wakeup call	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
Rustenburg Service Point Northwest Department of Social Development	NW- 06-2025-P04	Kobi van Zyl Building, Swartruggens Road, Tlhabane 0299 Contact details: Ms L. Sejoe - 0605426653 Ms P. Motsisi – 060 542 7518	Wakeup call Rhythm of life Playing through the forest	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.

Mamusa Service Point: Mamusa Community Care Centre Northwest Department of Social Development	NW- 06-2025-P05	Corner Eybers & Cordell Streets, Schweizer-Reneke 2780 Contact details: Ms S. Seape – 060 542 7145 Ms S. Barnard – 060 542 0296	Mind the gap Stop to Start	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
Moses Kotane Service Point: Madikwe Council Chamber Northwest Department of Social Development Ventersdorp, 2710	NW- 06-2025-P06	Moses Kotane Service Point: Madikwe Council Chamber Contact details: Ms T. Mdidimba - 0605427279 Ms F. Mofojane – 060 537 883	Wakeup call	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
JB Marks Boikhutso Community Centre Service Point Northwest Department of Social Development	NW- 06-2025-P07	JB Marks Boikhutso Community Centre Service Point Ventersdorp, 2710	In the Mirror Rhythm of Life	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
Naledi Service Point Northwest Department of Social Development	NW- 06-2025-P08	Naledi Service Point 130 Vry Street, Vryburg 8600	Wakeup call	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four

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				years, from 30/06/2025 – 01/07/2029.
Maquassie Hills Service Point Northwest Department of Social Development	NW- 06-2025-P09	75 Kruger Street, Jan Kemp Building, Maquassie Hills 2630	Wakeup call I am me Playing through the forest	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
Matlosana Service Point: One Stop Child Justice Centre Northwest Department of Social Development	NW- 06-2025-P10	Matlosana Service Point: One Stop Child Justice Centre Klerksdorp, 2517	Rhythm of life	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
Ratlou Service Point: Tshidila-molomo Tribal Hall Northwest Department of Social Development	NW- 06-2025-P11	Motlhanke Building, N18 Vryburg Road, Setlagole, 2772 Contact details: Setletse Nkate/ Baatshwana Mosweu 605429203 018-388-7916	Reverse your thinking	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
Ratlou Service Point : Letsapa Tribal Hall Northwest Department of Social Development	NW- 06-2025-P12	Latsapa Tribal Hall, Setlagole Village, 2772 Contact details: Setletse Nkate/ Baatshwana Mosweu 605429203	Reverse your thinking	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.

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Ratlou Service Point : Logageng Tribal Hall Northwest Department of Social Development	NW- 06-2025-P13	Logageng Tribal Hall Logageng Village, 2759 Contact details: Setletse Nkate/ Baatshwana Mosweu 605429203 018-388-7916	Reverse your thinking	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
Mahikeng Service Point: Manhattan Building Northwest Department of Social Development	NW- 06-2025-P14	Cul 19 Unit 2, Manhattan Building, Mahikeng, 2745 Contact details: Ms Mmabini Molefe/ Mr Leonard Choeneemang 605429765 018-388-3569	Reverse your thinking Mind the gap Rhythm of life	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
Mahikeng Service Point: Ottoshoop Northwest Department of Social Development	NW- 06-2025-P15	Mahikeng Service Point: Ottoshoop, Mahikeng, 2745 Contact details: Ms Mmabini Molefe/ Mr Leonard Choeneemang 605429765 018-388-3569	Reverse your thinking Mind the gap Rhythm of life	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
Mahikeng Service Point: Tswelelopele Community Care Project Centre Northwest Department of Social Development	NW- 06-2025-P16	Tswelelopele Community Care Project Centre Mahikeng, 2745 Contact details:	Reverse your thinking Mind the gap Rhythm of life	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four

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		Ms Mmabini Molefe/ Mr Leonard Choeneemang 605429765 018-388-3569		years, from 30/06/2025 – 01/07/2029.
Ramotshere Moiloa Service Point Northwest Department of Social Development	NW- 06-2025-P17	60 Queen Street, Zeerust 2865 Contact details: J Engel 605429779	Wakeup call In the Mirror Rhythm of life	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
Rustenburg Child & Youth Care Centre: Secure Care Centre Northwest Department of Social Development	NW- 06-2025-P18	4290 Mogwase Street, Boitekong Ext 4, Rustenburg, 0299	Wakeup call Rhythm of life	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
Kgetleng Service Point Northwest Department of Social Development	NW- 06-2025-P19	Kgetleng Service Point 05 Stain Street, Koster 0348 Contact details: Ms N. Montsho – 060 542 8074	Planting Hope	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
Ditsobotla-Itsoseng Service Point Northwest Department of Social Development	NW- 06-2025-P20	38 Corner Republic & Scholtz Streets, Lichtenburg, 2470	Wakeup call Stop to start	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
JB Marks Service Office: Tlokwe Office	NW- 06-2025-P21	JB Marks Service Office: Tlokwe Office	Rhythm of life	Accreditation status granted in line with Section 56 (2) (f) of

Northwest Department of Social Development		Potchestroom, 3520		the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
Maquassie Hills Service Point: Tswelelang Youth Centre Northwest Department of Social Development	NW- 06-2025-P22	Tswelelang Youth Centre Maquassie Hills, 2630	Playing through the forest I am me Wakeup call	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
Madibeng Service Point Northwest Department of Social Development 06 Alpha Building, Pendoring Street, Brits 0250	NW- 06-2025-P23	Madibeng Service Point 06 Alpha Building, Pendoring Street, Brits 0250 Contact details: Ms Sarah Motsepe-060 542 9705 Ms M. Moinwe - 060 537 8660	Planting Hope	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
Kagisano-Molopo Service Point: Tlakgameng Tribal Hall Northwest Department of Social Development Barolong Boo Tlou Le Tau Tribal Authority, Tlakgameng, 8613	NW- 06-2025-P24	Kagisano-Molopo Service Point, Tlakgameng Contact details: Mr Zolile Mqobongo – 0605427175 Ms Gloria Motshedi – 073 888 3458	Rhythm of life Mind the gap	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
Kagisano-Molopo Service Point: Ganyesa Tribal Hall	NW- 06-2025-P25	Kagisano-Molopo Service Point, Ganyesa	Rhythm of life Mind the gap	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008

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Northwest Department of Social Development Barolong Boo Tlou Le Tau Tribal Authority, Ganyesa, 8613		Contact details: Mr Zolile Mqobongo – 0605427175 Ms Gloria Motshedi – 073 888 3458		(Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
Greater Taung Service Provider: Agriculture Building Northwest Department of Social Development	NW- 06-2025-P26	Greater Taung Service Provider: Agriculture Building, Taung 8580	Rhythm of life Wakeup call	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
Greater Taung Service Provider: Kgomotso Community Care Project Northwest Department of Social Development	NW- 06-2025-P27	Greater Taung Service Provider: Kgomotso Community Care Project, Taung 8580	Rhythm of life Wakeup call	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
Greater Taung Service Provider: Thusong Multipurpose Centre Northwest Department of Social Development	NW- 06-2025-P28	Greater Taung Service Provider: Thusong Multipurpose Centre, Taung 8580	Rhythm of life Wakeup call	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.

NORTHWEST PROVINCE. ACCREDITED DIVERSION SERVICE PROVIDERS.
SECTION 56(3) (a) of the Child Justice Act 75/2008

NAME OF ENTITY	REG. NUMBER/ ACCREDITATION CERTIFICATE NUMBER	PHYSICAL ADDRESS	CONTACT DETAILS	CONTACT PERSON	STATUS AWARDED

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Lekwa Temane Council of Churches Northwest Department of Social Development	NW-06-2025-SP 01	Bloemhof, 2660	Mobile: 083 768 6105 Landline: 053 433 9200	Osenotse Pule	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
JB Marks Boikhutso Community Centre Service Point Northwest Department of Social Development	NW-06-2025-SP 02	Ventersdorp, 2710	Mobile: 060 542 9752 Landline: 018 264 3926	Johline Steenkamp	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
Maquassie Hills Service Point Northwest Department of Social Development	NW-06-2025-SP 03	75 Kruger Street, Jan Kemp Building, Maquassie Hills 2630	Mobile: 060-542-9756	Mr S.G. Tabile	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
Mahikeng Service Point: Manhattan Building Northwest Department of Social Development	NW-06-2025-SP 04	Cul 19 Unit 2, Manhattan Building, Mahikeng, 2745	Mobile: 060 542 9765 Landline: 018 388 3569	Ms Mmabini Molefe/ Mr Leonard Choeneemang	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
Mahikeng Service Point: Ottoshoop Northwest Department of Social Development	NW-06-2025-SP 05	Ottoshoop, Mahikeng, 2745	Mobile: 060 542 9765 Landline: 018 388 3569	Ms Mmabini Molefe/ Mr Leonard Choeneemang	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.

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Mahikeng Service Point: Tswelelopele Community Care Project Centre Northwest Department of Social Development	NW-06-2025-SP 06	Tswelelopele Community Care Project Centre Mahikeng, 2745	Mobile: 060 542 9765 Landline: 018 388 3569	Ms Mmabini Molefe/ Mr Leonard Choeneemang	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
Ramotshere Moiloa Service Point Northwest Department of Social Development	NW-06-2025-SP 07	60 Queen Street, Zeerust 2865	Mobile: 060 542 9779	J Engel	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
Rustenburg Child & Youth Care Centre: Secure Care Centre Northwest Department of Social Development	NW-06-2025-SP 08	4290 Mogwase Street, Boitekong Ext 4, Rustenburg, 0299	Mobile: 060 542 0006 Landline: 014 597 5979	Mirriam Matshidiso Kgafela	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
Kgetleng Service Point Northwest Department of Social Development	NW-06-2025-SP 09	05 Stain Street, Koster 0248	Mobile: 066 076 3349	Constance Khoza	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
Ditsobotla-Itsoseng Service Point Northwest Department of Social Development	NW-06-2025-SP 10	38 Corner Republic & Scholtz Streets, Lichtenburg, 2470	Mobile: 060 542 7135 Landline: 018 632 1010	Ouma Makokoe	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.

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JB Marks Service Office: Tlokwe Office Northwest Department of Social Development	NW-06-2025-SP 11	Potchefstroom, 2520	Mobile: 060 542 9752 Landline: 018 264 3926	Johline Steenkamp	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
Maquassie Hills Service Point: Tswelelang Youth Centre Northwest Department of Social Development	NW-06-2025-SP 12	Tswelelang Youth Centre Maquassie Hills, 2630	Mobile: 060 542 9756	Mr S.G. Tabile	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
Greater Taung Service Provider: Agriculture Building Northwest Department of Social Development	NW-06-2025-SP 13	Greater Taung Service Provider: Agriculture Building, Taung 8580	Mobile: 066 076 0296	Mrs Dineo Chuaka	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
Greater Taung Service Provider: Kgomotso Community Care Project Northwest Department of Social Development	NW-06-2025-SP 14	Greater Taung Service Provider: Kgomotso Community Care Project, Taung 8580	Mobile: 066 076 0296	Mrs Dineo Chuaka	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
Greater Taung Service Provider: Thusong Multipurpose Centre Northwest Department of Social Development	NW-06-2025-SP 15	Greater Taung Service Provider: Thusong Multipurpose Centre, Taung 8580	Mobile: 066 076 0296	Mrs Dineo Chuaka	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.

