

Government Gazette
Staatskoerant

REPUBLIC OF SOUTH AFRICA
REPUBLIEK VAN SUID AFRIKA

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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* 2026

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

- **23 December,** Tuesday for the issue of Friday **02 January 2026**
- **02 January,** Friday for the issue of Friday **09 January 2026**
- **09 January,** Friday for the issue of Friday **16 January 2026**
- **16 January,** Friday for the issue of Friday **23 January 2026**
- **23 January,** Friday for the issue of Friday **30 January 2026**
- **30 January,** Friday for the issue of Friday **06 February 2026**
- **06 February,** Friday for the issue of Friday **13 February 2026**
- **13 February,** Friday for the issue of Friday **20 February 2026**
- **20 February,** Friday for the issue of Friday **27 February 2026**
- **27 February,** Friday for the issue of Friday **06 March 2026**
- **06 March,** Friday for the issue of Friday **13 March 2026**
- **13 March,** Friday for the issue of Thursday **20 March 2026**
- **20 March,** Friday for the issue of Friday **27 March 2026**
- **26 March,** Thursday for the issue of Thursday **02 April 2026**
- **01 April,** Wednesday for the issue of Friday **10 April 2026**
- **10 April,** Friday for the issue of Friday **17 April 2026**
- **17 April,** Friday for the issue of Friday **24 April 2026**
- **22 April,** Wednesday for the issue of Thursday **30 April 2026**
- **30 April,** Thursday for the issue of Friday **08 May 2026**
- **08 May,** Friday for the issue of Friday **15 May 2026**
- **15 May,** Friday for the issue of Friday **22 May 2026**
- **22 May,** Friday for the issue of Friday **29 May 2026**
- **29 May,** Friday for the issue of Friday **05 June 2026**
- **05 June,** Friday for the issue of Friday **12 June 2026**
- **11 June,** Thursday for the issue of Friday **19 June 2026**
- **19 June,** Friday for the issue of Friday **26 June 2026**
- **26 June,** Friday for the issue of Friday **03 July 2026**
- **03 July,** Friday for the issue of Friday **10 July 2026**
- **10 July,** Friday for the issue of Friday **17 July 2026**
- **17 July,** Friday for the issue of Friday **24 July 2026**
- **24 July,** Friday for the issue of Friday **31 July 2026**
- **31 July,** Friday for the issue of Friday **07 August 2026**
- **06 August,** Thursday for the issue of Friday **14 August 2026**
- **14 August,** Friday for the issue of Friday **21 August 2026**
- **21 August,** Friday for the issue of Friday **28 August 2026**
- **28 August,** Friday for the issue of Friday **04 September 2026**
- **04 September,** Friday for the issue of Friday **11 September 206**
- **11 September,** Friday for the issue of Friday **18 September 2026**
- **17 September,** Thursday for the issue of Friday **25 September 2026**
- **25 September,** Friday for the issue of Friday **02 October 2026**
- **02 October,** Friday for the issue of Friday **09 October 2026**
- **09 October,** Friday for the issue of Friday **16 October 2026**
- **16 October,** Friday for the issue of Friday **23 October 2026**
- **23 October,** Friday for the issue of Friday **30 October 2026**
- **30 October,** Friday for the issue of Friday **06 November 2026**
- **06 November,** Friday for the issue of Friday **13 November 2026**
- **13 November,** Friday for the issue of Friday **20 November 2026**
- **20 November,** Friday for the issue of Friday **27 November 2026**
- **27 November,** Friday for the issue of Friday **04 December 2026**
- **04 December,** Friday for the issue of Friday **11 December 2026**
- **10 December,** Thursday for the issue of Friday **18 December 2026**
- **17 December,** Thursday for the issue of Thursday **24 December 2026**
- **23 December,** Wednesday for the issue of Thursday **31 December 2026**

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.

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GOVERNMENT NOTICES • GOEWERMENTSKENNISGEWINGS

DEPARTMENT OF FORESTRY, FISHERIES AND THE ENVIRONMENT

NO. 7778 **7 August 2026**

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

CONSULTATION ON THE INTENTION TO DECLARE CERTAIN PROPERTIES SITUATED IN THE WESTERN AND NORTHERN CAPE PROVINCE TO BE PART OF THE EXISTING TANKWA KAROO NATIONAL PARK IN TERMS OF THE NATIONAL ENVIRONMENTAL MANAGEMENT: PROTECTED AREAS ACT, 2003 (ACT NO. 57 OF 2003)

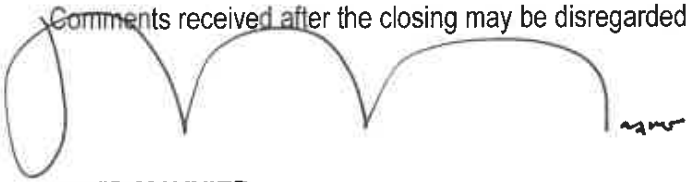
I, David Maynier, Minister of Forestry, Fisheries, and the Environment, hereby under section 20(1)(a)(ii) read with sections 31 and 33 of the National Environmental Management: Protected Areas Act, 2003 (Act No.57 of 2003), give notice of my intention to declare areas situated in the Western and Northern Cape Provinces to be part of the existing Tankwa Karoo National Park, in the schedule hereto.

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

By post to:	The Director-General Department of Environment, Forestry and Fisheries 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.



DAVID MAYNIER
MINISTER OF FORESTRY, FISHERIES AND THE ENVIRONMENT

SCHEDULE

No	Description of Property: farm, portion	Ownership	District	Title Deed No	Extent (ha)
1.	Remaining extent of the Farm Bobbejaanskloof No 159	Maharishi Vedic Organic Agriculture (Pty) Ltd	Clanwilliam	T121095/2004	1851.3406
2	Portion 1 of the Farm Bobbejaanskloof No 159		Clanwilliam	T6963/2005	2724.4997
3	Remaining extent of the Farm Klipskeur No 160		Clanwilliam	T6963/2005	1791.3726
4	Portion 1 of the Farm Klipskeur No 160		Clanwilliam	T121095/2004	1933.192
5	Portion 1 of the Farm Brand Hoek No 162		Clanwilliam	T6963/2005	292.4522
6	Farm Versien Suid No 156		Clanwilliam	T6963/2005	635.109
7	Remaining extent of the Farm Gemsbokkloof No 1078		Calvinia	T121095/2004	8457.1872
8	Farm Zandfontein No 1079		Calvinia	T6963/2005	1579.5307

DEPARTMENT OF HEALTH

NO. 7779 **7 August 2026**

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

I, Nicolas Crisp, Acting 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 Notice No 6740* of 17 October 2025.

The Norms and Standards align with the health sector's strategic goal outlined in the presidential health compact and the National Development Plan, vision 2030, and are intended to strengthen the health system by ensuring the establishment and maintenance of institutional capacities, provision of adequate resources and delivery of high-quality health services to safeguard public health.

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

PROF N. CRISP
ACTING DIRECTOR-GENERAL: HEALTH
DATE: 19/06/2026

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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), 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

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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 ("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 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 15 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

1.3.1 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; and
(f) Functional telephones in the office and field staff that provided with mobile telephones.

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.

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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; and
(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).
(e) An environmental health pollution control plan.
(f) 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.
(g) A community risk communication and education intervention plan, costed and implemented at a district level; and
(h) A climate change and health adaptation implementation plan.

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:

(a) A waste management monitoring plan;
(b) A health-related water quality monitoring plan;
(c) A vector control monitoring plan;
(d) An indoor air quality monitoring plan;
(e) A food safety monitoring plan;
(f) A communications and coordination plan; and
(g) An integrated public health emergency contingency plan.

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.

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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 staff must be employed to render environmental health services at all levels to ensure a proactive and effective preventative services.

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.

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.

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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 must ensure that staff are provided with:

(a) Name tags to be easily identifiable by name and organisation; and
(b) Official uniform to ensure personnel are easily identifiable by the public (NDOH to provide specifications to ensure standardisation).
(c) Personal Protective clothing must be utilized when conducting inspections.

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; and
(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:

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(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 must be:

(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; and
(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 be trained and capacitated to implement and enforce legislation.
1.11.5 There must be a legal support system or unit 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.

1.12 Cooperative governance

1.12.1 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.

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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 be risk-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 quarter (4)
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)

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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 reports must be issued to the premises owner or person in charge after every inspection, outlining inspection findings, recommendations, areas requiring action and compliance status of premises.
(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.
(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:

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(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 Inspection equipment is utilized when conducting inspections i.e. digital probe thermometer, infrared thermometer, PH meter and portable torch (flashlight).
2.2.5 Food-related public complaints must be investigated within 24 hours of receipt.
2.2.6 Food-borne outbreaks and or community incidences must be investigated within 24 hours, and reports are sent to the province and national office. A record of outbreaks and incidences is kept by the Municipality.
2.2.7 Environmental health practitioners may provide food safety training to informal food handlers as and when needed, and records are kept.
2.2.8 An updated database for all the food premises (certified and uncertified) is kept, by the Municipality, 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 must be 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.
(d) Assessment of premises for vector control must be conducted utilizing the vector control monitoring tool, as provided by the National Office.

2.3.3 Records of chemical applications and quantities.

(a) Records of the name of chemicals utilised, the active ingredients, and their poison category.
(b) Qualifications and skills of pest controllers, all the people applying chemicals.
(c) Records of any other vector/rodent control methods utilised other than chemicals.
(e) Inspection records are kept and maintained.

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).

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(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 stores.

(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.
(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.

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(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.

2.6.1 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 400m from the areas of points of entry operational facilities.
(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.

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(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 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 must be inspected at least twice per year.
(c) The landfill sites referred to in sub-section (b 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 must be established and strengthened on premises with waste management challenges.
(j) Health facilities must be audited twice a year on waste management practices.

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 must be sampled routinely for bacteriological quality at a point-of-entry, with 12 samples per 10 000 population (per year) plus an additional 120 samples.
(b) Domestic water is sampled at least once a year for the full SANS (chemical and microbiological) determinants.
(c) Recreational waters must be sampled at least once every six months.
(d) Bottled and dispensed/refilled water must be sampled at least once a quarter at point of sale.
(e) Water must be sampled monthly at the distribution points.
(f) Water-related disease surveillance must be conducted at monthly.