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NORTHWEST PROVINCE. ACCREDITED DIVERSION SERVICE PROVIDERS.
SECTION 56(3) (a) of the Child Justice Act 75/2008

NAME OF ENTITY	REG. NUMBER/ ACCREDITATION CERTIFICATE NUMBER	PHYSICAL ADDRESS	CONTACT DETAILS	CONTACT PERSON	STATUS AWARDED
PRIVATE ENTITY					
NICRO- RUSTENBURG	REG. NUMBER: 003-147 S01-06-2025-FA-NW	25 Molen Street, Rustenburg, 0299	081 471 6872	Ms Adua Salim	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 01/06/2025 – 30/06/2029.
FAMSA - RUSTENBURG	REG. NUMBER: 083-492 S02-06-2025-FA-NW	19 Von Wielligh Street, Rustenburg, 0299	073 008 7416	Ms Damaria Motlhabe	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 01/06/2025 – 30/06/2029.
KHULISA SOCIAL SOLUTIONS	REG. NUMBER: 057-405 S03-06-2025-FA-NW	07 Zendling Street, Rustenburg, 0299	073 210 2029	Ms Hilda Modise	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 01/06/2025 – 30/06/2029.
RESTORING YOUTH DIGNITY	REG. NUMBER: 092-520 S04-06-2025-FA-NW	49 Siddle Street, Jooste Building, Klerksdorp, 2570	018-0119345 079 360 4259	Ms Glenrose Mdaweni	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008),

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					for four years, from 01/06/2025 – 30/06/2029.

NORTHWEST PROVINCE. ACCREDITED DIVERSION PROGRAMMES.
SECTION 56(3) (a) of the Child Justice Act 75/2008

NAME OF ENTITY	REG. NUMBER/ ACCREDITATION CERTIFICATE NUMBER	OPERATIONAL SITE	PROGRAMME	STATUS AWARDED
PRIVATE ENTITY				
FAMSA - RUSTENBURG	REG. NUMBER: 083-492 P01-06-2025-FA-NW	19 Von Wielligh Street, Rustenburg, 0299	Sinovuyo Teen Parenting	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 01/06/2025 – 30/06/2029.
RESTORING YOUTH DIGNITY	REG. NUMBER: 083-492 P02-06-2025-FA-NW	49 Siddle Street, Jooste Building, Klerksdorp, 2570	Sinovuyo Teen Parenting	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 01/06/2025 – 30/06/2029.
KHULISA SOCIAL SOLUTIONS	REG. NUMBER: 057-405 P03-06-2025-FA-NW	07 Zendling Street, Rustenburg, 0299	Sinovuyo Teen Parenting	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 01/06/2025 – 30/06/2029.

LIMPOPO PROVINCE. ACCREDITED DIVERSION PROGRAMMES.
SECTION 56(3) (a) of the Child Justice Act 75/2008

NAME OF ENTITY	REG. NUMBER/ ACCREDITATION CERTIFICATE NUMBER	OPERATIONAL SITE	PROGRAMME	STATUS AWARDED
PUBLIC ENTITY				
Botlokwa One Stop Centre Limpopo Department of Social Development	LP- 06-2025-P01	Botlokwa One Stop Centre, Botlokwa, 0812	• Planting hope • Stop to Start • I am me	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
Andrew Mehlape Service Office Limpopo Department of Social Development	LP- 06-2025-P02	Mankweng 0727	• Wakeup call • Planting hope • In the mirror • Reverse your thinking • Mind the gap • I am me	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.

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Ceres One Stop Centre Limpopo Department of Social Development	LP- 06-2025-P03	Ga-Ngwetsana, 0748	• I am me • Stop to start • Planting hope • In the mirror • Reverse your thinking • Mind the gap • Playing through the forest	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
Lebowakgomo SAPS Office Limpopo Department of Social Development	LP- 06-2025-P04	Lebowakgomo SAPS Office, Lebowakgomo, 0737	• I am me • Stop to start • Planting hope	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
Senwabarwana One Stop Centre Limpopo Department of Social Development	LP- 06-2025-P05	Senwabarwana One Stop Centre, Senwabarwana, 0790	• Reverse your thinking • Stop to start • Planting hope • In the mirror • Playing through forest	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
Ratshatsha Health Care Centre Limpopo Department of Social Development	LP- 06-2025-P06	Ratshatsha Health Care Centre, Ratshatsha, 0970	• I am me • Stop to start • Planting hope	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four

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				years, from 30/06/2025 – 01/07/2029.
Seshego One Stop Centre Limpopo Department of Social Development	LP- 06-2025-P07	Seshego One Stop Centre, Seshego, Polokwane 0751	• Wakeup call • Mind the gap • Rhythm of life • Reverse your thinking • I am me • Stop to start • Planting hope • In the mirror • Playing through forest	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
Tzaneen Cost Centre Building Limpopo Department of Social Development	LP- 06-2025-P08	Tzaneen Cost Centre Building, 7291 Plantation Road, Tzaneen 0850	• Rhythm of life • In the mirror	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.
Jane Furse One Stop Centre Limpopo Department of Social Development	LP- 06-2025-P09	Jane Furse One Stop Centre, Office No 1, Jane Furse Village, 1085	• Wakeup call • Mind the gap • Rhythm of life • Reverse your thinking • I am me • Stop to start • In the mirror	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 01/07/2029.

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			• Playing through forest	

FREE STATE PROVINCE ACCREDITED DIVERSION SERVICE PROVIDERS.
SECTION 56(3) (a) of the Child Justice Act 75/2008

NAME OF ENTITY	REG. NUMBER/ ACCREDITATION CERTIFICATE NUMBER	PHYSICAL ADDRESS	CONTACT DETAILS	CONTACT PERSON	STATUS AWARDED
PRIVATE ENTITY					
CATHOLIC COMMUNITY SERVICE	Reg. Number: 006-940 FS 3/04/2025-SP 01	John Paul II Centre, 1676 Plot De Rust, Old Fouriesburg Road, Bethlehem, 9700	068 153 8109	Mothetho Mashinini	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 30/06/2029.
FAMSA-WELKOM	Reg. Number: 006-989 FS 3/04/2025-SP 02	127 Koppie Allen Street, Welkom, 9459	082 584 0985	Coba Swarts	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 30/06/2029.
HEATHERDALE DIACONAL SERVICES	Reg. Number: 006-082 FS 3/04/2025-SP 03	No. 9 Jack Kolbert Street, Heidedal, Bloemfontein, 9300	072 919 9413	Rene Nel	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 30/06/2029.

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NICRO	Reg. Number: 003-147 FS3/04/2025-SP 04	No. 12 Tannery Road, Hamilton, Bloemfontein, 9300	076 247 0620	Matshego Williams	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 30/06/2029.

FREE STATE PROVINCE ACCREDITED DIVERSION PROGRAMMES.
SECTION 56(3) (a) of the Child Justice Act 75/2008

NAME OF ENTITY	REG. NUMBER/ ACCREDITATION CERTIFICATE NUMBER	OPERATIONAL SITE	PROGRAMME	STATUS AWARDED
PRIVATE ENTITY				
NICRO	REG. NUMBER: 003-147 FS 3/04/2025-P 01 FS 3/04/2025-P 04	No. 12 Tannery Road, Hamilton, Bloemfontein, 9300	Safe Ambassador & YES Programme	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 30/06/2029.
FAMSA	REG. NUMBER: 006-989 FS 3/04/2025-P 02	127 Koppie Allen Street, Welkom, 9459	Responsible Sexual Behavior Programme	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 30/06/2029.

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HEATHERDALE DIACONAL SERVICES	REG. NUMBER: 006-082 FS 3/04/2025-P 03	No. 9 Jack Kolbert Street, Heidedal, Bloemfontein, 9300	Life Solutions Programme	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 30/06/2025 – 30/06/2029.

MPUMALANGA PROVINCE ACCREDITED DIVERSION SERVICE PROVIDERS.
SECTION 56(3) (a) of the Child Justice Act 75/2008

NAME OF ENTITY	REG. NUMBER/ ACCREDITATION CERTIFICATE NUMBER	PHYSICAL ADDRESS	CONTACT DETAILS	CONTACT PERSON	STATUS AWARDED
PRIVATE ENTITY					
KHULISA SOCIAL SOLUTIONS - EMALAHLENI	REGISTRATION NUMBER: 057-405-NPO	Office Number 4, Smuts Park Building, Corner of Northey Street & Smuts Avenue			Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 11/08/2025 – 31/08/2029.
NICRO - MBOMBELA	REGISTRATION NUMBER: 003-143-NPO	8th Floor, MEDCEN Building, 14 Henshall Street, Nelspruit 1200			Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 11/08/2025 – 31/08/2029.
NICRO - EERSTEHOEK	REGISTRATION NUMBER: 003-143-NPO	9 Police Station Road, Eestehoek, Magistrate Court,			Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act,

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		Office No. B77, Elukwatini, 1192			2008 (Act No. 75 of 2008), for four years, from 11/08/2025 – 31/08/2029.

MPUMALANGA PROVINCE ACCREDITED DIVERSION PROGRAMMES.
SECTION 56(3) (a) of the Child Justice Act 75/2008

NAME OF ENTITY	REG. NUMBER/ ACCREDITATION CERTIFICATE NUMBER	OPERATIONAL SITE	PROGRAMME	STATUS AWARDED
PRIVATE ENTITY				
KHULISA SOCIAL SOLUTIONS	REGISTRATION NUMBER: 057-405-NPO	Office Number 4, Smuts Park Building, Corner of Northey Street & Smuts Avenue	Positively cool Silence the violence Facing your shadow	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 11/08/2025 – 31/08/2029.
NICRO - MBOMBELA	REG. NUMBER: 003-147	8th Floor, MEDCEN Building, 14 Henshall Street, Nelspruit 1200	YES Programme Beyond Boundaries Anger Management and Community Service Learning Restorative Group Counselling ADAPT (Substance Abuse Programme)	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 11/08/2025 – 31/08/2029.

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NICRO - EERSTEHOEK	REG. NUMBER: 003-147	9 Police Station Road, Eestehoek, Magistrate Court, Office No. B77, Elukwatini, 1192	YES Programme Beyond Boundaries Anger Management and Community Service Learning Restorative Group Counselling ADAPT (Substance Abuse Programme)	Accreditation status granted in line with Section 56 (2) (f) of the Child Justice Act, 2008 (Act No. 75 of 2008), for four years, from 11/08/2025 – 31/08/2029.

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social development
Department:
Social Development
REPUBLIC OF SOUTH AFRICA

DEPARTMENT OF SOCIAL DEVELOPMENT
GENERAL NOTICE NO: 14

INVITATION FOR APPLICATIONS FOR THE ACCREDITATION OF DIVERSION PROGRAMMES AND DIVERSION SERVICES PROVIDERS - 14TH CYCLE

The Minister of Social Development hereby invite interested Persons and Organisations, inclusive of Government Departments, to apply for accreditation of diversion programmes and diversion services in terms of section 56 (2)(c)(ii) of the Child Justice Act 75 of 2008 (Act No. 75 of 2008). Application forms and self-assessment tools can be obtained from the following persons per province.

PROVINCE	PHYSICAL ADDRESS	CONTACT DETAILS
GAUTENG	**Gauteng Department of Social Development** Thusanong Building, 4th floor, 69 Commissioner Street, Johannesburg, 2000	**Ms. Pearl Moabelo/ Ms. Veronica Sihawu/ Mr. Mandla Makhubela:** Landline: 011 227 0034/ 011 355 7729/ 011 355 7691. Mobile: 071 686 4082/ 071 492 1074/ 066 044 3540. Email addresses: pearl.moabelo@gauteng.gov.za

Request The Minister to publish a notice inviting applications for accreditation of diversion services in terms of Section 56(2) (c) (ii) of the Child Justice Act, 2008 (Act No. 75 OF 2008).

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		veronica.sihawu@gauteng.gov.za mandla.makhubela@gauteng.gov.za
MPUMALANGA	**Mpumalanga Department of Social Development** Sonjoy Building, Government Boulevard, Riverside Office Park, Nelspruit, 1200	**Ms. Bonisile Biya** Landline: 013 766 3185 Mobile: 082 668 3185 Email address: BoniB@dsdmpu.gov.za
LIMPOPO	**Limpopo Department of Social Development** 21 Biccard Street, Olympic Towers Building, Polokwane, 0700	**Ms. Kgomo Maibela/Ms. Marope Ursula Matsheka** Landline: 015 230 4363/ 015 230 4373 Mobile: 082 089 4839/ 078 800 3089 Email addresses: MaibelaKA@dsd.limpopo.gov.za MatshekaM@dsd.limpopo.gov.za
FREE STATE	**Free State Department of Social Development** Old Mutual Building, 2nd Floor, Charlotte Maxeke Street, Bloemfontein, 9300	**Ms. Tshepiso Sejane-Mokgomo/ Ms. Palesa Shale:** Landline: 051 409 0574/051 409 0554 Mobile: 060 987 6799/ 060 987 6465 Email addresses: Tshepiso.Sejane@fssocdev.gov.za Palesa.Shale@fssocdev.gov.za

Request The Minister to publish a notice inviting applications for accreditation of diversion services in terms of Section 56(2) (c) (ii) of the Child Justice Act, 2008 (Act No. 75 OF 2008).

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EASTERN CAPE	**Eastern Cape Department of Social Development** Beacon Hill, Office Park, Corner of Hargreaves Road and Hockley Close, Private Bag x 0039, Bhisho, 5605	**Mr. Andile Mankayi/ Mr. Thanduxolo Zimba:** Mobile: 082 729 6622/ 063 685 2072 Email addresses: andile.mankayi@ecdsd.gov.za thanduxolo.zimba@ecdsd.gov.za Website: www.socdev.gov.za
KWA-ZULU NATAL	**Kwa-Zulu Natal Department of Social Development** Administrative Building, 174 Mayors Walk, Pietermaritzburg, 3200	**Mr. Pravin Chetty/ Ms. Faith Simamane:** Landline: 033 341 7949/ 033 341 7990 Mobile: 072 696 9414/ 072 261 3582/066 474 8476 Email addresses: Pravin.chetty@kzndsd.gov.za Faith.simamane@kzndsd.gov.za
NORTHWEST	**Northwest Department of Social Development** 4th Floor, Provident House, University Drive, Mmabatho, 2735	**Mr. Watson Seatle:** Landline: 018 388 2829 Mobile: 082 470 4689/078 507 4114 Email address: WSeatle@nwpg.gov.za

Request The Minister to publish a notice inviting applications for accreditation of diversion services in terms of Section 56(2) (c) (ii) of the Child Justice Act, 2008 (Act No. 75 OF 2008).

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NORTHERN CAPE	**Northern Cape Department of Social Development** Mimosa Complex, Barkley Road, Homestead, Kimberley, 8300	**Ms. Nthabiseng Andreas/ Ms. Karen van Wyk** Landline: 053 714 3404/ 060 978 8231 Mobile: 060 978 8231/ 076 441 0022 Email addresses: NAndreas@ncpg.gov.za kvanwyk@ncpg.gov.za
WESTERN CAPE	**Western Cape Department of Social Development** 8th Floor, Union House, 14 Queen Victoria Street, Cape Town, 8000.	**Mr. Abdul Ryklief/ Ms. Michele Palmer** Landline: 021 483 9939/ 021 483 4405 Mobile: 082 940 6968/ 078 830 9061 Email addresses: Abdul.Ryklief@westerncape.gov.za Michele.Palmer@westerncape.gov.za

Registration of Intent and Application forms are accessible through the Accreditation of Diversion System (ADS) at https://portal.dsd.gov.za/ADS/

Manual forms are also obtainable from Provincial coordinators mentioned above. The return date for all applications is **17 December 2025**. Service providers may also obtain a copy the Reviewed Policy Framework for Accreditation of Diversion Services in South Africa at the respective provincial offices listed above or visit: www.dsd.gov.za to access the document.

Request The Minister to publish a notice inviting applications for accreditation of diversion services in terms of Section 56(2) (c) (ii) of the Child Justice Act, 2008 (Act No. 75 OF 2008).

DEPARTMENT OF TRADE, INDUSTRY AND COMPETITION

NO. 6744 **17 October 2025**

CO-OPERATIVES THAT HAVE BEEN REMOVED FROM THE REGISTER

1. BLS POULTRY PRIMARY CO-OPERATIVE LIMITED (2017/008831/24)
2. LUDADAS AND OTHER PROJECTS PRIMARY CO-OPERATIVE LIMITED (2018/005092/24)
3. PHUTHANG BATHLOKI CO-OPERATIVE LIMITED (2012/012557/24)
4. TSHEPAHALA MAFUMAHADI CO-OPERATIVE LIMITED (2013/013384/24)
5. MADIBOGO PRIMARY CO-OPERATIVE LIMITED (2013/012855/24)
6. TSHWARAGANO AGRICULTURAL PRIMARY CO-OPERATIVE LIMITED (2018/011444/24)
7. EMLANJENI WOMEN AGRICULTURAL CO-OPERATIVE LIMITED (2012/002776/24)
8. ROOT OF REANAME (2025/002415/24)
9. JENN MANUFACTURING (2024/001075/24)
10. VUNOZOTHU PRIMARY CO-OPERATIVE LIMITED (2020/004506/24)
11. MAFUMAGADI A TOKOLOHO PROJECTS AND TRADING PRIMARY CO-OPERATIVE LIMITED (2016/008389/24)
12. BOELHOUER FEEDLOT CO-OPERATIVE LIMITED (2015/008422/24)
13. DEMASAMINA PRIMARY CO-OPERATIVE LIMITED (2015/009418/24)
14. SISOLIHLE TRADING CO-OPERATIVE LIMITED (2012/020973/24)
15. CINA MHLALI PRIMARY CO-OPERATIVE LIMITED (2018/006917/24)
16. NOLLUTTO DESIGNS AND MULTI-PURPOSE PRIMARY CO-OPERATIVE LIMITED (2015/006737/24)
17. OLESEGO PRIMARY CO-OPERATIVE LIMITED (2017/004216/24)
18. MHK MARKETING AND PROJECTS (2023/003107/24)
19. IMBEWU DEVELOPMENT PRIMARY CO-OPERATIVE LIMITED (2018/005504/24)
20. LEFAUFAU POULTRY CO-OPERATIVE LIMITED (2013/008507/24)
21. KWELIMFENE FAMILY (2011/000373/24)
22. DOUW II MULTIPURPOSE AGRICULTURAL PRIMARY CO-OPERATIVE LIMITED (2017/012113/24)
23. TRUSTWORTHY SERVICES AND AGRICULTURAL PRIMARY CO-OPERATIVE LIMITED (2016/010599/24)
24. NHLOYANE PRIMARY CO-OPERATIVE LIMITED (2019/008329/24)
25. OSAMANS SERVICES JW PRIMARY CO-OPERATIVE LIMITED (2015/002692/24)
26. UBUMBANO PROPERTY DEVELOPMENT AND PROJECTS CO-OPERATIVE LIMITED (2014/007337/24)
27. BAKING BROADS CO-OPERATIVE LIMITED (2013/008873/24)
28. 7 UP LUCERN AGRICULTURAL PRIMARY COOPERATIVE LIMITED (2017/002987/24)
29. MANGAKEKHO MULTIPURPOSE PRIMARY CO-OPERATIVE LIMITED (2016/004895/24)
30. GXHISHA TRADE AND PROJECTS PRIMARY CO-OPERATIVE LIMITED (2009/004774/24)

Notice is hereby given that the names of the abovementioned co-operatives have been removed from the register in terms of the provisions of section 71A of the Co-operatives Amendment Act, No 6 of 2013.
Any objections to this procedure, which interested persons may wish to raise, must together with the reasons therefore, be lodged with this office before the expiration of the period of thirty days.

REGISTRAR OF CO-OPERATIVES
Office of the Registrar of Co-operatives
Dti Campus
77 Meintjies Street
Pretoria
0002

Private Bag X237
Pretoria
0001

DEPARTMENT OF TRADE, INDUSTRY AND COMPETITION

NO. 6745 **17 October 2025**

NOTICE OF WITHDRAWAL OF NATIONAL CONSUMER COMMISSION'S ENFORCEMENT GUIDELINES

I, Hardin Ratshisusu, the Acting Commissioner of the National Consumer Commission, hereby withdraw the Enforcement Guidelines of the National Consumer Commission that were published in the Government Gazette Notice 93 of 2011.

The said Enforcement Guidelines are withdrawn on the basis that there have been concerns raised in a number of proceedings before the National Consumer Tribunal relating to inconsistences between the said Enforcement Guideline and Consumer Protection Act 68 of 2008.

The withdrawal of such Enforcement Guidelines is intended to avoid any opportunistic points being raised before the National Consumer Tribunal. This withdrawal will not affect any pending or finalised investigations.

Date and signed on this day of March 2025.

_____

Hardin Ratshisusu

Acting Commissioner: National Consumer Commission

Date: /March 2025

GENERAL NOTICES • ALGEMENE KENNISGEWINGS

DEPARTMENT OF AGRICULTURE, LAND REFORM AND RURAL DEVELOPMENT

NOTICE 3555 OF 2025

land reform & rural development
Department:
Land Reform and Rural Development
REPUBLIC OF SOUTH AFRICA

Private Bag X833, PRETORIA, 0001; 600 Lillian Ngoyi Street, PRETORIA, 0002
Tel: 012 – 312 8911; E-mail: queries@dlrrd.gov.za; Website: www.dlrrd.gov.za

Form 2

(Regulation 2(1))

DEPARTMENT OF LAND REFORM AND RURAL DEVELOPMENT

UPGRADING OF LAND TENURE RIGHTS ACT, 1991 (ACT NO. 112 OF 1991): SECTION 2

Notice of an application for conversion of a land tenure right by the Minister

I, Terries Ndove, Deputy Director General of Land Redistribution and Tenure Reform Branch, received an application for the conversion of a land tenure right described below.

Interested persons are hereby informed of the application for the conversion of the land tenure right.

Any person interested in the application may object to such application within a period of (30) thirty days from the publication of this notice. An objection to the application must be lodged at the address below.

1. The name, surname, identity number and residential address of the applicant:
   Nkambule Robert Mfana Identity Number:
   Erf Number 5084 Chiawelo Ext 4, Gauteng Province

2. The nature of the land tenure right:
   Lease Hold

No	Name and Surname	Erf Number	Title Number	Identity Number
1.	Nkambule Robert Mfana & Tladi Percy Thabo	Erf 5084 Chiawelo Ext 4, SOWETO	TL28538/2012	571201****086 641109****088
2.	Masoka Mncombosi Ellen	Erf 3390 Emdeni, SOWETO	TL45923/1999	370203****080
3.	Khoza Muntu Michael & Khoza Vivian	Erf 3347 Doornkop	TL44561/1996	511017****084 521110****086
4.	Tsotetsi Jabulane Simon	Erf 10716 Tokoza Ext 2	TL23762/1989	631203****087
5.	Tsotetsi June Phinias & Tsotetsi Nortjie Eunice	Erf 114 Monise, Katlehong	TL50149/1995	590819****081 620410****085
6.	Kutamo Rakgosi David & Kutamo Ramasela Elsie	Erf 20925 Vosloorus Ext 28	TL48963/1992	540929****086 581031****082
7.	Monkge Moseki William	Erf 8833 Kagiso	TL31127/1985	410820****083
8.	Molumo Benedick & Molumo Nomonde Glory	Erf 19 Ramakonopi, Katlehong	TL53407/1992	450311****080 520714****080
9.	Mosia Oupa Johannes & Mosia Belinda Mpho	Erf 1970 Tladi, SOWETO	T43992/2014	560629****088 610908****188
10.	Makhura Tlou Abel & Makhura Mmachoene Elizabeth	Erf 13752 Tokoza Ext 5	TL18831/2002	630401****086 680217****080
11.	Mbangllene Fernando Sebastiao	Erf 2526 Zonkizizwe, Katlehong	TL15199/2012	770928****084
12.	Moloi Daniel Motlalepula	Erf 12832 Tokoza	TL53159/1995	650404****080