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2.9.2 Analysis of drinking water samples for compliance auditing must be 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 must be 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.
- (ii) Sealed container or cooler box and ice to keep the samples cooled.
- (iii) A map showing sampling locations or GPS coordinates must be included when gathering sampling equipment.
- (iv) A gas burner.
- (v) Field notebook/data sheet(s).
- (vi) 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).
- (ii) Electrical conductivity meter.
- (iii) PH field instrument.
- (iv) Nephelometric turbidity meter (if required) or Secchi disk.
- (v) Temperature meter: electronic or field thermometer (if required).
- (vi) Distilled water for cleaning the probes.
- (vii) Field notebook/data sheet(s).
- (viii) Instrument for free available chlorine measurements.
- (ix) A map showing sampling locations and GPS coordinates must be included when gathering sampling equipment.

(c) For chemical sampling:

- (i) Correct, clean sample bottles.
- (ii) Cooler box with ice packs.
- (iii) A map showing sampling locations or GPS coordinates must be included when gathering sampling equipment.
- (iv) 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.

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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

2.10.1 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 must be conducted at least twice a year.
(c) Inspection checklists should be 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 must be 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 must be checked, verified, and signed off during every inspection.
(g) A database of hazardous substances dealers and premises (both registered and unregistered) must be kept and maintained for monitoring and control purposes.
(h) Group 1 hazardous substances consignments must be inspected by authorised environmental health practitioners at a point of entry and released only to Group 1 licenced premises.
(i) Health and safety education must be an integral to all environmental health compliance monitoring inspections.
(j) Multidisciplinary monitoring of problematic hazardous and chemical substance dealers should be 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.
(k) A monitoring system must be 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

2.11.1 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.

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(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.
(ii) Labelling stickers.
(iii) Sample storage containers are used to ensure appropriate sample temperatures per the manufacturer's instructions.

(f) A monitoring system must be 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 must be 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 must be 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 must be 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.

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.

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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.
(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.

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SECTION 3:
APPLICABLE GENERAL PROVISIONS

Assessment of performance

3.1 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 report to the accounting officers.

3.2 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

Premises listed in *Annexure 1* must operate under a valid Health Certificate issued by an Environmental Health Practitioner, certifying that the premises comply with environmental health standards.

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 must be enclosed and access-controlled for the safety of children on the premises.
(b) Where children in wheelchairs are cared for, the premises must have a ramp and rails to enable access.
(c) Spaces used for indoor and outdoor activities must be constructed to provide maximum protection against permeation by wind, sunlight, rain, or other adverse environmental conditions.
(d) The indoor play area:

(i) Provides at least 1.5 m² unobstructed floor space for each child in adequately ventilated rooms.
(ii) Provides for at least 1 m² unobstructed floor space in low-cost settings in adequately ventilated rooms. Overcrowding of children shall not be permitted under any circumstances.
(iii) Is adequately illuminated.
(iv) Floors and interior walls have a smooth surface that is easily cleanable and prevents the permeation of dampness.
(v) The roof is dust proof.
(vi) 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 must be safe and free from hazards, and the play equipment should be 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.

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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.

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

(a) At least 1 (one) toilet must be provided for every 20-30 children, not exceeding 30 children, and a constant supply of toilet paper must be provided.
(b) Where ventilated pit toilets are utilised, they must be positioned at least between 20m-30 m (depending on the size of the yard) from any habitable facility in the premises and must be constructed to provide safety for children.
(c) Potties must be provided for use only by children between 0-2 years, and at least one potty must be provided for every five children.
(d) Excreta from potties must be 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 must be 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 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 must be 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.

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

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

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 must be 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 must be 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 at all 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 FOR CHILDREN'S HOMES

2.1 Enclosure of the premises

Premises are of location, design, and constructed to ensure that children cared for

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hygienically and safely and protected from any physical, chemical or biological hazards in the environment.

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 one toilet must be provided for every 20-30 children, not exceeding 30 children, and a constant supply of toilet paper must be 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 one potty must be provided for every 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 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

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

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 must be provided for sleeping purposes and adequately spaced to enable free movement by caregivers to monitor the children.
(b) Children must be 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 must be 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 must be available for the disposal of waste, and equipment is kept clean.

2.6 Safe and hygienic preparation of food

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
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 must be 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 should be constructed of concrete, hardwood or other durable materials and brought to a smooth finish.
(c) Ceilings must be 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 must be adequately and individually ventilated; the design must allow for cross-ventilation.
(e) The rooms must be adequately illuminated.

3.1.3 Suitable accommodation must be 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) Always kept clean and hygienic, free from offensive odours or smells.
(b) The dining, lounge and porch 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 always maintained in good working order 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 always be provided for use by service users, staff and visitors.

3.3 Facilities for the provision of healthcare services on the premises

Where healthcare services must be 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.

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.

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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

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 4
STANDARDS 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.

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4.1.3 Adequate floor space must be provided for each child to prevent overcrowding and to prevent the easy spread of communicable diseases among learners.
4.1.4 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.
4.1.5 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 must be 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 must be 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 must be located in close proximity to toilet facilities and equipped with soap and running water.
4.2.6 Separate toilets and wash-up facilities must be 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.

4.3 non-waterborne sanitation technologies

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.

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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 must be provided and easily accessible from the sleeping accommodation.

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

4.5.5 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 must be 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.

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.

4.6.6 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 disposal of 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

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

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(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

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.

SECTION 5
STANDARDS FOR ACCOMMODATION ESTABLISHMENTS

5.1 Protection against hazards

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

5.2 Water, sanitation and hygiene

5.2.1 Water supply, toilet and wash-up facilities must be available to meet guests' needs.
5.2.2 An adequate hot and cold potable running water supply must be provided for all uses.
5.2.3 Baths and or showers must be provided and suitably placed in each room, or they are otherwise easily accessible and designated by gender.
5.2.4 Suitable and effective means of drainage and sewage disposal connected to the municipal sewer must be in place.
5.2.5 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.
5.2.6 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 a specific local authority.
5.2.7 Toilet and handwashing facilities must be available for guests to use.
5.2.8 Separate toilet and handwashing facilities should be available for staff and visitors.
5.2. 9 An adequate supply of toilet paper and handwashing soap must be maintained for use by guests, staff and visitors.
5.2.10 All sanitary, ablution and water supply fittings must always be kept clean and in good working order.
5.2.11 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.

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5.3 Swimming pools and hot baths

Where swimming pools/hot baths facilities must be 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.

5.4 General hygiene and safety requirements

5.4.1 The premises and any other facility used in connection with the operation of an accommodation establishment must always be kept in a clean and sanitary condition.
5.4.2 Sleeping beds, pillows, and other sleeping facilities must always be maintained in a clean and sanitary condition and are free from dust mites.
5.4.3 Sheets, towels and pillowcases provided must be laundered before each new guest or at least once weekly for long-term guests.
5.4.4 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.
5.4.5 Separate storage facilities must be provided for clean and soiled laundry storage.
5.4.6 The premises and all equipment used in connection with the operation of the facility must always be maintained in a clean and sanitary condition.
5.4.7 Measures must be in place to prevent and control the breeding of rodents or pests on the premises.
5.4.8 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.
5.4.9 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.
5.4.10 Fire protection equipment, approved by the relevant authority of the local authority concerned, must be in place and complies with the relevant by-laws.
5.4.11 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.

5.5 Food safety standards

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.

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SECTION 6
STANDARDS FOR BEAUTY PARLOURS

6.1 Structural and physical facilities

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

6.1.2 The premises must be adequately ventilated and illuminated.

6.1.3 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.

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

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

6.1.6 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.

6.1.7 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.

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

6.1.9 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.

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

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

6.2 Waste management

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

6.2.2 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.

6.2.3 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.

6.2.4 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.

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(g) Disposable gloves.

6.2.5 Containers used for the storage of waste must be equipped with close-fitting lids.
6.2.6 Employees must be trained in the handling of infectious waste.
6.2.7 Sharps must not be disposed of with general waste, and measures shall be taken to ensure that a registered service provider removes the sharps from the premises.

6.3 Use of ultra-violet radiation for tanning

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:
(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 three years before discarding.

6.4 Use of dyes, pigments, stencils and tattoo procedures

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

6.4.2 The following minimum standards must be maintained:

(a) The area of the body is to be tattooed, and all visible parts of the body must be 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.

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(b) A tattoo artist wears water-proof and clean aprons at all times during tattooing. If the apron is contaminated with blood, the apron must be 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 must be sterilised accordingly, utilising approved sterilisation methods.
(e) Good sanitary and hygiene practices must always be applied.

6.5 General hygiene requirements

6.5.1 Measures must be taken to ensure that general hygiene is maintained on the premises.
6.5.2 An approved system for wastewater disposal must be in place on the premises.
6.5.3 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.
6.5.4 The salon premises must not be used for food preparation or for sleeping unless a separate food preparation area is provided for such different purposes.
6.5.5 The premises and all equipment used in connection must be maintained in good, clean and sanitary condition at all times.
6.5.6 Employees on the premises must be equipped with adequate protective clothing, water-proof aprons, gloves and masks are utilised where necessary.
6.5.7 Animals are not permitted on the premises unless in the case of a guide dog.
6.5.8 Instruments used in the salon must be kept clean and disinfected after each use.
6.5.9 All instruments that come into contact with blood must be sterilised after each use.
6.5.10 Plastic, cloth towels, aprons and caps must be washed daily and after each use.
6.5.11 Disposable gloves and wipes must be disposed of after each use.
6.5.12 Adequate numbers of towels must be provided for various uses associated with the running of the business and must be kept clean.
6.5.13 Laundry facilities for washing all linen and towels must be provided on the premises.
6.5.14 If beverages are provided on the premises, a separate area must be provided, equipped with a facility for cleaning crockery and utensils.

SECTION 7
STANDARDS FOR PUBLIC SWIMMING POOLS AND SPA BATHS

7.1 Structural and physical facilities

7.1.1 All structural and physical facilities of a public swimming pool must be designed to ensure the health and safety of users.
7.1.2 The surface of the floor area surrounding the spa bath or swimming pool must be constructed of an approved, impervious, non-slip material.
7.1.3 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.
7.1.4 Toilet facilities must be accessible to disabled persons.
7.1.5 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.
7.1.6 At least one shower must be provided for every 20 swimmers on the premises.

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7.1.7 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.
7.1.8 Toilet and shower facilities must be properly ventilated in accordance with the National Building Regulations to prevent the existence of odour nuisances.
7.1.9 Toilet and shower facilities must be kept clean and sanitary at all times.
7.1.10 The floors of toilets and shower rooms must be constructed of a non-slippery finish, which is impervious to moisture and easily cleanable.
7.1.11 Readily accessible change rooms must be provided for the convenience of users and must be separated for each gender.
7.1.12 Water used to fill swimming pools or to keep the level of the pool or spa baths must be from a treated water source.