13.	Nkenkana Patrick Mncedisi & Nkenkana Handrietta Nongamile	Erf 13363 Tokoza Ext 5	TL39606/1995	520310****081 580311****089
14.	Stoyile Cilia Nompucuko	Erf 12586 Tokoza	TL28669/1995	570410****084
15.	Mhlongo Phineas & Mhlongo Lizzy	Erf 119 Mavimbela, Katlehong	TL43771/1993	Unknown 560623****088
16.	Mdlalose Sicelo Hawath	Erf 4720 Zonkizizwe Ext 1 Katlehong	TL51700/2003	760531****082
17.	Mbatha Phaseka Gadlina	Erf 3721 Zonkizizwe Katlehong	TL72054/2003	610403****085
18.	Ntshangase Vusi Stephen	Erf 6260 Zonkizizwe Ext 1 Katlehong	TL39728/2003	660219****085
19.	Mbuyisa Thoko Esther	Erf 443 Zonkizizwe Katlehong	TL7361/2001	530605****088
20.	Moche Masingita Maureen	Erf 3461 Katlehong South	TL15394/1998	751006****089
21.	Mahlangu Jepep William & Mahlangu Mamsy Julian	Erf 148 Vosloorus Ext 28	T93447/2000	320217****087 340608****087
22.	Zulu Bhekizenzo Cosmus & Zulu Jabu Letti	Erf 2073 Zonkizizwe Katlehong	TL8720/2008	650530****082 740509****089
23.	Ntswelekile Balalibi Enock	Erf 3414 Katlehong South	TL36042/1998	700131****089
24.	Gumene Sibusiso Mhlonishwa	Erf 3014 Zonkizizwe Katlehong	TL48941/2003	700822****081

25.	Tsupane Popi	Erf 1540 Zonkizizwe, Katlehong	TL16180/2003	380407****082
26.	Manyoni Mathews Bhekizenzo	Erf 1355 Zonkizizwe, Katlehong	TL2876/2008	650720****086
27.	Dulani Sikhwenkweni	Erf 12671 Tokoza	TL9218/1995	500323****085
28.	Ndlovu Mfana Johannes & Ndlovu Dudu Eunice	Erf 427 Monise, Katlehong	TL15180/1987	570328****085 Unknown
29.	Xaba Jabulani Bhidi & Ndebele Portia	Erf 1705 Katlehong South	TL49567/1997	690208****080 761202****085
30.	Matsie Molai Joseph	Erf 7805 Moleleki Ext 2, Katlehong	TL7748/1992	651105****083
31.	Sekese Dilimatso Rebecca	Erf 8701 Moleleki Ext 2, Katlehong	T36268/1992	470217****089
32.	Sigenu Sikhumbuzo Amos & Totose Fukuzwa Florence	Erf 13043 Tokoza	TL13259/1995	611027****081 660723****088
33.	Mahlangu Dina Christina	Erf 4780 Daveyton	TL14560/1998	401103****084
34.	Mazibuko Josiah Boy & Mazibuko Elsie Fikile	Erf 9495 Pimville Zone 6, SOWETO	TL24908/1988	Unknown 501130****085
35.	Ngwenya Mandla Gospel & Ngwenya Mosiuoa Valencia	Erf 64 Credi, Katlehong	TL1120/1990	581208****086 570310****084
36.	Matiwane Joseph Bafana	Erf 16534 Kagiso Ext 12	TL21056/1994	690804****080
37.	Simaisi Lingani Herbert	Erf 11612 Orlando, SOWETO	TL33487/2008	731023****087

38.	Vilakazi Sindisiwe Khanyisile	Erf 12917 Vosloorus Ext 23	TL12785/1991	630426****089
39.	Rasekoala Abraham Basiea & Rasekoala Esther Mosidi	Erf 6480 Tsakane	TL46300/1989	300701****081 321015****081
40.	Radebe Mswazi Gideon & Radebe Deliwe Mirriam	Erf 601 Monise, Katlehong	TL55661/1988	241006****083 270724****082
41.	Khumalo Francina Marako	Erf 166 Vosloorus	T15494/2000	410406****085
42.	Somlenze Makunana Albert	Erf 2647 Tsakane	TL21907/1993	080406****085
43.	Themba Conrad Cleopus	Erf 655 Wattville	TL12847/1992	481224****082
44.	Marule Elizabeth Thelma Marule Ernest	Erf 2344 Wattville	TL34003/2003	480916****082 460412****081
45.	Nongh Cyprian Phuthi	Erf 2065 Daveyton	TL28086/2000	570912****083
46.	Phakwe Caroline	Erf 702 Monise, Katlehong	TL36363/2018	770112****080
47.	Radebe Mswazi Gideon Radebe Deliwe Mirriam	Erf 676, Monise, KATLEHONG	TL280/1989	241006****083 270724****082
48.	Kutamo Rakgosi David Kutamo Ramasela Elsie	Erf 20925 Vosloorus Ext 28	TL48963/1992	540929****086 581031****085
49.	Skhosana Mantombi Otelian	Erf 280 Daveyton	TL6191/1999	381128****089

50.	Mabanga Themba Michael	Erf 631 Ramokonopi East, Katlehong	TL4501/1986	560602****089

3. The location of the property by stand number, known name for the area; name of local municipality and the province:

Erf Number 5084 Chiawelo Ext 4, City of Johannesburg Municipality, Gauteng Province

4. The description of the property:

House

5. The capacity in which the land tenure right is being held or could have been held by the applicant:

Owner

6. If the application is made on behalf of more than one-person, personal particulars of such other persons:

Tladi Percy Thabo Identity Number: 6411095356088

7. Address at which objection can be lodged:

(Physical address): Department of Land Reform and Rural Development
600, Lilian Ngoyi, Berea Park
Pretoria
0001
(Email address): queen.filani@dlrrd.gov.za

MR. TERRIES NDOVE
DEPUTY DIRECTOR GENERAL: LAND REDISTRIBUTION AND TENURE REFORM
DATE: 01/10/2025

DEPARTMENT OF AGRICULTURE, LAND REFORM AND RURAL DEVELOPMENT

NOTICE 3556 OF 2025

COMMUNAL PROPERTY ASSOCIATIONS ACT 28 OF 1996

REGULATIONS IN TERMS OF THE COMMUNAL PROPERTY ASSOCIATIONS ACT, 1996

EXTENSION OF THE COMMENTS PERIOD

The Minister of Land Reform and Rural Development published the Regulations in Terms of the Communal Property Associations Act, 1996, as amended, for public comment. In terms of the publication notice, Notice No. 3420 of 8 August 2025, under Government Gazette 53131 of 8 August 2025, the comments period was a period of 30 days from the date of publication of that notice (8 August 2025).

The Minister of Land Reform and Rural Development hereby extends the comments period for a further period of thirty days from the date of publication of this Notice. Comments must be sent to the following email address: *cpaenquiries@dlrrd.gov.za*

M NYHONTSO, MP
MINISTER OF LAND REFORM AND RURAL DEVELOPMENT
DATE: 29/09/25

DEPARTMENT OF AGRICULTURE, LAND REFORM AND RURAL DEVELOPMENT

NOTICE 3557 OF 2025

MINISTER
LAND REFORM AND
RURAL DEVELOPMENT
REPUBLIC OF SOUTH AFRICA
Private Bag X250, PRETORIA, 0001 • Tel.: +27 12 312 9395
Private Bag X9087, CAPE TOWN, 8000 • Tel.: +27 21 467 4502 •
Web: www.dlrrd.gov.za

Form 2

(Regulation 2(1))

DEPARTMENT OF LAND REFORM AND RURAL DEVELOPMENT

UPGRADING OF LAND TENURE RIGHTS ACT, 1991 (ACT NO. 112 OF 1991):
SECTION **2**

Notice of an application for conversion of a land tenure right by the Minister

I, Mzwanele Nyhontso Minister of Land Reform and Rural Development, has received an application for the conversion of a land tenure right described below.

Interested persons are hereby informed of the application for the conversion of the land tenure right.

Any person interested in the application may object to such application within a period of (30) thirty days from the publication of this notice. An objection to the application must be lodged at the address below.

1. The name, surname, identity number and residential address of the applicant:
   Attached

2. The nature of the land tenure right:
   Leasehold

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No	Name &Surname	Erf Number	Title Number	Identity Number
1.	Makoba Lundi	Erf 13739 Tokoza Ext 5	TL20652/1995	540413****083
2.	Nhlapo Mziwake William & Nhlapo Nono Mina	Erf 1703 Tokoza	TL38715/1988	390812****089 390805****080
3.	Mbatha Sibongile	Erf 462 Zonkizizwe Katlehong	TL21423/2001	490322****089
4.	Mngomezulu Novani Elijah	Erf 4701 Zola SOWETO	TE37204/1993	190414****085
5.	Mkhonza Thokozile Mildred	Erf 5205 Zola SOWETO	TL7354/1989	521114****086
6.	Mmatli Jacob	Erf 11168, Orlando, SOWETO.	TL13179/2002	270912****089
7.	Kaliswayo Nkankane Spamandla Michael & Masuku Octavia Duduzile	Erf 12819 Dobsonville Ext 4 SOWETO	TL30533/1997	560401****080 620927****080
8.	Monywabe Tazi Irine	Erf 6314 Moleleki Ext 2, Katlehong.	TL2041/1992	501203****086
9.	Sibiya Phiwe Sibiya Thembi Elder	Erf 8038 Tokoza	TL20300/1987	430528****085 440726****085
10.	Mashigo Pitso David & Mashigo Lizzie Johanna	Erf 1912 Vosloorus Ext 1	TL15711/1990	390917****084 400512****085
11.	Sithole Mavasha Lucas	Erf 492 Daveyton	TL6956/2000	311226****189

12.	Matlou Malose Isaac	Erf 1704 Doornkop Ext 1	TL99/1992	490803****086
13.	Makoti Boy Alfred	Erf 1684 Moroka, SOWETO	TL549/1986	420623****083
14.	Kotwal Yusuf Ismail & Kotwal Fehmida	Erf 5417 Mohlakeng Ext 3	TL54177/2004	590923****085 611231****081
15.	Stofile Monimang Beauty	Erf 5474 Kagiso	TL101570/1998	410409****085
16.	Sapa Lesego Mavis & Sapa Lydia Mpho	Erf 5257 Mohlakeng Ext 3	TL33609/2009	860913****086 690929****081
17.	Mthambana Mkulu Zed & Mthambana Nomasonto Irene	Erf 9057 Tokoza	TL22871/1987	560126****080 590929****081
18.	Mahlangu Dina Christina	Erf 4780, Daveyton	TL14560/1998	401103****084
19.	Buthelezi Sibusiso Aubrey	Erf 10868 Tokoza Ext 2	TL34342/2013	740510****086
20.	Mngomezulu Absolom	Erf 13494 Daveyton	TL7754/2000	630814****082
21.	Bolosha Nomsa Ivy & Bolosha Mncedisi Alfred	Erf 3137 Daveyton	TL21998/1998	410321****085 170429****087
22.	Longwe Makhosazane	Erf 5046 Masetjhaba View Ext 2, DUDUZA.	TL96584/1998	741004****089
23.	Fokazi Nellie Linah	Erf 1879 Daveyton	TL6799/1998	100608****082
24.	Tshabalala Ellen	Erf 3507 Doornkop	TL61218/1997	510718****082
25.	Litheko Archie	Erf 6020 Kagiso	TL1924/2002	470515****085

26.	Tshambala Innocentia	Erf 1682 Mofolo North SOWETO	TL30607/2007	720421****082
27.	Hlatshwayo Pauline Sesi	Erf 21678, Vosloorus Ext 28.	TL44864/1996	711002****087
28.	Thempu Mmabatho Jecintha	Erf 16918 Kagiso Ext 12	TL56290/2007	651026****080
29.	Manare Cuthbert Thabiso & Manare Emily	Erf 8888 Jabavu Ext 3, SOWETO	T42393/2024	780210****081 821225****086
30.	Ntshihlele Mathias Simon & Ntshihlele Matholwane Josephine	Erf 314 Moroka SOWETO	T59878/1998	540411****082 590119****082
31.	Rakale Nonhlanhla Mildred & Rakale Amos Anthony	Erf 1860 Dhlamini SOWETO	T9145/2007	540218****088 511001****083
32.	Firstrand Bank Ltd	Erf 1144 Jabavu Central Western Ext 1	TL16595/1990	192900122506
33.	Ngcobo Banakile Joseph	Erf 20948 Vosloorus Ext 28	TL4032/1995	660709****086
34.	Rabosiwana Robert Johannes & Rabosiwana Ntombi Maureen	Erf 1404 Protea North SOWETO	TL37429/1987	420831****082 430328****080
35.	Senyane Mahlomola Moses	Erf 2677 Orange Farm Ext 1	T71970/2024	820412****089
36.	Qibie Happy Leonard	Erf 24836 Kwa-Thema Ext 3	TL48600/1998	701205****081

37.	Chirame Mhlaba Maria	Erf 3468 Orlando East SOWETO	TL47583/1999	280206****083
38.	Klaas Phale David & Klaas Pani Jaqueline	Erf 6638 Kagiso	TL802/1987	540215****087 540713****081
39.	Madela Bongiwe Altha	Erf 7772, Vosloorus Ext 9	TL10606/1989	400625****088
40.	Nkuna Mbhazima Richard	Erf 78 Protea North SOWETO	TL9845/1986	560701****082
41.	Thomas John Masibi & Thomas Martha Thelma	Erf 16343 Kagiso Ext 12	TL48005/1995	591117****082 610610****088
42.	Ndebele Michael Philani	Erf 3567 Zonkizizwe Katlehong	TL43056/2003	600511****082
43.	Malawane Nanjiwe Alina	Erf 2796 Wattville	TL28648/2002	080817****085
44.	Msiza Thembani Emily	Erf 4782 Daveyton	TL26343/1998	240914****087
45.	Mphuthi Matsabana Jacob-Administrator & Tladi Disebo Hope	Erf 52 Ramakonopi, Katlehong	TL9152/1989	801217****081 Unknown
46.	Khumalo Mamilo Christina & Khumalo Packord Albert	Erf 824 Twala, Katlehong.	TL834/1987	350625****087 370909****080
47.	Lebakeng Samuel	Erf 2117 Mofolo Central, SOWETO.	TL22549/2003	450802****080

48.	Zuma Patience Gadifele	Erf 11530 Dobsonville Ext 4 SOWETO	T7882/2002	600528****084
49.	Mongalane Toli Patrick & Mongalane Seipati Emily	Erf 13102 Kagiso Ext 8	TL56320/1995	600914****085 620508****085
50.	Madia Peter	Erf 2591 Wattville	TL42586/2003	671130****085
51.	Mohlala Eunica Maki Dora & Mohlala Lesi Nancy	Erf 11083 Daveyton	TL1436/1990	521027****082 1960/11/11

3. The location of the property by stand number, known name for the area; name of local municipality and the province:

   Erf Number 13739 Tokoza, Ext 5, Ekurhuleni Municipality,

   Gauteng Province

4. The description of the property:

   House

5. The capacity in which the land tenure right is being held or could have been held by the applicant:

   Owner

6. If the application is made on behalf of more than one-person, personal particulars of such other persons:

   N/A

7. Address at which objection can be lodged:

   (Physical address): Department of Land Reform and Rural Development

   600, Lilian Ngoyi, Berea Park

   Pretoria

   0001

   (Email address): queen.filani@dlrrd.gov.za

MR. TERRIES NDOVE
DEPUTY DIRECTOR GENERAL: LAND REDISTRIBUTION AND TENURE REFORM
DATE: 2025/09/22

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PARLIAMENT OF THE REPUBLIC OF SOUTH AFRICA

NOTICE 3558 OF 2025

MS ALEXANDRA ABRAHAMS, MP

NOTICE OF INTENTION TO INTRODUCE A PRIVATE MEMBER'S BILL AND INVITATION FOR COMMENT ON THE DRAFT BILL, NAMELY THE CHILDREN'S AMENDMENT BILL, 2025

Ms Alexandra Abrahams, MP, acting in accordance with section 73(2) of the Constitution of the Republic of South Africa, 1996 ("the Constitution"), intends to introduce The Children's Amendment Bill, 2025, in the National Assembly of Parliament. An explanatory summary of the draft Bill is hereby published in accordance with Rule 276(1)(*c*) of the Rules of the National Assembly.

Section 28(1)(*d*) of the Constitution of the Republic of South Africa, 1996 ("the Constitution") affords all children the right to be protected from maltreatment, neglect, abuse or degradation. Section 28(2) of the Constitution also pronounces that a child's best interests are of paramount importance in every matter concerning the child. The Constitution further protects a child's right to life in terms of section 11. In addition, the Children's Act, 2005 (Act No. 38 of 2005) ("the Children's Act"), seeks to provide comprehensive protection for children.

However, in a country where the protection of children is of utmost importance, the proliferation of the unsafe abandonment of neonates (i.e children who are under 28 days old), is alarming and of pressing social concern. According to a 2018 study[1] conducted by the South African Medical Research Council, about 3 500 children survive abandonment each year and that for every child that was found alive, at least two were dead. The study further found that 65 percent of the abandoned children were newborns, while 90 percent were under the age of one. Neonates are found dumped in places like dumpsters, drains, toilets, open fields, on the side of the road and on doorsteps. The unsafe abandonment of neonates violates their right to life, and right to be free of maltreatment, neglect, abuse and degradation

There are many reasons as to why children are abandoned. These, *inter alia,* include, but are not limited to, poverty, gender-based violence, teenage or unwanted pregnancy, lack of sufficient pregnancy counselling, child conceived as a result of rape, lack of access to family planning services like contraception, incest, failed illegal abortions, lack of family support and financial issues. Another cause of child abandonment is the fact that the current South African laws are reactive in nature in that while the laws punish the crime of child abandonment, they fail to provide safe alternatives to the act of unsafe abandonment of neonates either via 'baby savers' or 'baby safe havens'.

Baby savers and baby safe havens serve as a critical safety net which can save a neonate's life and allow for the dignified and safe relinquishment of a neonate. They offer a humane and

[1] The Borgen Project. (2020). *Abandoned Babies in South Africa.* [Online]. Available at: https://borgenproject.org/abandoned-babies-in-south-africa/#:~:text=each%20garment%20sold.-,Abandoned%20Baby%20Rate%20in%20South%20Africa,30%20percent%20increase%20in%20orphans

safe alternative to abandoning neonates in hazardous locations and thus upholds a child's right to life and protecting the child from maltreatment and neglect.

The Children's Amendment Bill, 2025 ("the draft Bill") thus seeks to amend the Children's Act so as to provide for the safe relinquishment of a neonate into a baby safe or with a baby safe haven. The draft Bill seeks to give legal recognition to 'baby savers' and 'baby safe havens' and to regulate such facilities. Furthermore, the draft Bill expressly excludes the safe relinquishment of a neonate at a baby saver or at a baby safe haven, from the definition of "abandoned child", thereby clarifying that such safe relinquishment does not constitute a crime. However, the Bill expressly states that the fact of a safe relinquishment of a neonate does not indemnify a person who committed an offence in respect of the neonate prior to the safe relinquishment. Allowing for the safe relinquishment of a neonate in a baby safe or with a baby safe haven will assist in the protection of children's rights as entrenched in the Constitution.

Interested parties and institutions are invited to submit written representations on the proposed content of the draft Bill to the Speaker of the National Assembly within 30 days of the publication of this notice. Representations can be delivered to the Speaker, New Assembly Building, Parliament Street, Cape Town; mailed to the Speaker at PO Box 15, Cape Town 8000; or e-mailed to speaker@parliament.gov.za and copied to legislation@da.org.za.

Copies of the draft Children's Amendment Bill, 2025 may, after introduction, be obtained from the Democratic Alliance by requesting a copy from legislation@da.org.za

PARLIAMENT OF THE REPUBLIC OF SOUTH AFRICA

NOTICE 3559 OF 2025

MR M. CUTHBERT, MP

NOTICE OF INTENTION TO INTRODUCE A PRIVATE MEMBER'S BILL AND INVITATION FOR COMMENT ON THE DRAFT PUBLIC PROCUREMENT AMENDMENT BILL, 2025

Mr M. Cuthbert, MP, acting in accordance with section 73(2) of the Constitution of the Republic of South Africa, 1996 ("Constitution"), intends to introduce the Public Procurement Amendment Bill, 2025 ("draft Bill"), in Parliament. An explanatory summary of the draft Bill is hereby published in accordance with Rule 276(1)*(c)* of the Rules of the National Assembly (9th Edition).

The Republic of South Africa remains a highly unequal society and the legacy of apartheid and decades of governance failures, mismanagement, and corruption have left deep and systemic inequalities across society. Thirty years of democracy have failed to usher in adequate improvements in the quality of living and the socio-economic status of the most vulnerable South Africans. National government interventions in the public procurement space have failed to address the root causes of these inequalities.

The key role played by public procurement processes in leveraging government buying to assist in the alleviation of poverty, the combatting of inequality, and making socio-economic gains through private partnerships, is recognised. At the same time, there is a dire need for an objective and effective measuring stick in preferential procurement processes that does not centre around race-based classifications.

The Public Procurement Act, 2024 (Act No. 28 of 2024) ("principal Act"), gives effect to section 217(2) of the Constitution, which provides that organs of state may implement a procurement policy providing for categories of preference in the allocation of contracts and the protection or advancement of persons, or categories of persons, disadvantaged by unfair discrimination. To give effect to the aforementioned constitutional provision, the principal Act uses broad-based black economic empowerment ("BBBEE"), as contemplated in the Broad-Based Black Economic Empowerment Act, 2003 (Act No. 53 of 2003) ("BBBEE Act"), to award preference to tenderers.

However, race-based preferences have failed to bring about socio-economic change to the majority of South Africans. Instead, these policies favour the implementation of often complicated asset sales, sub-contracting allocations, and share transfers amongst large corporate entities, in order to comply with the complex race-based procurement targets, thereby qualifying for lucrative government contracts.

BBBEE has proven to be an ineffective method of promoting economic inclusion, as it is rooted in the idea of 'trickle down redress', where corporates are used to transfer assets, positions and contracts from one elite person to another to promote economic inclusion. However, those who tend to benefit most from BBBEE currently, tend to be either politically connected, already wealthy or highly educated persons. Therefore, the vast majority of South Africans, who are intended to benefit from this policy, are excluded from its ambit.

In essence, our current race-based procurement policies have centralised the benefits of preferential procurement programmes in the hands of the elite few, instead of addressing the root causes of inequality and bringing about true socio-economic change for the majority of South Africans.

The draft Bill seeks to amend the principal Act, so as to make provision for procuring institutions to develop and implement public procurement policies, in terms of section 217(2) of the Constitution, which also contribute toward the achievement of the Sustainable Development Goals as adopted by the United Nations in 2015 ("SDGs").

The draft Bill proposes to amend the principal Act by incorporating SDGs as the basis for an objectively measured, race-neutral and socio-economically progressive alternative procurement framework. The draft Bill therefore provides for procuring institutions to develop and implement public procurement policies, as envisaged in section 217(2) of the Constitution, in accordance with the SDGs.

The draft Bill further proposes the repeal of the provisions of the principal Act related to set-asides, prequalification criteria for preferential procurement, subcontracting as a condition to bid, and the designation of sectors for local production and content, in order to align the principal Act with the spirit, purport and text of section 217 of the Constitution. The draft Bill seeks to expand the qualification criteria for the appointment of a person as a member of the Public Procurement Tribunal and to remove a threat to national security as justification for the exemption of a procuring institution from any provision of the principal Act.

The draft Bill further seeks to repeal the BBBEE Act and proposes the necessary consequential amendments to other related legislation which will be affected by the repeal of the BBBEE Act.

Interested parties and institutions are invited to submit written representations on the proposed content of the draft Bill to the Speaker of the National Assembly within 30 days of the publication of this notice. Representations can be delivered to the Speaker, New Assembly Building, Parliament Street, Cape Town; mailed to the Speaker, P O Box 15 Cape Town 8000, or emailed to speaker@parliament.gov.za and copied to legislation@da.org.za.

Copies of the draft Bill may be obtained by emailing legislation@da.org.za.