7.2 Water quality

7.2.1 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.
7.2.2 The spa bath or swimming pool must be frequently monitored for turbidity, residual disinfectant and pH values.
7.2.3 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.
7.2.4 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, must be maintained.
(b) A high disinfectant concentration must be maintained in hot tubs, and free chlorine should always be at least 1 mg/1 litre.

7.2.5 Measures must be taken to ensure that chlorate levels do not build up in stored hypochlorite disinfectants, therefore, exposure levels must be minimised with frequent dilution of pool water with fresh water.
7.2.6 The total viable bacteriological count of any sample submitted for analysis must not exceed 100 organisms per ml of water.
7.2.7 Heterotrophic plate count of *E. coli*, thermotolerant coliforms, *Pseudomonas aeruginosa* and *Legionella* spp must be monitored on a three-monthly basis.
7.2.8 *Escherichia coli* type 1 bacteria may not be detected in any 100 ml of spa bath or swimming pool water.
7.2.9 Surfaces must be physically cleaned to control the growth of *Legionella* in hot tubs and natural spas.

7.3 Duties of public swimming pool and hot tub operators

7.3.1 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.
7.3.2 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

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(daily to weekly). Where microbial testing for *Legionella* is undertaken, ensure that *Legionella* levels are <1/100 ml.

7.3.3 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

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

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

7.3.6 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 of five 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.

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

7.3.8 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.

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7.3.9 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.

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

7.3.11 A qualified and proficient life saver/s must be available on the premises and is competent in lifesaving, first aid, and the operation of the swimming pool.

7.4 Food safety standards

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 8
STANDARDS AND REQUIREMENTS FOR HEALTH ESTABLISHMENTS

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, are easily cleanable, and are painted with light-coloured paint.

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

8.1.4 Floor surfaces must 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 water sources to augment the external supply or specific purposes that increase potential risk.

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8.2.4 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.
8.2.5 Water storage facilities, e.g., reservoirs and tanks, must adequately be protected from contamination.
8.2.6 Designated health facility staff shall continuously monitor the water in reservoirs and tanks for fitness for use.
8.2.7 The water in the storage facilities must be tested for compliance and fitness for consumption.
8.2.8 If a borehole is the main water source, it must be effectively protected from contamination by humans, animals and other environmental factors.
8.2.9 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.
8.2.10 Taps and pipes containing water unsuitable for human consumption must be clearly marked.
8.2.11 Water quality records must be kept and made available to an environmental health practitioner.
8.2.12 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.
8.2.13 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 one handwash 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 measures must 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.

8.3 Reception of dead bodies on the premises

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).

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8.4 Food safety standards

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.

8.5 Waste management

8.5.1 The management of healthcare risk waste must be in line with the SANS:10248.
8.5.2 Waste must be correctly segregated at all waste generation points.
8.5.3 Functional waste collection containers for general waste, infectious waste and sharps must be provided in close proximity to all waste generation points.
8.5.4 Effective means must be in place for the proper disposal of healthcare risk waste.
8.5.5 A protocol or standard operating procedure must be in place for the safe management of healthcare waste.
8.5.6 Only licenced waste management contractors must be contracted to render treatment and disposal of healthcare waste in a health establishment.
8.5.7 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.

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8.6 Classification of healthcare risk waste

8.6.1 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.

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

8.6.3 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.

8.7 Packaging of healthcare risk waste (HCRW)

8.7.1 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.

8.7.2 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.

8.7.3 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.

8.7.4 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.

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

8.7.6 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.

8.7.7 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.

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

8.8.1 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.

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(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.
(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.

8.8.2 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.
8.8.3 All healthcare risk waste stored at minor generators must be removed to the final storage area regularly to prevent the occurrence of any nuisances.
8.8.4 Healthcare risk waste storage areas must always be locked and not easily accessible to the public, patients and unauthorised personnel.
8.8.5 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.

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

8.9.1 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.
8.9.2 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.

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8.10 Central storage areas

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

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

8.10.3 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 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.

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

8.10.5 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.

8.10.6 Healthcare risk waste may not be 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.

8.10.7 Refrigerators used for storing healthcare risk waste are marked and used solely for that purpose.

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8.11 Treatment and disposal of healthcare risk waste (HCRW)

All healthcare risk waste must be treated before disposal by a licenced treatment facility and only disposed of at a licenced disposal facility.

8.12 Storage facilities

8.12.1 Separate storage facilities must be 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, containing adequate cupboards or shelves.
(e) Personal belongings of employees if five or more staff members are employed.
(f) Food items.

8.12.2 Storage rooms must contain adequate moveable shelving made of impervious material.
8.12.3 Every shelf in any storeroom must have a minimum height of 225 mm above the floor.
8.12.4 All storerooms and store facilities must always be kept clean and cleaned routinely at least once every week.
8.12.5 Hazardous substances must be stored and disposed of in a safe manner, separate from other non-hazardous materials.
8.12.6 Expired medicines must be stored separately and disposed of in a safe manner.
8.12.7 Adequate storage facilities must be provided for the storage of any spare equipment, including particularly heavy equipment and gas cylinders.
8.12.8 The equipment must be stored in a manner so as not to obstruct any passages, entrances or exits to the premises.
8.12.9 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.

8.13 Laundry services

8.13.1 A health establishment must have access to laundry facilities for the effective laundering of linen.
8.13.2 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.
8.13.3 Internal walls of the laundry must be constructed of a material that enables easy cleaning.
8.13.4 Floors must be constructed of impervious material, are non-slip in wet areas, and are adequately drained.
8.13.5 Ceilings must be constructed of a dust-proof material.
8.13.6 The facility must adequately be ventilated by natural or artificial ventilation and is adequately illuminated.
8.13.7 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.

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8.13.8 Areas receiving soiled linen must physically be separated from areas handling clean linen.
8.13.9 Adequate ablution and toilet facilities must be provided, including an emergency shower or eye-wash facility in the washroom where chemicals are handled.
8.13.10 Suitable and hazard-free storage facilities for the storage of chemicals must be provided.
8.13.11 The capacity and the condition of the equipment used for laundering meet the hospital's laundering needs.
8.13.12 Vehicles, containers, trolleys or other manually operated equipment for transporting linen must be operated to ensure prevention of contamination.
8.13.13 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.
8.13.14 Laundry staff must be provided with appropriate personal protective equipment.
8.13.15 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.

8.14 Operational requirements for linen handling

8.14.1 A policy for the management of linen must be in place.
8.14.2 Adequate resources must be provided to ensure the effective laundering of linen, including for proper maintenance of buildings and equipment.
8.14.3 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.

8.14.4 A procedure specifically for infection/contamination control must be made available to staff handling linen.
8.14.5 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.

8.14.6 Measures must be in place to prevent air pollution, improve occupational and environmental hygiene and manage hazards.
8.14.7 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.
8.14.8 The laundry management or controller and other designated staff must be trained and be competent to:

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(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.

8.14.9 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.

8.15 General hygiene standards

8.15.1 The premises must be maintained to be clean and free from offensive odours, unsightly accumulation of debris, litter, and miscellaneous waste at all times.
8.15.2 Cleaning staff are trained and competent in cleaning techniques and processes to be utilised for various areas in the health facility.
8.15.3 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.
8.15.4 A cleaning schedule must be kept for all maintained areas in the facility.
8.15.5 Appropriate cleaning materials and equipment must be utilised.
8.15.6 All toilet facilities on the premises must be kept clean and in good repair at all times.
8.15.7 All hand wash facilities are consistently supplied with potable running water.
8.15.8 Measures are taken to prevent the spread of infection in the facility.

SECTION 9
STANDARDS AND REQUIREMENTS FOR COMMUNITY RESIDENTIAL MENTAL HEALTH CARE FACILITIES

9.1 Structural facilities

9.1.1 The internal physical structure in clinical wards, kitchens, and bathrooms must be constructed to enable and facilitate easy cleaning.
9.1.2 Internal walls must be constructed of an impervious material brought to a smooth finish, easily cleanable, and painted with light-coloured paint.
9.1.3 Ceilings must be constructed of dust-proof material, smoothly finished, and painted with light-coloured washable paint.
9.1.4 Floor surfaces should be constructed of impervious material, brought to a smooth finish, and properly drained.

9.2 Water, sanitation, and hygiene

9.2.1 An improved water supply piped into the facility must be available.
9.2.2 Adequate and potable water must be available on the premises in sufficient quantities for all uses.
9.2.3 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.

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9.2.4 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.

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

9.2.6 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.

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

9.2.8 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.

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

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

9.2.11 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.

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

(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.

9.3 Food safety standards

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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9.4 Waste management

9.4.1 The management of healthcare risk waste must be in line with the SANS 10248.
9.4.2 Waste must be correctly segregated at all waste generation points.
9.4.3 Functional waste collection containers for general waste, infectious waste and sharps must be provided in close proximity to all waste generation points.
9.4.4 Effective means must be in place for the proper disposal of healthcare risk waste.
9.4.5 A protocol or standard operating procedure must be in place for the safe management of healthcare waste.
9.4.6 Only licenced waste management contractors must be contracted to render treatment and disposal of healthcare waste in a health establishment.
9.4.7 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.

9.5 Classification of healthcare risk waste (HCRW)

9.5.1 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.
9.5.2 Healthcare waste must be segregated correctly at the point of generation, containerised, and the correct liners are used.
9.5.3 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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9.6 Packaging of healthcare risk waste (HCRW)

9.6.1 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.

9.6.2 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.

9.6.3 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.

9.6.4 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.

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

9.6.6 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.

9.6.7 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.

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

9.7.1 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 must designed to avoid spillages.
(b) Waste at all major generators must be 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 should be avoided and minimised.
(d) Access to transportation vehicles must be 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 must always be locked when not in motion.
(h) The equipment used for transportation must be:
    (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.

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(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.

9.7.2 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.

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

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

9.7.5 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.

9.8 Treatment and disposal of healthcare risk waste (HCRW)

All healthcare risk waste must be treated before disposal by a licenced treatment facility and is only disposed of at a licenced disposal facility.

9.9 Storage facilities

9.9.1 Separate storage facilities must be 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.

9.9.2 Storage rooms must contain adequate moveable shelving made of impervious material.

9.9.3 Every shelf in any storeroom must have a minimum height of 225 mm above the floor.

9.9.4 All storerooms and store facilities must always be kept clean and cleaned routinely at least once every week.

9.9.5 Hazardous substances must be stored and disposed of in a safe manner, separate from other non-hazardous materials.

9.9.6 Expired medicines must be stored separately and are disposed of in a safe manner.

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9.9.7 Adequate storage facilities must be provided for the storage of any spare equipment, including particularly heavy equipment and gas cylinders.
9.9.8 The equipment must be stored in a manner that does not obstruct any passages, entrances, or exits to the premises.
9.9.9 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.

9.10 Laundry services

9.10.1 A health establishment must have or have access to laundry facilities for the effective laundering of linen.
9.10.2 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.
9.10.3 Internal walls must be constructed of a material that enables easy cleaning.
9.10.4 Floors must be constructed of impervious material, are non-slip in wet areas, and are adequately drained.
9.10.5 Ceilings must be constructed of a dust-proof material.
9.10.6 The facility must adequately be ventilated by natural or artificial ventilation and is adequately illuminated.
9.10.7 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.
9.10.8 Areas receiving soiled linen must physically be separated from areas handling clean linen.
9.10.9 Adequate ablution and toilet facilities must be provided, including an emergency shower or eye-wash facility where chemicals are handled in the washroom.
9.10.10 Suitable and hazard-free storage facilities for the storage of chemicals must be provided.
9.10.11 The capacity and the condition of the equipment used for laundering must meet the hospital's laundering needs.
9.10.12 Vehicles, containers, trolleys or other manually operated equipment for transporting linen must be operated to ensure prevention of contamination.
9.10.13 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.
9.10.14 Laundry staff must be provided with appropriate personal protective equipment.
9.10.15 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.

9.11 Operational requirements for linen handling

9.11.1 A policy for the management of linen must be in place.
9.11.2 Adequate resources must be provided to ensure the effective laundering of linen, including for proper maintenance of buildings and equipment.
9.11.3 A quality management system must be established incorporating:

(a) Work instructions and procedures.
(b) Process control procedures.

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(c) Quality control procedures.
(d) Control of linen (clean/soiled) procedures.

9.11.4 A procedure specifically for infection or contamination control must be made available to staff handling linen.
9.11.5 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.

9.11.6 Measures must be in place to prevent air pollution, improve occupational and environmental hygiene, and manage hazards.
9.11.7 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.
9.11.8 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.

9.11.9 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.

9.12 General hygiene standards

9.12.1 The premises must be maintained to be clean, free from offensive odours, unsightly accumulation of debris, litter and miscellaneous waste at all times.
9.12.2 Cleaning staff must be trained and competent in cleaning techniques and processes to be utilised for various areas in the health facility.
9.12.3 Cleaning material and detergent are required to ensure that a hygienic environment in the health facility is available and properly stored at all times.
9.12.4 A cleaning schedule maintained to clean all areas in the facility.
9.12.5 Appropriate cleaning materials and equipment must be utilised.
9.12.6 All toilet facilities on the premises must be kept clean and in good repair at all times.
9.12.7 All hand wash facilities must consistently be supplied with potable running water.
9.12.8 Measures must be taken to prevent the spread of infection in the facility.
9.12.9 A pest control programme must be in place and implemented.

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SECTION 10
STANDARDS AND REQUIREMENTS FOR LAUNDRY FACILITIES OR ESTABLISHMENTS

10.1 Structural facilities

10.1.1 Internal walls of the laundry must be easily cleanable.
10.1.2 Floors must be constructed of impervious material, are non-slip in wet areas, and are adequately drained.
10.1.3 Ceilings must be constructed of a dust-proof material.
10.1.4 The facility must adequately be ventilated by natural or artificial ventilation and is adequately illuminated.
10.1.5 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.
10.1.6 Areas receiving soiled linen are physically separated from areas handling clean linen.
10.1.7 Any room or area's minimum height from floor to ceiling is at least 2.4 m.

10.2 Water supply and sanitation facilities

10.2.1 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.
10.2.2 Where five or more persons of the same gender are employed on the premises, toilet facilities must be segregated by gender.
10.2.3 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.
10.2.4 An approved, suitable and effective means of drainage must be in place on the premises and is approved by the local authority.

10.3 Storage, work areas, and facilities

10.3.1 Facilities, work areas and equipment used in connection with the operation of a laundry facility must be provided.
10.3.2 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.
10.3.3 In the case of receiving depots, a separate area with a minimum width of not less than 2m is provided, and 50% (fifty per cent) of that area must be unobstructed.
10.3.4 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.
10.3.5 A separate area with separate designated counters and an impervious surface must be provided for receiving and dispatching articles.
10.3.6 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.

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10.3.7 A storage room with facilities for packaging material and other articles must be provided and equipped with adequate packing shelves for clean linen.
10.3.8 Suitable and separate hazard-free lockable storage for chemicals must be provided.
10.3.9 All packaging shelves should be a height of at least 250 mm above floor level.
10.3.10 A separate room or area with separate designated counters or with an impervious surface must be provided for the receipt and dispatch of articles.
10.3.11 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.
10.3.12 If reusable nappies are laundered on the premises, a separate pre-rinsing area must be provided for rinsing nappies before washing.

10.4 General requirements

10.4.1 Measures must be in place to ensure compliance with the local authority and fire department requirements.
10.4.2 Suitable and hazard-free storage facilities for the storage of chemicals must be provided.
10.4.3 Laundry staff must be provided with appropriate personal protective equipment.
10.4.4 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.
10.4.5 The premises must be well maintained, cleaned and free from offensive odours, unsightly accumulation of debris, litter and miscellaneous waste at all times.
10.4.6 Cleaning material and detergents are required to ensure a hygienic environment is available and stored at all times.
10.4.7 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 11
STANDARDS AND REQUIREMENTS FOR SEASONAL TRADITIONAL SCHOOLS

11.1 General requirements for Seasonal Traditional Schools

11.1.1 Seasonal traditional initiations must be provided with a permit/authorisation by the relevant municipality and/or local traditional leaders.
11.1.2 Facilities used for housing initiates must protect initiates from extreme/adverse environmental conditions (i.e., heat, cold and rain).
11.1.3 Only safe food that is suitable for human consumption must be served to initiates.
11.1.4 The area where the school is established must allow easy access in cases of emergency.
11.1.5 Means must be made to ensure an adequate supply of potable water, and sanitation facilities must be provided for the use by initiates.
11.1.6 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.

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(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.

11.1.7 The environment where initiates are kept is reasonably clean and free from debris.

SECTION 12
STANDARDS AND REQUIREMENTS FOR CONSTRUCTION SITES

12.1 General Standards and requirements for construction sites

12.1.1 Construction sites must adhere to the following standards:

(a) Water, sanitation, and hygiene facilities must be provided for workers to use.
(b) If more than 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 must be adequately ventilated and illuminated.
(d) An adequate supply of toilet paper and handwash soap must always be provided in the toilet facilities.
(e) Wash-up facilities equipped with hot and cold running water must be 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 must adequately be ventilated and illuminated.
(h) A suitable, effective, and approved drainage and sewage disposal system must be in place on the premises in compliance with the relevant municipal by-laws of a specific local authority.

12.1.2 Measures must be 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.

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(e) Change rooms must be equipped with separate lockers for storage of each employee's personal belongings.

12.1.3 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 13
STANDARDS FOR PUBLIC GATHERING PLACES

13.1 General standards and requirements for public gathering places

13.1.1 The management of waste on the premises complies with the by-laws of the relevant local authority:

(a) Refuse bins with close-fitting lids must be provided at strategic points throughout the premises for collection or disposal of litter.
(b) A central refuse area must be provided on the premises where the storage of waste is pending removal.
(c) The central refuse area must be maintained in such a manner to prevent the occurrence of a nuisance.
(d) Access control is available at all times in the central refuse area.
(e) 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.

13.2 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.

13.3 Adequate ablution facilities must be provided on the premises to meet the needs of the public:

(a) For a population of up to 50 (fifty) people, one toilet facility/water closet and 1 (one) wash hand basin are provided for every 50 male persons.
(b) One urinal is provided for every 50 male persons.
(c) One toilet facility/water closet and one wash hand basin are provided for every 25 female persons.
(d) Toilet facilities for women enable the management of menstrual hygiene.

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(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.

13.4 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.

13.5 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.

13.6 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 14
STANDARDS AND REQUIREMENTS FOR AIRCRAFT, SHIPS AND PORTS OF ENTRY PREMISES

14.1 Structural facilities

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.

14.2 Waste management

14.2.1 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.
14.2.2 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.
14.2.3 The management of waste on board vessels adheres to the requirements as specified in the WHO Guide to Ship Sanitation.
14.2.4 Sufficient waste containers must be provided for on-board conveyances for storage of all types of waste.
14.2.5 Waste containers must promptly be emptied from the conveyances upon arrival, and waste management procedures must be implemented for disposal.

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14.2.6 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.

14.3 Water, sanitation, and hygiene

14.3.1 A potable water supply and adequate toilet and wash-up facilities must be provided on board the aircraft and ship.
14.3.2 Hot and cold running water must be provided at every hand wash basin.
14.3.3 Toilet facilities must be maintained in good working order and in good repair at all times.
14.3.4 Floors of the toilets should be constructed of a durable surface that is easily cleanable.
14.3.5 Sanitary waste on board the aircraft must, upon arrival, be discharged into a municipal-approved sewerage system by a designated service provider.
14.3.6 A potable water supply and adequate toilet and wash-up facilities must be provided at all air, sea, and land borders for use by travellers and staff members:
14.3.7 The toilet facilities must be separated by gender.
14.3.8 Facilities for female persons enable the management of menstrual hygiene.
14.3.9 Always kept in good repair and clean and sanitary, with an adequate supply of toilet paper and soap.
14.3.10 Sewage disposal systems on board the ship conforms to the specifications per the WHO Guide to Ship Sanitation and the Handbook for Inspection of Ships and Issuance of Ship Sanitation Certificates.

14.4 Accommodation establishments on board the ship

14.4.1 Accommodation establishments on board must conform to the specifications as per the Handbook for Inspection of Ships and Issuance of Ship Sanitation Certificates.
14.4.2 Adequate ventilation and heating systems, with adequate natural or artificial lighting, must be provided.
14.4.3 Adequate water supply, sanitation and wash-up facilities must be provided for accommodation establishments.
14.4.4 An adequate supply of soap and toilet paper must be maintained in sanitation facilities.
14.4.5 Accommodation establishments must be kept clean at all times.
14.4.6 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.
14.4.7 Ships must be equipped with facilities for storage and managing wastes generated from all areas within the ship.
14.4.8 Waste containers must be designed appropriately to facilitate proper cleaning.
14.4.9 Waste holding rooms must be well ventilated, and humidity and temperature must be controlled.
14.4.10 Waste holding areas must have accessible hand-washing facilities, and hot and cold running water must be provided.
14.4.11 Healthcare waste must be stored and treated in a safe manner.
14.4.12 Facilities for treating and/or storing healthcare waste must be available on board.
14.4.13 Ships must be equipped with facilities for managing waste from toilets and urinals, medical facilities and food sources.
14.4.14 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.