DEPARTMENT OF TRADE, INDUSTRY AND COMPETITION

NOTICE 3560 OF 2025

INTERNATIONAL TRADE ADMINISTRATION COMMISSION

INVESTIGATION INTO THE ALLEGED DUMPING OF FLAT-ROLLED PRODUCTS OF IRON OR NON-ALLOY STEEL, OF A WIDTH OF 600 MM OR MORE, CLAD, PLATED OR COATED, WITH ALUMINIUM-ZINC ALLOYS, OF A THICKNESS OF LESS THAN 0.45MM AND FLAT-ROLLED PRODUCTS OF OTHER ALLOY STEEL, OF A WIDTH OF 600 MM OR MORE, OTHERWISE PLATED OR COATED WITH ZINC, OF A THICKNESS OF LESS THAN 0,45MM ORIGINATING IN OR IMPORTED FROM THE PEOPLE'S REPUBLIC OF CHINA

On 20 March 2024, the International Trade Administration Commission of South Africa ("the Commission") initiated an investigation into the alleged dumping of flat-rolled products of iron or non-alloy steel, of a width of 600 mm or more, clad, plated or coated, with aluminium-zinc alloys, of a thickness of less than 0.45mm, classifiable under tariff subheadings 7210.61.20 and 7210.61.30 and flat-rolled products of other alloy steel, of a width of 600 mm or more, otherwise plated or coated with zinc, of a thickness of less than 0,45mm, classifiable under tariff subheadings 7225.92.25 and 7225.92.35 ("corrosion resistant steel coil" or "the subject product") originating in or imported from the People's Republic of China ("China") through Notice number 3071 of 2025 in *Government Gazette* number 52348.

The investigation was initiated after the Commission considered the application lodged by ArcelorMittal South Africa Ltd ("AMSA") and SAFAL Steel (Pty) Ltd ("SAFAL") ("the Applicant") alleging that the subject product originating in or imported from China is being dumped onto the Southern African Customs Union ("SACU"), causing material injury to the SACU market. The Commission was satisfied that the Applicant submitted sufficient evidence and established a *prima facie* case to enable the Commission to arrive to a reasonable conclusion that an investigation should be initiated based on dumping, material injury and a causal link between the alleged dumped imports and the material injury experienced by the SACU Industry.

Subsequent to initiation of the investigation, all known interested parties were sent the non-confidential application and requested to respond to the relevant questionnaires.

On 09 September 2025, the Commission, after considering all the information available to it, made a preliminary determination that the subject product originating in or imported from China is being dumped in the SACU. The Commission also made a preliminary determination that the SACU Industry is experiencing material injury and that there is a causal link between the dumped imports and the material injury experienced by the SACU Industry.

Notwithstanding the findings set out in its report, the Commission made a preliminary determination not to impose provisional anti-dumping duties at this stage. This recommendation is based on the fact that provisional safeguard duties were already imposed on 27 June 2025 on imports of the subject product. These safeguard duties may have already contributed to deterring imports and may have had a positive impact on the domestic industry's situation. Moreover, the Commission found that not imposing provisional duties could minimise the cost-raising effect on the downstream users of the subject product.

The basis and reasons for the Commission's findings are set out in its Preliminary Report No. 758, wherein the decisions regarding its determination are detailed.

PROCEDURAL FRAMEWORK

This investigation is conducted in terms of section 16 of the International Trade Administration Act, 2002 (the ITA Act) and the relevant sections of the ITA Act and the Anti-Dumping Regulations of the International Trade Administration Commission of South Africa (ADR). Both the ITA Act and the ADR are available on the Commission's website (www.itac.org.za) or from the Trade Remedies division, on request.

Interested parties are invited to comment in writing to the Commission's preliminary determination within 14 days from the date the preliminary report is made available.

This gazette is also available free online at **www.gpwonline.co.za**

Comments received after the due date will not be accepted except with the prior written consent of the Commission. The Commission will give due consideration to written requests for an extension of not more than 7 days on good cause shown (properly motivated and substantiated), if received prior to the expiry of the 14-day period. Merely citing insufficient time is not an acceptable reason for an extension.

ADDRESS

The response to the questionnaire and any information regarding this matter and any arguments concerning the allegation of dumping and the resulting material injury and threat of material injury must be submitted in writing to the following address:

Physical address	**Postal address**
Senior Manager: Trade Remedies I	Senior Manager: Trade Remedies I
International Trade Administration Commission	Private Bag X753
Block E – The DTI Campus	PRETORIA
77 Meintjies Street	0001
SUNNYSIDE	SOUTH AFRICA
PRETORIA	
SOUTH AFRICA	

Should you have any queries, please do not hesitate to contact the following investigating officers: Mr Busman Makakola at BMakakola@itac.org.za, Ms Mosa Sebe at Msebe@itac.org.za and Mr Brian Same at BSame@itac.org.za.

This gazette is also available free online at **www.gpwonline.co.za**

DEPARTMENT OF TRANSPORT

NOTICE 3561 OF 2025

NOTICE 2045 OF 2023
AIR SERVICE LICENSING ACT, 1990 (ACT NO.115 OF 1990)
APPLICATION FOR THE GRANT OR AMENDMENT OF DOMESTIC AIR SERVICE LICENCE

Pursuant to the provisions of section 15 (1) (b) of Act No. 115 of 1990 and Regulation 8 of the Domestic Air Regulations,1991, it is hereby notified for general information that the application detail of which appear in the appendix, will be considered by the Air Service Licensing Council. Representation in accordance with section 15 (3) of the Act No.115 of 1990 in support of, or in position, an application, should reach the Air Service Licensing Council. Department of Transport, Private Bag X 193, Pretoria, 0001 or by email to: TshivhaZ@dot.gov.za within 21 days of date of the publication thereof.

APPENDIX I (New Applications)

Full name and trade name of the applicant. (B) Full business or residential address of the applicant. (C) Class of license applied for. (D) Type of air service to which application applies. (E) Category of aircraft to which application applies.

Eagle Eye Security Specialist (Pty) Ltd. (B) Room 15 Lower Roof, Office 5 West Wing, OR Tambo Int Airport. (C) Class III. (D) Type G3, G4, G5, G8, G11, G13, G15 & G16(RPAS). (E) Category A4

APPENDIX II (Amendment Applications)

(A) Full Name and trade name of the applicant. (B) Full business or residential address the applicant. (C) The Class and number of license in respect of which the amendment is sought (D) Type of air service and the amendment thereto which is being applied for (E) Category of aircraft and the amendment thereto which is being applied for. (F) Amendment referred to in section 14(2) (b) to (e).

A) Aeronautic Solutions South Africa (pty) Ltd t/a Aeronautic Solutions. (B)Limeroc Business Park, ERF 1818 Simela Street Knoppieslaagte (385-JR0 Centurion. (C) **Class III (G770D).** (D) Type G2, G3, G5, G7, G8, G10, G11, G15 & G16(Live powerline inspections and ship to shore operations within 50nm from shore) (E) Category H1 & H2. (F) Amendment Application due to changes to personnel: I.G Piennar is replaced by S.P Houghton as Responsible person Flight Oprations; H.V Voster is replaced by A.J Odndaal as Responsible Person Aircraft; C. de vos is replaced by S.P Houghton as Safety Manager.

A) **Aeronautic Solutions South Africa (pty) Ltd t/a Aeronautic Solutions.** (B)Limeroc Business Park, ERF 1818 Simela Street Knoppieslaagte (385-JR0 Centurion. (C) **Class II (N769D**). (D) Type N1 & N2 (E) Category H1 & H2. (F) Amendment Application due to changes to personnel: I.G Piennar is replaced by S.P Houghton as Responsible person Flight Oprations; H.V Voster is replaced by A.J Odndaal as Responsible Person Aircraft; C. de vos is replaced by S.P Houghton as Safety Manager.

A) TitanOffshore (Pty) Ltd (B)5& 7 Opal Close George 6529. (C) **Class III (G795D).** (D) Type G3, G10, G15 & G16 (Ship to shore operations). (E) Category H1 & H2. (F) Amendment Application due to changes to personnel: B.A Adebayo is replaced by M.M Steynberg as Chief Executive Officer; J.F Erasmus is replaced by L Potgieter as Responsible person Flight operations; G.P Oosthuizen is replaced by B.A Adebayo as Responsible person Aircraft; G.W Asaram is replaced by B. Wessels as Air safety Officer.

A) **TitanOffshore (Pty) Ltd** (B)5& 7 Opal Close George 6529. (C) Class II (N794D). (D) Type N1 & N2. (E) Category H1 & H2. (F) Amendment Application due to changes to personnel: B.A Adebayo is replaced by M.M Steynberg as Chief Executive Officer; J.F Erasmus is replaced by L Potgieter as

Responsible person Flight operations; G.P Oosthuizen is replaced by B.A Adebayo as Responsible person Aircraft; G.W Asaram is replaced by B. Wessels as Air safety Officer.

East London Air Services CC t/a East London Air Services (B)Air Hart Aircraft Hangar, East London Airport, East London. (C) **Class II (N640D**). (D) Type N1 & N2. (E) CategoryA3, A4 & H2. (F) Amendment application due to changes to personnel and membership: W.W Whitfield resigned as member of the CC; W.W. Whitfield is replaced by by D.Y Hart as Chief Executive Officer; D.Y Hart is replaced by D.S Talbot as responsible person flight operations; D.S Talbot is replaced by J. Jooste as Air safety officer.

East London Air Services CC t/a East London Air Services (B)Air Hart Aircraft Hangar, East London Airport, East London. (C) **Class III (G736D).** (D) Type G3, G7, G10, G15. (E) CategoryA3, A4 & H2. (F) Amendment application due to changes to personnel and membership: W.W Whitfield resigned as member of the CC; W.W. Whitfield is replaced by by D.Y Hart as Chief Executive Officer; D.Y Hart is replaced by D.S Talbot as responsible person flight operations; D.S Talbot is replaced by J. Jooste as Air safety officer.

A) Leading Edge Aviation CC (B)Hangar A1, Nelspruit Municipal Airport, Mbombela, Mpumalanga. (C) **Class III (G1385D).** (D) Type G3,G8 & G15. Category H1 & H2. (F) Amendment Application due to changes to personnel: M.A Jackson is replaced by S.M Jackson as responsible person flight operations; M. Rochat is replaced by D.L Graham as responsible person aircraft; Peter Fetting is replaced by B.A.W Crystal as Air safety officer

DEPARTMENT OF TRANSPORT
INTERNATIONAL AIR SERVICE ACT, (ACT NO.60 OF 1993)
GRANT /AMENDMENT OF INTERNATIONAL AIR SERVICE LICENSE

Pursuant to the provisions of section 17 (12) of Act No.60 of 1993 and Regulation 15 (1) and 15 (2) of the International Air Regulations,1994, it is hereby notified for general information that the applications, detail of which appear in the Schedules hereto, will be considered by the International Air Services Council (Council) representation in accordance with section 16(3) of the Act No. 60 of 1993 and regulation 25(1) of International Air Services Regulation, 1994, against or in favour of an application, should reach the Chairman of the International Air Services Council at Department of Transport, Private Bag X 193, Pretoria, 0001 or by email to: internatonalcouncil@dot.gov.za/ TshivhaZ@dot.gov.za within 28 days of the publication hereof. It must be stated whether the party or parties making such representation is / are prepared to be represent or represented at the possible hearing of the application.

APPENDIX I (New Application)

(A) Full name, surname and trade name of the applicant. (B) Full business or residential address of the applicant. (C) Class of licence applied for. (D) Type of International Air Service to which application pertains. (E) Category or kind of aircraft to which application pertains. (F) Airport from and the airport to which flights will be undertaken. (G) Area to be served. (H) Frequency of flight.

A) **Aeronautic Solutions South Africa (Pty) Ltd t/a Aeronautic Solutions**: (B) Limeroc Business Park, ERF 1818, Simela Street Knoppieslaagte (385-JR) Centurion. (C) Class II (D) Type N1 & N4. (E) Category H1 & H2. (F) ERF 181, Knoppieslaagte 385-jr and any other aerodrome/ heliport as required by contractors for Air Ttansport Service. (G) Worldwide.