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14.5 Food safety and hygiene

14.5.1 Food safety and hygiene on board the aircraft and on board the ship must conform to the specifications as per the WHO Guide to Hygiene and Sanitation in Aviation:
14.5.2 All food on board must be stored and maintained at safe temperatures before and during serving.
14.5.3 On-board storage compartments must be made of a material that is easily cleanable and is cleaned and disinfected regularly.
14.5.4 All equipment must be maintained in a serviceable condition and must be kept clean at all times.
14.5.5 Containers used for serving food can only be used for the intended purpose.
14.5.6 All utensils and equipment intended for single use shall not be re-used.
14.5.7 Food waste must be removed from the aircraft as soon as possible after arrival and must be disposed off appropriately.
14.5.8 Only food that is fit for human consumption is supplied on board.

14.6 General requirements

14.6.1 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.
14.6.2 A cleaning and maintenance programme must be in place for all areas of a ship.
14.6.3 Aircraft and ships must be kept free of any vectors/pests and flies.
14.6.4 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.
14.6.5 Adequate sanitation and hand-washing facilities must be provided on board the vessel.
14.6.6 Hot and cold running water must be provided at every hand wash basin.
14.6.7 Toilet facilities must be kept clean at all times, and adequate supplies of toilet paper, soap, and drying towels are provided.
14.6.8 Cargo holds must be kept free of any infectious materials, vectors and rodents.
14.6.9 Integrated vector control programmes must be in place to control the breeding of vectors on board ships, aircraft, and point-of-entry environments.

SECTION 15
STANDARDS FOR VACANT LAND

15.1 Standards and requirements for vacant land

15.1.1 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.

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(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 16
STANDARDS FOR CARAVAN PARKS AND CAMPING SITES

16.1 Standards and requirements for caravan parks and camping sites

16.1.1 Caravan parks and camping sites are only operated under a valid permit/licence issued by the relevant local authority.
16.1.2 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.

16.2 Water and sanitation facilities

16.2.1 An adequate and constant supply of potable water, toilet and wash-up facilities must be available on the premises:

(a) One permanent standpipe is available in a convenient position for every 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 one toilet and one urinal are provided for every eight caravans or camping sites or part thereof. The bucket and channel of the urinal must be made of stainless steel or other approved material.
(c) At least two toilet facilities must be provided for every six caravans or camping sites or part thereof in excess of 12 sites.
(d) Handwashing facilities and an adequate supply of soap must be provided.
(e) Toilets for female persons must enable menstrual hygiene management.
(f) All baths, showers, and hand wash basins must be 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 must be 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 must be 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 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 caravan sites or part thereof and every 10 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.

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SECTION 17
STANDARDS FOR PRISONS, INCLUDING POLICE STATION HOLDING CELLS

17.1 Standards and requirements for prisons, including police station holding cells

Prisons, including police station holding cells, must comply with the following standards:

(a) The building structure promotes the health and safety of inmates: walls must be 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 must be kept clean at all times, free from debris, litter and other miscellaneous rubbish and are maintained in good repair.
(d) Adequate storage facilities must be provided for the storage of personal belongings of each occupier.
(e) An adequate water supply, sanitation and hygiene facilities must be provided to meet the needs of prisoners.
(f) A potable water supply must be provided on the premises for drinking, cooking, and other uses.
(g) At least one toilet facility and one hand wash basin are provided for every 50 male inmates. At least one urinal must be provided for every 50 prisoners.
(h) At least one toilet facility and one hand wash basin are provided for every 25 (twenty-five) female prisoners.
(i) Toilet facilities for women must enable the management of menstrual hygiene.
(j) Toilet and wash-up facilities must be adequately illuminated and ventilated.
(k) At least one shower must be provided for every 50 inmates on the premises.
(l) Toilet facilities must provide privacy and security.
(m) Potable running hot and cold water must be available at all wash-up sinks and showers.
(n) Toilet facilities must be kept clean at all times, and an adequate supply of toilet paper, soap and drying towels is provided.
(o) Toilet facilities must always be maintained in good working order and in good repair.
(p) Floors and walls of the toilet and wash-up facilities must be constructed of an easily cleanable material.
(q) Prisons have access to a well-managed laundry facility for effectively laundering bedding and clothing.

SECTION 18
STANDARDS FOR OFFICE ACCOMMODATION

18.1 Standards and requirements for office accommodation

Office buildings and accommodations must comply with the following environmental health standards.

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(a) The building structure must be 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 must be maintained in good working order and enables adequate air circulation.
(b) Adequate toilet and hand-washing facilities must be available on the premises for use by occupants-
(c) At least one toilet facility and one hand wash basin are provided for every 30 male employees on the premises, equipped with running water, and one urinal is provided for every 30 male employees on the premises.
(d) At least one toilet facility and one hand wash basin are provided for every 20 female employees, equipped with potable running water on the premises and toilets for female persons must enable menstrual hygiene management.
(e) Toilet facilities must be properly illuminated and ventilated.
(f) Floors of the toilet facilities must be constructed of a smooth finish and easily cleanable surface.
(g) An adequate supply of toilet paper must be 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 must be 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 must be continuously monitored for possible contamination and fitness for consumption.
(k) The management of waste on the premises must be line with the by-laws of the relevant local authority:
(l) Refuse bins with close-fitting lids must be provided at strategic points throughout the premises for collection or disposal of litter.
(m) A central refuse area must be available on the premises for storage of waste pending removal.
(n) The central refuse area must be maintained in such a manner as to prevent the occurrence of a nuisance.
(o) Access control is available and is maintained.

SECTION 19
STANDARDS FOR KEEPING OF ANIMALS

19.1 Standards and requirements for keeping animals on premises

Premises used in connection with the keeping and breeding of animals must be operated under a permit issued by the relevant local authority.

(a) Cattle, horses, mules, donkeys, goats, sheep, poultry, rabbits, pigs, dogs, and bees must be 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.

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(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.

19.2 General hygiene requirements for keeping animals and poultry

The premises and any equipment, apparatus, container or receptacle used in connection with keeping animals must be 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 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.
(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.

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(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 20
STANDARDS OFFENSIVE TRADES

20.1 Standards for offensive trades on premises

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.

SECTION 21
OFFENCES AND PENALTIES

21.1. Failure to comply with these norms and standards may result in legal action against the owner, person in charge, or occupier of the premises, in accordance with the provisions of the Act.

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DEFINITION OF TERMS

Any definition in the Act and the Regulations shall have the same meaning.

Accommodation establishment	Refers to 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.
Adequate ventilation	Refers to the supply of fresh air to a space and the effective removal of stale air, pollutants, excess heat, moisture, and odours so that indoor air quality remains relatively safe and comfortable for occupants.
Aircraft	Refers to an aircraft making an international voyage.
Beauty Parlour	A commercial establishment offering cosmetic treatments such as hairdressing, nail care, skin care, and related services.
Breeding	Refers to the controlled reproduction of animals with the purpose of producing offspring intended for commercial sale, whether to consumers, other breeders, or businesses. It includes the selection, mating, and management of animals to produce progeny for market purposes."
Chemical	Refers to 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	Refers to partial care facility as categorised in terms of Section 76 to 90 of the Children's Act and shall include partial care: Early Childhood Development and after-school care, hostel and respite care, child and youth care centres as well as drop-in centres.
Children's homes	Refers to children's home is a residential facility that provides full-time or part-time care, protection, and support for children who cannot live with their families due to neglect, abuse, abandonment, orphanhood, or other social or legal reasons.
Community residential mental healthcare facilities	Refers to 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	Refers to 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	Refers to 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.
Disinsection	Refers to the procedure whereby health measures are taken to control or kill the insect vectors of human diseases present in

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	baggage, cargo, containers, conveyances, goods and postal parcels;
Environmental Health Practitioner	Refers to, 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	Refers to an intrinsic potential or ability of an agent, equipment, material, activity or process to cause harm.
Healthcare general waste	Refers to healthcare general waste as defined in the SANS 10248, Management of Healthcare Waste.
Healthcare professional	Refers to 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)	Refers to healthcare risk waste as defined in SANS 10248, Management of Healthcare Waste.
Health establishment	Refers to a “health establishment” and “military health establishment” as defined in the National Health Act.
Improved water sources	Refers to water sources that, by nature of their construction or through active intervention, are protected from outside contamination, particularly 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.
Low-cost settings	Refers to economically disadvantaged environments such as informal settlements, rural communities, townships, and low-cost housing areas, where access to resources and infrastructure may be limited.
Major event	Refers to a public gathering characterized by large attendance (typically 300 or more people), open or semi-open access, and an elevated risk profile. Such events have a higher potential for incidents, including public disorder, health emergencies, or security threats. They usually require coordinated planning and response involving event organizers, local authorities, police, fire, medical, and traffic services, and often extend over multiple hours or days due to their scale or complexity.
Microbiological quality	Refers to the presence of micro-organisms such as protozoa, bacteria and viruses in water.
Monitoring	Refers to the long-term, standardised measurement and observation of the aquatic environment to define status and trends,
Normal	Refers to the desired status.
Nursing home	Refers to a place of residence for people who require constant nursing care, as well as people who might have significant

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	deficiencies with activities of daily living. These may include rest homes and care homes and exclude homes for the aged.
Old age home	Refers to a residential facility that provides accommodation, care, and support for elderly people who may not be able to live independently.
Operational	Refers to a determinant essential for assessing the efficient operation of treatment systems and risks to infrastructure.
Offensive trade	Refers to a business, or commercial activity that can cause a public nuisance and/or health hazard or are otherwise deemed offensive and/or potentially dangerous to humans.
Pathological waste	Refers to pathological waste as defined in SANS 10248, Management of Healthcare Waste.
Pest	Refers to any animal, which includes insects and rodents, that may transmit disease.
Pest control programme	Refers to a written programme that outlines activities to be conducted for the control of pests on a premises.
Personal Protective Clothing	Refers to a white protective coat/lab coat, hair net (where required), closed toe shoe/safety shoes and hand sanitizer.
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 pathological waste as defined in SANS 10248, Management of Healthcare Waste.
Physical quality	Refers to turbidity, colour, taste, odour and other physical aspects of water.
Point of delivery	Refers to a physical fixed interface between a water services provider or a water services authority and a customer.
Point of entry	Refers to a passage for international entry or exit of travellers, 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	Refers to 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.