A) **Aeronautic Solutions South Africa (Pty) Ltd t/a Aeronautic Solutions**: (B) Limeroc Business Park, ERF 1818, Simela Street Knoppieslaagte (385-JR) Centurion. (C) Class III (D) Type G2, G3, G5, G8, G10, G11, G15 & G16(Live powerline inspection and ship to shore operations within 50nm from shore). (E) Category H1 & H2. (F) ERF 181, Knoppieslaagte 385-jr and any other aerodrome/ heliport as required by contractors for general aviation service. (G) Worldwide.

A) Leading Edge Aviation cc: (B)Hangar A1, Nelspruit Municipal Airport, Mbombela Mpumalanga. (C) Class III (D) Type G3, G8, G15. (E) Category H1 & H2. (F) Hangar A1, Nelspruit Municipal Airport, Mbombela Mpumalanga., South Africa(G).

A) **East London Air Service CC t/a East London Air Services**: (B) Air Hart Aircraft Hangar, East London Airport, East London 5201(C) Class II (D) Type N1 & N4. (E) Category A3 & H2. (F) East London Airport, East London, Eastern Cape, South Africa. (G)

A) **East London Air Service CC t/a East London Air Services:** (B) Air Hart Aircraft Hangar, East London Airport, East London 5201(C) Class III (D) Type G3, G7, G10, G15. (E) Category A3 & H2. (F). East London Airport, East London, Eastern Cape, South Africa (G)

APPENDIX II (Amendment Application)

(A) Full Name and trade name of the applicant. (B) Full business or residential address the applicant. (C) The Class and number of license in respect of which the amendment is sought (D) Type of air service and the amendment thereto which is being applied for (E) Category of aircraft and the amendment thereto which is being applied for. (F) Amendment referred to in section 14(2) (b) to (e).

A) South African Airways (SOC) Ltd. t/a South African Airways (B)Airways Park Jones Road, OR Tambo International Airport, Kempton Park (C) **Class I (I/S094).** (D) Type S1 & S2. (E) Category A1 & A2. (F) Amendment Application due to addition of route: Johannesburg- Zanzibar-unlimited; OR Tambo International-Doha-7 frequencies

BOARD NOTICE 839 OF 2025

South African Council
for the Architectural Profession

51 Wessel Road, Right Wing, Rivonia, Sandton, 2128
P.O. Box 1500, Rivonia, 2128
Tel: 011 475 5000 | Fax: 011 479 5100
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Conditions relating to Continuing Professional Development and Renewal of Registration

In terms of section 36 of the Architectural Profession Act, 2000 (Act No. 44 of 2000) ("the Act"), the South African Council for the Architectural Profession hereby makes known that it has, in compliance with section 13(k) of the Act and after consultation with the recognised voluntary associations and registered persons, determined the conditions relating to, and the nature and extent of, continuing education and training as set out hereunder.

These conditions relating to the nature and extent of continuing education and training shall come into operation on the date of publication of the final Board Notice in the Government Gazette.

1. Definitions

In this Board Notice, if reference is made to the male gender, it includes the female gender; a word or expression to which a meaning has been assigned by the Act has the same meaning unless the context otherwise indicates.

"Architectural Learning Sites (ALS)" means an educational institution that offers architectural programs and that has been granted accreditation by **the Council** in terms of Section 13(b) of **the Act;**
"Approved CPD provider" means an entity that has been accredited by **the Council** to offer appropriate learning in respect of category 1 **CPD** activities as contemplated in clause 4.2.1 and Appendix A;
"Continuing professional development (CPD)" means continuing education and training as contemplated in Section 13(k) of **the Act**, and also means the systematic maintenance, improvement, and broadening of knowledge and skills and the development of personal qualities necessary for the execution of professional and technical duties throughout a person's architectural career;
"Expiry date" as contemplated in Section 22(1) of **the Act**, means the 31st of December of every year;
"interactive" means, in the context of development activities, full active participation in the activities such as organization, presentation, and active discussion.
"Registered Professional" means a person who is registered in terms of section 19(2)(a) of the Act;
"The Act" means the Architectural Profession Act 44 of 2000.
"The Council" means the Council established in terms of Section 2 of **the Act,** and the context of these conditions means any committee, person, or persons duly authorized by **the Council** to perform specified functions in terms of these conditions;
"Voluntary Association" (VA) means an association, institute, or society which is recognised by **the Council** as a **voluntary association** in terms of Section 25(3) of **the Act**.
"The CPD cycle" means a period of up to five years from the date of professional registration.

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2. **Registered Persons required to undertake CPD**

All registered persons who are registered in a professional registration category listed under Section 18(1)(a) and (c) of **the Act** must undertake continuing education and training.

3. **CPD requirements for Registered Professionals who are practicing abroad**

a) Where a system of **CPD** is being applied in any particular country, such requirements may be accepted by **the Council**, provided that documentary proof of compliance with such **CPD** requirements is submitted. This may be in the form of a certification by the relevant accrediting authority in the country concerned.

b) The points earned as set out above will be converted to be in line with the allocation of points applicable in South Africa (i.e., 10 hours = One Point in Category 1).

c) If no **CPD** is undertaken by the **Registered Professional** practicing abroad in terms of the above, such registered professional must, upon return to South Africa, apply for the necessary extension of time for compliance, to provide him sufficient time to obtain and claim the required CPD points for the renewal of registration.

d) Any **Registered Professional** practicing abroad may register for CPD courses in South Africa via e-learning.

e) **Registered Professionals** practicing abroad have the option to cancel their registration and re-register upon their return to South Africa.

4. **Exemption from CPD requirements**

a) Any person whose registration was cancelled, and who no longer carries out any architectural work either in a consulting capacity, lecturing at an educational institution, or in a salaried position, is exempted from these conditions.

b) If any Registered **Professional** referred to in clause (a) above elects to return to active architectural practice, such a person must apply to **the Council** for re-registration to the active register and will have to start attending CPD activities whilst practicing.

c) **The CPD Committee** may, upon receipt of a fully motivated and substantiated application from any **Registered Professional**, recommend to Council to grant full or partial exemption from the requirements of these conditions for such period as **the Council** may deem appropriate and reasonable.

d) Each application for full or partial exemption shall be considered on its own merits.

e) The fully motivated and substantiated application as per clause (c) above may include: Registered Professionals who are unemployed, on long-term sick leave/terminally ill, or may currently be non-practising for other compassionate reasons, and/or family responsibility leave.

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f) Any person who is registered as an apprentice or in a candidate category contemplated in Section 18 (1) (b) is exempted from these conditions.

5. General CPD requirements

a) During each five-year cycle, every **Registered Professional** must obtain a minimum of 25 CPD points to qualify for renewal of their registration in terms of section 22 (1) of the Act.

b) A minimum of (5) five of the total number of points required must be obtained and claimed in Category 1 – Developmental Activities.

c) In addition to the requirements set out above, a **Registered Professional** must obtain at least three points per annum, of which at least one point must be obtained in Category 1.

6. Recording of CPD Activities

a) Unless exempted in terms of the conditions as described in Paragraph 4 above, all **Registered Professionals** must record their **CPD** activities electronically, on their **private**, password-protected online profile that can be accessed from SACAP's website.

b) **Registered Professionals** must claim CPD points continuously as they occur during each year.

c) Certificates of attendance of Category 1 activities must indicate the actual SACAP competence or specific products a registered professional was trained on, and must be uploaded with the claim for the points on the online portal.

d) A certificate of attendance that does not indicate the SACAP competence or products a registered professional was trained on will not be accepted for purposes of continuing professional development and training.

e) Proof of any points obtained, such as a certificate of attendance of Category 1 activities, must be uploaded online to enable SACAP to evaluate the points and approve or refer back for remediation.

f) **Registered Professionals** who are at the end of their renewal cycle must claim all CPD points for the period before the end of December of the fifth year (i.e., if the date for renewal is 2017, claims must be submitted by 31 December 2016).

g) All documentary evidence of **CPD** points claimed must be retained for five years for auditing purposes.

7. Auditing of CPD records activities

a) **The Council** may conduct random audits as it deems necessary and practicable of the **CPD** records of any registered professional who is required to undertake **CPD** in terms of these rules.

b) **The Council** must advise the **Registered Professional** within 30 days after completion of an audit of the outcome of such audit.

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c) If, during such an audit, the **Registered Professional** is assessed as not having met the requirements, his **CPD** record and verification documentation must be referred to the CPD Committee or the delegated Committee of the **Council** for a decision regarding remedial steps to be taken by the **Registered Professional**. Such persons will automatically be earmarked for a re-audit during the next year.

8. Renewal of registration and Assessment against the requirements

a) **The Council** shall notify the **Registered Professional** during the third term (July – September of the fifth year of the cycle) regarding the renewal of their registration.

b) Electronic renewal notices shall be sent by SACAP to all **Registered Professionals**, confirming the requirements for the renewal of registration.

c) **The Council** may call for such documentary evidence from the **Registered Professional** as it may deem necessary to approve the points claimed.

d) If **the Council** is satisfied that the **Registered Professional** has met the requirements of these conditions, **the Council** must indicate such decision in the applicable register maintained by **the Council** and, within 30 days of making the decision, inform the **Registered Professional** of such decision and of the fact that his registration will, subject to these rules, be valid for the next five-year CPD cycle.

e) If the **Registered Professional** has failed to comply with the requirements of these rules, the relevant provisions about non-compliance contained in paragraph 9 below will apply. Such a **Registered Professional** must be informed of the decision as well as of the implications within 30 days from the date on which the decision was made.

f) In addition to the notification to be sent to all **Registered Professionals** due for renewal of registration, a notification shall be sent to all **Registered Professionals** at the end of the fourth year of the CPD cycle, reminding them that they will be required to renew their registration at the end of the next year.

g) A reminder shall be sent to all Registered Professionals, on an annual basis, advising them to claim the required CPD points.

9. Non-compliance with these Conditions at the Renewal stage

a) If the **Registered Professional** has failed to comply with the requirements of these rules, **the Council** must, within 30 days, inform the non-compliant **Registered Professional** of this fact.

b) Such **Registered Professional** must apply for an Extension of the period of compliance. Such an extension will afford the **Registered Professional** until the end of the calendar year to ensure that they meet the requirements for renewal of registration.

c) An application for extension as contemplated in these rules shall not be considered without the necessary application and proof of payment of the administration fee having been submitted.

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d) The **Registered Professional** will be required to obtain and claim the necessary points for the renewal of registration, as well as the minimum number of points required per annum, during the year that the extension is granted.

10. Failure to comply with these conditions

a) Any Registered Professional who fails to undertake CPD activities or to comply with these rules shall be charged with improper conduct for failure to comply with Rule 2.4, and the provisions of Sections 27(3), 28, 29, 30, 31, 32, and 33 of the Act apply *mutatis mutandis* in respect of such person.

b) A Registered Professional found guilty of failure to comply with Rule 2.4 by a duly constituted Disciplinary Tribunal shall be fined in terms of Section 32 (3) (ii) of the Act.

c) The fine is calculated in terms of the Adjustment of Fines Act, 1991 (Act No. 101 of 1991) by the ratio of one year's imprisonment. The ratio for one-year imprisonment is (twenty thousand) R20,000. The ratio is based on section 92 of the Magistrate Court Act, 1944 (Act 32 of 1994), read with Government Notice R1411 (GG 19435) of October 1998.

11. Right to appeal

The provisions of Section 24(1) and 24 (3) of the Act apply *mutatis mutandis* in respect of a person who is aggrieved by a decision of **the Council** to refuse the renewal of the person's registration.

12. Deregistration

a) If the **Registered Professional's** registration is cancelled due to non-payment of his annual fee in terms of Section 20(1)(a)(iii), the **Registered Professional** must apply for re-registration and may not practice his profession until he has been re-registered.

b) Such **Registered Professional** must accrue and claim at least two penalty CPD points from Category 1, within 12 months of reregistration. These points are required in addition to the points normally required per annum. This implies that a **Registered Professional** who re-registers, after his/her registration has been cancelled due to non-payment, will be required to claim a total of 27 CPD points during the particular CPD cycle. A total of seven of these points must be claimed in Category 1.

c) If the Registered **Professional** failed to obtain two penalty CPD points from Category 1, within 12 months of reregistration, such **Registered Professional** must apply for the necessary extensions and obtain the required CPD points within the extension period.

d) In addition to the original registration date, a current registration date, being the date of reregistration, will be noted on the **Registered Professional's** online profile. The 5 (five) year CPD cycle will be determined by the current registration date.