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Risk management	Refers to the process of identifying and documenting all hazards and risks within the water supply system.
Segregation	Refers to the separation of healthcare waste into distinct categories.
Ship	Refers to a seagoing or inland navigation vessel on an international voyage.
Standard	Refers to 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.
Traveller	Refers to a natural person undertaking an international voyage.
Unimproved water sources	Refers to 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.
Vector	Refers to a vector is an organism that transmits pathogens (disease-causing agents) from one host to another.
WASH	Refers to Water, Sanitation, and Hygiene, referring to the standards and practices that ensure safe water supply, proper sanitation, and hygienic conditions
Water safety plan	Refers to 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 a risk assessment and risk management approach from catchment to point of delivery.

ACRONYMS

CPD	Continuous Professional Development
DHIS	District Health Information System
EHP	Environmental Health Practitioner
GPS	Global Positioning System
HCRW	Health Care Risk Waste
IATA	International Air Transport Association
NDOH	National Department of Health
NHA	National Health Act
SANS	South Africa National Standards

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WHO	World Health Organisation
SAWS	South African Weather Services

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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

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Appendix C:
Record of fines/prosecutions

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)

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				

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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

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

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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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APPENDIX I

GUIDELINE TEMPLATE: HEALTH CERTIFICATE
ECDs/CHILDREN'S HOMES

Issuing authority.....

CERTIFICATE NUMBER…….. VALIDITY PERIOD: .....…….

NAME OF ECD……..
PHYSICAL ADDRESS ……...
……

NAME OF OWNER/PERSON IN CHARGE……
ID NUMBER……
RESIDENTIAL ADDRESS……..

CERTIFICATION AND RESTRICTIONS

It is hereby certified that the above-mentioned premises adheres Section……of the prescribed environmental health norms and standards for Early Development Centres/ Children's Homes issued in terms of the National Health Act, 61 of 2003.

INDOOR SPACE/ CLASSESS FOR LEARNERS

Maximum number of children……
Ages……
Total number of caregivers……..

Restrictions……
……
……
……
……..

This certificate is not transferable from one person to another or from one premises to another.

Name of issuing EHP:……._____
Signature: ……..
Date of issue: ……

APPROVED BY DESIGNATED MUNICIPALITY OFFICIAL
Name of designated official:……..
Designation……..
Signature……..
Date:……

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APPENDIX J

GUIDELINE TEMPLATE: HEALTH CERTIFICATES

OLD AGE HOME/ COMMUNITY MENTAL HEALTH CARE FACILITIES

CERTIFICATE NUMBER…….. VALIDITY PERIOD…….

NAME OF INSTITUTION……..
PHYSICAL ADDRESS ……..
……
……..

NAME OF OWNER/PERSON IN CHARGE……
ID NUMBER……
RESIDENTIAL ADDRESS…….

CERTIFICATION AND RESTRICTIONS

It is hereby certified that the above-mentioned premises adheres Section……of the prescribed environmental health norms and standards for Old Age Home/ Community mental health care facilities premises issued in terms of the National Health Act, 61 of 2003.

NUMBER OF SERVICE USERS
Total number of occupants……...

RESTRICTIONS
……
……
……
……
……

This certificate is not transferable from one premises to another or from one person to another.

Name of issuing EHP…….._____
Signature: ……
Date of issue: ……

APPROVED BY DESIGNATED MUNICIPALITY OFFICIAL
Name of designated official:……..
Designation……..
Signature……..
Date:……

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APPENDIX K

GUIDELINE TEMPLATE: HEALTH CERTIFICATES

ACCOMMODATION ESTABLISHMENTS

CERTIFICATE NUMBER…….. VALIDITY PERIOD…….

NAME OF INSTITUTION……..
PHYSICAL ADDRESS ……...
……
……..

NAME OF OWNER/PERSON IN CHARGE……
ID NUMBER……
RESIDENTIAL ADDRESS……..

CERTIFICATION AND RESTRICTIONS

It is hereby certified that the above-mentioned premises adheres Section……of the prescribed environmental health norms and standards for Accommodation Establishments issued in terms of the National Health Act, 61 of 2003.

NUMBER OF ROOMS
Total number of rooms……...

RESTRICTIONS
……
……
……
……
……

This certificate is not transferable from one premises to another or from one person to another.

Name of issuing EHP_____
Signature: _____
Date of issue: _____

APPROVED BY DESIGNATED MUNICIPALITY OFFICIAL
Name of designated official:……..
Designation……..
Signature……..
Date:…….

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APPENDIX L

GUIDELINE TEMPLATE: HEALTH CERTIFICATES

PUBLIC SWIMMING POOLS AND SPA BATHS

CERTIFICATE NUMBER…….. VALIDITY PERIOD…….

NAME OF INSTITUTION……..
PHYSICAL ADDRESS ……...
……
……..

NAME OF OWNER/PERSON IN CHARGE……
ID NUMBER……
RESIDENTIAL ADDRESS……..

CERTIFICATION AND RESTRICTIONS

It is hereby certified that the above-mentioned premises adheres Section……of the prescribed environmental health norms and standards for Public Swimming Pools and Spa Baths premises issued in terms of the National Health Act, 61 of 2003.

NUMBER OF SERVICE USERS
Total number of occupants……...

RESTRICTIONS
……
……
……
……
……

This certificate is not transferable from one premises to another or from one person to another.

Name of issuing EHP_____
Signature: _____
Date of issue: _____

APPROVED BY DESIGNATED MUNICIPALITY OFFICIAL
Name of designated official:……..
Designation……..
Signature……..
Date:…….

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APPENDIX M

GUIDELINE TEMPLATE: HEALTH CERTIFICATES

BEAUTY PARLOURS

CERTIFICATE NUMBER…….. VALIDITY PERIOD…….

NAME OF INSTITUTION……..
PHYSICAL ADDRESS ……...
……
……..

NAME OF OWNER/PERSON IN CHARGE…….
ID NUMBER……
RESIDENTIAL ADDRESS……..

CERTIFICATION AND RESTRICTIONS

It is hereby certified that the above-mentioned premises adheres Section……of the prescribed environmental health norms and standards for Beauty Parlour premises issued in terms of the National Health Act, 61 of 2003.

NUMBER OF SERVICE USERS
Total number of occupants……...

RESTRICTIONS
……
……
……
……
……

This certificate is not transferable from one premises to another or from one person to another.

Name of issuing EHP_____
Signature: ……..
Date of issue:……_____

APPROVED BY DESIGNATED MUNICIPALITY OFFICIAL
Name of designated official:……..
Designation……..
Signature……..
Date:…….

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ANNEXURE 1

LIST OF PREMISES REQUIRING A HEALTH CERTIFICATE

.	Childcare centres, in exception of Day Mothers
.	Children's Homes
.	Old Age Homes
.	Residential mental health care facilities
.	Accommodation establishments
.	Beauty parlours
.	Swimming pools and spa baths

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DEPARTMENT OF HEALTH

NO. 7780 **7 August 2026**

MEDICINES AND RELATED SUBSTANCES ACT, 1965 (ACT NO. 101 OF 1965)

GENERAL REGULATIONS MADE IN TERMS OF THE MEDICINES AND RELATED SUBSTANCES ACT, 1965 (ACT NO. 101 OF 1965): AMENDMENT

The Minister of Health has, in terms of section 35 of the Medicines and Related Substances Act, 1965 (Act No. 101 of 1965), and after consultation with the South African Health Products Regulatory Authority, made the regulations in the Schedule.

DR PAKISHE AARON MOTSOALEDI, MP
MINISTER OF HEALTH
DATE: 15/7/2026

SCHEDULE

Definitions

1. In these regulations —

"the Act" means the Medicines and Related Substances Act, 1965 (Act 101 of 1965); and

"the Regulations" means the General Regulations as published under Government Notice 859 in *Government Gazette* 41064 of 25 August 2017.".

Amendment of regulation 1

2. Regulation 1 is hereby amended —

(a) by the deletion of the definition of "**counterfeit medicine**";

(b) by the insertion after the definition of "Site Master File" of the following definition:

"'**substandard medicine**' means a medicine that fails to meet either its quality standards or specifications or both."; and

(c) by the insertion after the definition of "expiry date" of the following definition:

" '**falsified medicine**' means a medicine for which the identity, composition or source is deliberately or fraudulently misrepresented".

Amendment of regulation 6

3. Regulation 6 is hereby amended —

(*a*) by the substitution of sub-regulation (1) of the following sub-regulation-

"(1) No person shall import any medicine or scheduled substance, including medicines imported in terms of section 15C of the Act, into the Republic except through one of the following ports of entry, in a manner as determined by the Authority:

(*a*) Cape Town International Airport or Cape Town harbour;

(*b*) Chief Dawid Stuurman International Airport, Port Elizabeth harbour or Ngqura harbour;

(*c*) King Shaka International Airport or Durban harbour; or

(*d*) O.R. Tambo International Airport." and

(*b*) by the insertion after sub-regulation (1) of the following sub-regulation:

"(1A) Despite sub-regulation (1), a person may import any medicine or scheduled substance in a manner as determined by the Authority through-

(*a*) Beit Bridge border post (Zimbabwe border);

(*b*) Vioolsdrift border post (Namibia border);

(c) border post (Botswana border);

(d) Maseru Bridge border post (Lesotho border);

(e) Lebombo border post (Mozambique border);

(*f*) Oshoek border post (Eswatini border), provided that the Authority is notified of and approves the intended importation."

(c) by the addition after sub-regulation (3) of the following sub-regulation:

"(4) No person shall import or export any scheduled substances, medicines, or health products unless a permit has been issued to him or her by the CEO or Authority in the prescribed manner and subject to such conditions as may be determined by the CEO or Authority.".

Amendment of Regulation 51

4. Regulation 51 is hereby amended by the substitution in sub-regulation (1) for paragraph *(b)* of the following:

"(b) is suspected of being falsified."

Short title

5. These Regulations are called General Regulations made in terms of the Medicines and Related Substances Act, 1965 (Act No.101 of 1965): Amendment, 2026

DEPARTMENT OF HEALTH

NO. 7781 **7 August 2026**

HEALTH PROFESSIONS ACT, 1974 (ACT NO.56 OF 1974)

REGULATIONS RELATING TO THE REGISTRATION OF INTERN ARTS THERAPISTS IN DRAMA

The Minister of Health has, in terms of section 61(1) (k) of the Health Professions Act, 1974 (Act No. 56 of 1974), and after consultation with the Health Professions Council of South Africa, made the regulations in the Schedule.

DR PAKISHE AARON MOTSOALEDI, MP
MINISTER OF HEALTH
DATE: 5/7/26

SCHEDULE

Definitions

1. In these regulations any word or expression to which a meaning has been assigned in the Act shall bear such meaning and, unless the context otherwise indicates-

"approved training facility" means a hospital, clinic, laboratory, healthcare centre, or any other institution approved by the board for the purpose of internship training;

"Board" means the Professional Board for Occupational Therapy, Medical Orthotics and Prosthetics and Arts Therapy established in terms of section 15 of the Act;

"intern" means an intern Arts Therapist in the category of Drama;

"qualification" means a qualification prescribed under section 24 of the Act for registration of an arts therapist in the category of drama; and

"the Act" means the Health Professions Act, 1974 (Act No. 56 of 1974)

Registration as an intern

2. Any person who holds a qualification prescribed under section 24 of the Act for registration as an Arts Therapist in the category of Drama or who holds a qualification accepted by the board in terms of section 25 of the Act shall, before he or she is entitled to registration as an Arts Therapist in the category of Drama, undertake internship training to the satisfaction of the board for a period and in the manner prescribed in regulation 5, unless the board exempt such person partially or in full from this requirement on submission of documentary evidence to the satisfaction of the board of internship or equivalent training undergone or experience obtained elsewhere.

Requirements for registration

3. A person referred to in regulation 2 must apply to the board for registration as an intern:-

(a) in the case of a person who commences internship training at an approved training facility, within one month following the commencement of such training; or

(b) in the case of a person who, on the date of publication of these regulations, had already commenced training as an intern at an approved training facility, within one month after the date of publication of these regulations.

Information to be submitted to the board

4. A person contemplated in regulation 2 must -

(a) submit his or her application for registration as an intern to the board on an application form supplied by the board, and duly completed;

(b) submit proof that he or she holds a qualification:

(i) prescribed in terms of section 24 of the Act; or

(ii) accepted by the board in terms of section 25 of the Act;

(c) submit proof of admission to an approved training facility to which he or she was admitted to undergo training as an intern and must notify the board in writing and in advance if he or she intends to change from that approved training facility to another approved training facility; and

(d) pay the applicable registration fee.

Conditions of internship training

5. (1) Internship training must be of not less than twelve months' duration and, where it is broken or interrupted, it must consist of periods which, when added together, are not less than twelve months in total, including vacation leave not exceeding one month's duration per annum, and sick leave not exceeding 12 working days per annum, and must comply with criteria laid down by the board from time to time.

(2) If a break or interruption in internship training, excluding leave contemplated in subregulation (1) exceeds a period of three months, the period of internship training prior to such break or interruption shall not be recognized as part of completed internship training.

(3) The period of twelve months of internship training contemplated in subregulation (1) shall be completed within a period of two years from the date of registration as an intern.

(4) If an intern does not complete his or her internship training within a period of two years, his or her registration in terms of the Act must expire, unless he or she provides the board with satisfactory reasons as to why his or her registration should be extended.

(5) The training shall be undertaken by an intern in a facility approved by the board.

(6) If a facility contemplated in subregulation (5) is not available, the board may, at its discretion, approve alternative training which in the board's opinion is equivalent to training at a facility approved by the board.

(7) When approving alternative training in terms of subregulation (6) the board may stipulate that only a portion of an intern's training shall be undertaken at that facility, and that the remainder shall be undertaken at another approved facility.

(8) If internship training at an approved training facility is considered by the board for any reason to be inadequate or unsatisfactory, the board may-

(a) withdraw its approval of the facility and inform any interns at that facility accordingly in writing and advise such interns to undertake internship training at another approved training facility for the remaining period; or

(b) in the case where an internship has already been completed by an intern, but considered inadequate or unsatisfactory by the board, extend the period of internship for such intern and require them to complete the extended period at another approved training facility.

Duty certificate as proof of training

6. (1) An intern must, upon completion of internship training, submit an intern duty certificate to the satisfaction of the board to certify that he or she has satisfactorily undertaken internship training as required by the board and such certificate shall be a precondition for registration as an Arts Therapist in the category of Drama.

(2) The intern duty certificate contemplated in subregulation (1) must be issued by the head of an approved training facility where an intern successfully undertook internship training.

Penalties for late registration

7. Where an application for registration of an intern referred in regulation 4 is submitted after the date specified in regulation 3, such application must be subject to any applicable late registration fees in respect of each month or part of a month by which the application is submitted after the due date.

Short title

8. These regulations are called Regulations Relating to the Registration of Intern Arts Therapists in Drama, 2026.

LEFAPHA LA BOITEKANELO

HEALTH PROFESSIONS ACT, 1974 (MOLAO 56 WA 1974)

MELAWANATAOLO E E AMANANG LE KWADISO YA BAITHUTATIRO BA BAALAFIKABOTSWERETSHI MO TERAMENG

Tona o, go ya ka karolo 61(k) ya Health Professions Act, 1974 (Molao 56 wa 1974), le morago ga go buisana le Lekgotla la Diporofešene tsa Boitekanelo la Aforika Borwa, dirile melawanataolo e e mo Šejuleng.

NG. PAKISHE AARON MOTSOALEDI, MP
TONA YA BOITEKANELO
LETLHA: 9/7/2026

ŠEJULE

Ditlhaloso

1. Mo melawanataolong eno lefoko kgotsa polelo efe e e abetsweng bokao mo Molaong e tla nna le bokao joo, ntle le fa bokaelo bo supa ka tsela esele-

"lefelo la katiso le le amogetsweng" go tewa bookelo, tleliniki, laboratori, lefelo la tlhokomelo ya boitekanelo, kgotsa setheo sefe fela se se amogetsweng ke boto ka maikaelelo a katiso ya boithutatiro;

"Boto" go tewa Boto ya Porofešenale ya Kalafi ya Tiro, Diorthotics tsa Kalafi le Diprosthetics le Kalafikabotsweretshi e e tlhomilweng go ya ka karolo 15 ya Molao;

"**moithutatiro**" go tewa moithutatiro wa Moalafikabotsweretshi mo setlhopheng sa Terama;

"lekwalo la thuto" go tewa lekwalo la thuto le le laetsweng ka fa tlase ga karolo 24 ya Molao ya kwadiso ya moalafikabotsweretshi mo setlhopheng sa terama; le

"Molao" go tewa *Health Professions Act, 1974* (Molao 56 wa 1974)

Ikwadiso jaaka moithutatiro

2. Motho mongwe le mongwe yo o nang le lekwalo la thuto le le laetsweng go ya ka karolo 24 ya Molao wa kwadiso jaaka Moalafikabotsweretshi mo setlhopheng sa Terama kgotsa yo o nang le lekwalo la thuto le le amogetsweng ke boto go ya ka karolo 25 ya Molao o tla, pele ga a nna le tshwanelo ya go ikwadisa jaaka Moalafikabotsweretshi mo setlhopheng sa Terama, tsenela katiso ya boithutatiro go fitlhela boto e kgotsofala ka nako le ka tsela e e laetsweng mo molawanataolong 5, ntle le fa boto e golola motho yoo ka bontlhabongwe kgotsa ka botlalo mo tlhokegong eno ka thomelo ya bosupi jwa makwalo go kgotsofatsa boto ya katiso ya boithutatiro kgotsa katiso e e tshwanang e e dirilweng kgotsa maitemogelo a a bonweng gosele.

Ditlhokego tsa ikwadiso

3. Motho yo o umakilweng mo molawanataolong 2 o tshwanetse go dira kopo ya ikwadiso kwa botong jaaka moithutatiro:-

(a) mo ntlheng ya motho yo o simololang katiso ya boithutatiro kwa lefelong la katiso le le amogetsweng, mo kgweding e le nngwe morago ga go simolola katiso eo; kgotsa

(b) mo ntlheng ya motho yo, ka letlha la phasalatso ya melawanataolo eno, a neng a setse a simolotse katiso jaaka moithutatiro kwa lefelong la katiso le le amogetsweng, mo kgweding e le nngwe morago ga letlha la phasalatso ya melawanataolo eno.

Tshedimosetso e e tshwanetseng go romelelwa boto

4. Motho yo o tlhalosiwang mo molawanataolong 2 o tshwanetse go -

(a) romela kopo ya gagwe ya go ikwadisa jaaka moithutatiro kwa botong mo foromong ya kopo e e tlametsweng ke boto, mme e tlatswe ka tshwanelo;

(b) romela bosupi jwa gore o na le lekwalo la thuto:

(i) le le laetsweng go ya ka karolo 24 ya Molao; kgotsa

(ii) le le amogelwang ke boto go ya ka karolo 25 ya Molao;

(c) romela bosupi jwa kamogelo kwa lefelong le le amogetsweng la katiso le a amogetsweng go dira katiso ya M kwa go lona jaaka moithutatiro mme o tshwanetse go itsise boto ka go kwala le go sa le gale fa a ikaelela go fetola go tswa mo lefelong leo la katiso le le amogetsweng go ya kwa lefelong le lengwe le le amogetsweng la katiso; le

(d) duela dituelo tse di maleba tsa ikwadiso.

Dipeelomabaka tsa katiso ya boithutatiro

5. (1) Katiso ya boithutatiro e tshwanetse go nna ya paka e e seng ka fa tlase ga dikgwedi di le lesomepedi mme, fa e emisitswe kgotsa e kgaotswe, e tshwanetse go nna le dipaka tse e leng gore, fa di kopanngwa mmogo, di bo di se ka fa tlase ga dikgwedi di le lesomepedi ka kakaretso, go akaretsa le malatsi a khunologo a boikhutso a a sa feteng paka ya kgwedi e le nngwe ka ngwaga, le khunologo ya bolwetse e e sa feteng malatsi a tiro a le 12 ka ngwaga, mme e tshwanetse go obamela ditlhokego tsa tiro tse di beilweng ke boto nako le nako.

(2) Fa kemiso kgotsa kgaotso mo katisong ya boithutatiro, ntle le khunologo e e tlhalositsweng mo molawanataolong wa tlaleletso (1) e feta paka ya dikgwedi di le tharo, paka ya katiso ya boithutatiro pele ga kemiso kgotsa kgaotso e e jalo ga e ne e amogelwa jaaka karolo ya katiso ya boithutatiro e e dirilweng.