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13. Approval of Providers of CPD Activities

a) **Voluntary Associations** and **Accredited Architectural Learning Sites** are approved to offer Category 1 CPD activities.

b) **Voluntary Associations** are approved to validate and monitor Category 1 CPD activities offered by providers who have not been approved in terms of these rules. This includes allocating appropriate points to such activities.

c) **Voluntary Associations** may charge an appropriate fee to recover costs reasonably incurred for validating such activity.

d) Whenever a Voluntary Association validates Category 1 CPD, it must ensure accessibility of the activity to registered professionals (Location), the costs, and the relevance of the activity.

e) It is mandatory that Voluntary Associations indicate the relevant SACAP Professional Competency and/or product or specific development on the CPD Certificates for the Category 1 CPD events.

f) SACAP shall no longer accept Category 1 CPD points if the provided CPD certificate does not indicate the SACAP Professional Competencies or the specific products and/or specific training provided for the purposes of continuing professional development.

g) The Council has the right to review any CPD Category 1 activities validated by Voluntary Associations and ensure that such CPD activities are relevant and contribute to the development and maintenance of professional competencies.

h) The Council shall not be prohibited from offering CPD activities to Registered Professionals.

14. Approval of CPD Activities

a) Subject to the definition of **CPD** as set out in this document, a **voluntary association** should, in approving a Category 1 **CPD** activity, take into consideration the following:

i. The activity should serve to maintain or enhance the knowledge, skills, and competence of all those who participate in it;

ii. The activity should meet an educational and developmental need and provide an effective learning experience for the participants.

iii. The depth and breadth of the subject matter covered must be appropriate;

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iv. The subject covered should provide a balanced view and should not be unduly promotional.

v. Courses may be assessed by obtaining feedback from participants.

vi. CPD providers must have a testing mechanism to assess whether the activity contributed to the competence and skills of a Registered Professional and the extent to which the activity has met the educational and developmental needs of the Registered Professional.

vii. All Category 1 CPD Activities shall be validated in alignment with the following Professional Competencies, amongst others:

- **Architectural Design**
- **Environmental relationships**
- **Construction Technology**
- **The structure of buildings**
- **Contextual and urban relationships**
- **Architectural history, theory, and precedent**
- **Building services and related technologies**
- **Contract documentation and administration**
- **Computer applications**
- **Office practice, legal aspects, and ethics**

b) Any provider who desires validation of a Category 1 **CPD** activity must apply to a recognised **voluntary association** for approval of such activity.

c) Prior to the approval or validation of a CPD activity, the recognised voluntary association or accredited educational institution shall verify and keep records confirming that the trainer or facilitator possesses the requisite experience, knowledge, and/or qualifications relevant to the subject matter of the CPD activity.

d) Any registered professional who intends to undertake a **CPD** activity offered by a provider other than a recognised **voluntary association** or **accredited educational institution** should ascertain whether such activity is approved in terms of these rules.

e) An approved **CPD** activity is valid for such period as specified by **the Council** from time to time.

15. Annexures

a) **Annexure A** table reflects a summary of the calculation of the CPD points and the required points per annum, as well as over the five-year cycle.
b) **Annexure 'B' reflects** further information on the categories of activities and the requirements can be found in**.**

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ANNEXURE A

This table reflects a summary of the calculation of the CPD points and the required points per annum, as well as over the five-year cycle.

Further information on the categories of activities and the requirements can be found in **Annexure 'B'.**

CATEGORY 1 DEVELOPMENTAL ACTIVITIES		
ACTIVITY	**POINTS REQUIRED PER ANNUM**	**POINTS TO BE CLAIMED PER 5-YEAR CYCLE**
Attendance of structured educational/developmental meetings (conferences, seminars, workshops, lectures, etc.) • Presented or validated by SACAP-Recognised Voluntary Associations; **or** • Presented by accredited SACAP Architectural Learning Sites	Compulsory 1 Point	Compulsory 5 Points
Mentoring architectural students in the studio at any of the accredited SACAP Architectural Learning Sites (ALS) voluntarily for at least 4 hours per week over a year, for **a maximum of 3 points per year**		
Serve on Council, its Committees, JBCC, PROCSA, and/or recognized Voluntary Association Committees (e.g., the Practice Committee)	0.5 point (not compulsory)	2.5 CPD points
Serving as an adjudicator for architecture awards recognised by Voluntary Associations and/or built environment organisations.	0.5 point (Not compulsory)	2.5 CPD points

CATEGORY 2 WORK-BASED ACTIVITIES			
ACTIVITY	**CALCULATION OF POINTS**	**MAXIMUM TO BE CLAIMED**	
		Per Annum	**Per 5-year Cycle**
a. Architectural work: • Project work; or • Lecturing at an accredited SACAP Architectural Learning Site (ALS)	400 hours = 1 point	2 Points	10 Points

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b.	In-house training or mentoring of: • Apprentices (registered as such with SACAP) • Candidates (registered as such with SACAP) • Architectural students, as required by validated architectural programmes	50 hours = 1 point	1 Point	5 Points

CATEGORY 3 INDIVIDUAL ACTIVITIES				
ACTIVITY		CALCULATION OF POINTS	MAXIMUM TO BE CLAIMED	
			Per Annum	Per 5-year Cycle
a	Membership of one or more SACAP-Recognised Voluntary Associations	1 Full financial year membership = 1 point	1 Point	5 Points
b.	Individual activities	As per the table in Annexure 'B'	3 Points	15 Points

Categories of CPD activities

1. Category 1: developmental activities

a) Points for this category can be claimed for the Attendance of structured educational/ developmental activities provided; such activities are validated by a recognised Voluntary Association or Accredited Learning Sites.

- *Workshops*
- *Conferences*
- *Congresses*
- *Lectures*
- *Seminars*
- *Refresher Courses*
- *E-learning*
- *Awards adjudication*

b) Attendance of any programmes by the accredited Schools of Architecture at the accredited Architectural Learning Sites (ALSs).

c) Mentoring architectural students at any of the ALSs will be acknowledged for a maximum of 3 points per annum.

d) The mentor will be required to spend at least four hours per week assisting and mentoring the students at the university.

e) The university has to complete a report on the mentoring that was done. This report will serve as confirmation of the CPD points claimed.

f) All mentors must be listed as such with SACAP.

g) Registered professionals who are appointed to participate in the adjudication of awards by recognised voluntary associations and/or other built environment entities or organisations shall be eligible to claim CPD points, provided that the appointment and participation are verifiable and properly documented.

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2. Calculation of points

a) Save for the mentoring of architectural students, as set out above, 1 Point will be allocated for attendance of a 10-hour activity, depending on whether participation is **interactive** or **non-interactive**.

b) A full-day activity will be regarded as being for 10 hours, and a half-day activity will be considered as five hours and hence half a point.

c) The points to be claimed for attendance of Category 1 CPD activities will normally be determined by the VA or ALS accrediting the activity and will be indicated as such.

3. Number of points to be claimed

a) It is compulsory to claim at least one Point from Category 1 annually.

b) This implies that a **minimum of five Points** is required from this category at the end of the five-year cycle to renew the registered person's registration.

c) It further implies that five points may be accrued and claimed in Category 1 within a calendar year and may therefore be claimed for the full five-year CPD cycle.

Category 1	Activities	Calculation of Points	Per Annum		Over 5-Year Cycle	
			Minimum	Maximum	Minimum	Maximum
Developmental Activities	Interactive: • Workshops • Conferences • Congresses	10 hours = 1 point	1 Point Compulsory	No Maximum	5 Points Compulsory	No Maximum
	Non-interactive: • Workshops • Conferences • Congresses • Lectures • Seminars • Refresher Courses					
	• Architecture Awards Adjudication • Serving on Council, SACAP/VA Committee activities	0.5	0.5	0.5	0.5	2.5
	Mentoring of students at ALS	At least four hours per week, over 32 weeks		3 Points		

1. Category 2: Work-based activities (Architectural work)

a) Registered persons also improve their knowledge and competence by performing their day-to-day architectural responsibilities. Points can be claimed in this category for architectural-related work (including management) and Full-time lecturing at an accredited ALS.

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2. **Calculation of points**

a) One point for 400 hours per year for architectural-related work and lecturing.

3. **Number of points to be claimed**

a) A maximum of two points (for 800 hours) may be claimed in respect of this activity per annum, and thus 10 points over the five-year cycle.

1. **Mentoring**

a) The points can be claimed for the mentoring of Apprentices and Candidates registered with SACAP; and/or
b) Architectural students as required as part of their validated programme.
c) In-house training sessions organised by an employer/architectural company and career guidance for apprentices and candidates may also be presented under this category.

2. **Calculation of points**

One point can be claimed for 50 hours of mentoring.

3. **Number of points that can be claimed**

A maximum of one CPD point can be claimed in this category per annum. This implies that no more than five points can be claimed for this activity over the five-year cycle.

Category 2	Activities	Calculation of Points	Per Annum		Over 5-Year Cycle	
			Minimum	Maximum	Minimum	Maximum
Work-based Activities	A. Architectural work or Full-time Lecturing	400 Hours = 1 Point	Not compulsory	2 Points	Not compulsory	10 Points
	B. Training or mentoring of Registered Apprentices, Candidates, and/or Full-time students	50 Hours = 1 Point		1 Point		5 Points

1. **Category 3: individual activities**

a) Active membership of one or more voluntary associations recognised by SACAP. A point can be claimed in this category for being a member of a SACAP-recognised voluntary association.

2. **Calculation of points**

a) One point can be claimed for active membership of a full financial year of one of the SACAP-recognised voluntary associations.

3. **Number of points to be claimed**

a) A maximum of one point can be claimed in this category per annum.

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1. **Individual activities**
   a) Except for post-graduate studies, points can be claimed under the individual categories listed in the table below.

2. **Calculation of points**
   a) One point can be claimed for every 10 hours of participation in the listed activities.

3. **Number of points to be claimed**
   a) The maximum number of points that can be claimed for these activities per annum, and during the five-year cycle, is indicated in the table below.

Category 3	Activities	Calculation of Points	Per Annum		Over 5-Year Cycle	
			Minimum	Maximum	Minimum	Maximum
Individual Activities	A. Membership of 1 or more SACAP-recognised VA	1 Point for membership of a full financial year	Not Compulsory	1 Points	Not Compulsory	5 Points
	B. Points can also be claimed for the following individual activities.					
	- Relevant postgraduate degree	3 points per year	Not Compulsory	3 Points	Not Compulsory	15 Points
	- Other relevant postgraduate qualifications	2 points per year of study				
	- Evaluation of Master's or Doctorate theses as an external examiner	2 points per year				
	- Supervision of students undertaking post-graduate studies	2 points per year				
	- Oral examinations of the final year and postgraduate studies	1 point for every 10 hours of active involvement				
	- Validation of educational programs for accreditation purposes	1 point for every 10 hours of active involvement				
	- Publication of refereed articles: • Single author • Two authors	• 2 points per article • 1 point per article				
	- Publication of professional or technical articles	1 point per article				
	- Papers presented at conferences or congresses	1 point each				
	- Presenter at workshops, seminars, refresher courses, etc.	2 points for 10 hours				
	- Part-time lecturing to undergraduate and postgraduate students	1 point for every 10 hours				
	- Participation in statutory professional, institutional, technical, or nontechnical committees	1 point for every 10 hours of active involvement				

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	- Self-study, which includes but is not restricted to studying journals or electronic or computerised material. Activities under this item must be verified. - Relevant community activities - Specialist activities such as arbitrator, mediator, forensic architecture, environmental impact assessment, etc.					

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