(3) Paka ya dikgwedi di le lesomepedi tsa katiso ya boithutatiro e e tlhalositsweng mo molawanataolong wa tlaleletso (1) e tla dirwa mo pakeng ya dingwaga di le pedi go tloga ka letlha la ikwadiso jaaka moithutatiro.

(4) Fa moithutatiro a sa fetse katiso ya gagwe ya boithutatiro mo pakeng ya dingwaga di le pedi, kwadiso ya gagwe go ya ka Molao e tshwanetse go fela, ntle le fa a neela boto mabaka a a kgotsofatsang a gore ke eng fa kwadiso ya gagwe e tshwanetse go atolosiwa.

(5) Katiso e tla dirwa ke moithutatiro mo lefelong le le amogetsweng ke boto.

(6) Fa lefelo le le tlhalositsweng mo molawanataolong wa tlaleletso (5) le seyo, boto e ka, ka kakanyo ya yona, amogela katiso e nngwe e go ya ka kakanyo ya boto e tshwanang le katiso ya kwa lefelong le le amogetsweng ke boto.

(7) Fa go amogelwa katiso e nngwe go ya ka molawanataolo wa tlaleletso (6) boto e ka tlhomamisa gore ke karolo fela ya katiso ya moithutatiro e e tla direlwang kwa lefelong leo, le gore e e setseng e tla direlwa kwa lefelong le lengwe le le amogetsweng.

(8) Fa katiso ya boithutatiro kwa lefelong le le amogetsweng la katiso, boto e e tsaya ka ntlha ya lebaka lengwe e sa lekana kgotsa e sa kgotsofatse, boto e ka-

(a) gogela kamogelo ya yona morago ya lefelo le go itsise baithutatiro bafe ba ba mo lefelong leo ka tshwanelo ka go kwala le go gakolola baithutatiro bao go dira katiso ya boithutatiro kwa lefelong le lengwe le le amogetsweng la katiso mo pakeng e e setseng; kgotsa

(b) mo ntlheng e mo go yona tiro ya boithutatiro e setseng e feditswe ke moithutatiro, mme e tsewa e sa lekana kgotsa e sa kgotsofatse ke boto, atolosa paka ya boithutatiro ya moithutatiro yo o ntseng jalo le go batla gore a fetse paka e e atolositsweng kwa lefelong le lengwe le le amogetsweng la katiso.

Setifikeiti sa tiro jaaka bosupi jwa katiso

6. (1) Moithutatiro o tshwanetse, fa a fetsa katiso ya boithutatiro, go romela setifikeiti sa tiro sa moithutatiro go kgotsofatsa boto go netefatsa gore o dirile katiso ya boithutatiro ka tsela e e kgotsofatsang jaaka go tlhokega ke boto mme setifikeiti seo se tla dirisiwa jaaka tlhokego ya go ikwadisa jaaka Moalafikabotsweretshi mo setlhopheng sa Terama.

(2) Setifikeiti sa tiro ya moithutatiro se se tlhalositsweng mo molawanataolong wa tlaleletso (1) se tshwanetse go rebolwa ke tlhogo ya lefelo la katiso le le amogetsweng moo moithutatiro a dirileng katiso ya boithutatiro ka katlego.

Dikotlhao tsa ikwadiso ya morago ga nako

7. Fa kopo ya ikwadiso ya moithutatiro yo o umakilweng mo molawanataolong 4 e rometswe morago ga letlha le le tlhalositsweng mo molawanataolong 3, kopo eo e tshwanetse go duelelwa dituelo dife tse di maleba tsa ikwadiso ya morago ga nako mabapi le kgwedi nngwe le nngwe kgotsa karolo ya kgwedi e ka yona kopo e rometsweng morago ga letlha le le beilweng.

Setlhogokhutswe

8. Melawanataolo eno e bidiwa Melawanataolo e e Amanang le Kwadiso ya Baithutatiro ba Baalafikabotsweretshi mo Terameng, 2026.

NDZAWULO YA RIHANYO

NAWU WA TIPHUROFEXINI TA RIHANYO, 1974 (NAWU WA NO.56 WA 1974).

MILAWU LEYI FAMBELANAKA NA KU TSARISIWA KA VATSHUNGURI VA VUTSHILA LAVA NGALEKU DYONDZENI EKA NTLANGU

Holobye wa Rihanyo, hi ku landza xiyenge xa 61(1) (k) xa Nawu wa Tiphurofexini wa swa Rihanyo, 1974 (Nawu wa Nomboro ya 56 wa 1974), naswona endzhaku ko burisana na Huvo ya Tiphurofexini ta Rihanyo ya Afrika-Dzonga, u endlile milawu eka Xedulu.

N'GANGA PAKISHE AARON MOTSOALEDI, XIRHO XA PALAMENDE
HOLOBYE WA RIHANYO
SIKU : 5/7/2026

XEDULU

Tinhlamuselo

1. Eka swinawana leswi rito rin'wana na rin'wana kumbe xivulavulelo lexi nhlamuselo yi nyikiweke yona eka Nawu xi ta va na nhlamuselo yoleyo naswona, handle ka loko mongo wu kombisa hi ndlela yin'wana- .

"Xitirhisiwa xa vuleteri lexi pfumeleriweke" swi vula xibedlhele, tliliniki, laboratori, senthara ya nhlayiso wa rihanyo, kumbe xivandla xin'wana na xin'wana lexi pfumeleriweke hi huvo hi xikongomelo xa vuleteri bya ku dyondzela ntirho ;

"Huvo" swi vula Huvo ya Xiphurofexinali ya Vutshunguri bya Ntirho, Vutshunguri bya Orithotiki na Vutshunguri bya Swiendlo swa Xitekela na Vutshila leyi tumbuluxiweke hi ku landza xiyenge xa 15 xa Nawu**"Mudyondzi wa ntirho"** swi vula Muongori wa Vutshila loyi a nga le ku dyondzeni eka xiyenge xa Ntlangu;

" nthwaselo" swi vula nthwaselo lowu vekiweke ehansi ka xiyenge xa 24 xa Nawu wo tsarisiwa ka muongori wa vutshila eka xiyenge xa ntlangu; na

"Nawu" swi vula Nawu wa Tiphurofexeni ta Rihanyo, 1974 (Nawu wa No 56 wa 1974).

Ku tsarisiwa tanihi mudyondzi wa ntirho

2. Munhu un'wana na un'wana loyi a nga na xitifikheti lexi vekiweke ehansi ka xiyenge xa 24 xa Nawu ku tsarisiwa tanihi Mutshunguri wa Vutshila eka xiyenge xa Ntlangu kumbe loyi a nga na xitifikheti lexi amukeriweke hi huvo hi ku landza xiyenge xa 25 xa Nawu u ta, a nga si va na mfanelo yo tsarisiwa tanihi Mutshunguri wa Vutshila eka xiyenge xa Ntlangu, a endla vuleteri bya ku dyondzela ntirho hi ndlela leyi enerisaka huvo ku ringana nkarhi wo karhi na hi ndlela leswi vekiweke eka nawu wa 5 , handle ka loko huvo yi ntshunxa munhu yoloye hi xiphemu kumbe hi ku helela eka xilaveko lexi loko ku rhumeriwa vumbhoni bya matsalwa ku enerisa huvo ya vuleteri byo dyondzela ntirho kumbe ndzetelo lowu ringanaka lowu endliweke kumbe ntokoto lowu kumiweke kun'wana.

Swilaveko swa ku tsarisa

3. Munhu loyi ku vulavuriwaka hi yena eka nawu wa 2 u fanele ku endla xikombelo eka huvo ku tsarisiwa tanihi mudyondzi:- .

(a) eka mhaka ya munhu loyi a sungulaka vuleteri bya ku dyondzela ntirho eka ndhawu ya ndzetelo leyi pfumeleriweke, ku nga si hela n'hweti yin'we endzhaku ko sungula ndzetelo wolowo; kumbe

(b) eka mhaka ya munhu loyi , hi siku ra ku kandziyisiwa ka milawu leyi, se a sungurile ndzetelo tanihi mudyondzi eka ndhawu ya ndzetelo leyi pfumeleriweke, ku nga si hela n'hweti yin'we endzhaku ka siku ra ku kandziyisiwa ka milawu leyi.

Vuxokoxoko lebyi byi fanelaka ku yisiwa eka huvo

4. Munhu loyi a langutiweke eka nawu wa 2 u fanele ku - .

(a) yisa xikombelo xa yena eka ku tsarisiwa tanihi mudyondzi eka huvo eka fomo ya xikombelo leyi nyikiweke hi huvo, naswona yi tatiwile hi ndlela leyi faneleke;

(b) yisa vumbhoni bya leswaku u na nthwaselo:

(i) leswi vekiweke hi ku landza xiyenge xa 24 xa Nawu; kumbe

(ii) amukeriwile hi huvo hi ku landza xiyenge xa 25 xa Nawu;

(c) yisa vumbhoni bya ku amukeriwa eka ndhawu ya ndzetelo leyi pfumeleriweke leyi a amukeriweke eka yona ku endla vuleteri tanihi mudyondzi wa ntirho naswona u fanele ku tivisa huvo hi ku tsala na hi kuya emahlweni loko a kunguhata ku cinca ku suka eka ndhawu yoleyo ya vuleteri leyi pfumeleriweke ku ya eka ndhawu yin'wana ya vuleteri leyi pfumeleriweke; na

(d) ku hakela mali yo tsarisa leyi faneleke.

Swiyimo swa vuleteri bya ku dyondzela ntirho

5. (1) Vuleteri bya ku dyondzela ntirho byi fanele ku va bya nkarhi lowu nga riki ehansi ka khumembirhi wa tinhweti naswona, laha byi tshovekeke kumbe ku kavanyetiwa, byi fanele ku va na minkarhi leyi, loko yi hlanganisiwa, yi nga riki ehansi ka khumembirhi wa tinhweti hi ku angarhela, ku katsa na nkarhi wo wisa lowu nga hundziki nkarhi wa n'hweti yin'we hi lembe, na nkarhi wo wisa wa vuvabyi lowu nga hundziki masiku ya ntirho ya 12 hi lembe, naswona wu fanele ku landzelela swipimelo leswi vekiweke hi huvo ku suka eka nkarhi ku ya eka nkarhi.

(2) Loko ku wisa kumbe ku kavanyetiwa eka vuleteri bya ku dyondzela ntirho , ku nga katsiwi nkarhi wo wisa lowu languteriweke eka xinawanantsongo xa (1) wu tlula nkarhi wa tinhweti tinharhu, nkarhi wa ndzetelo wo dyondzela ntirho emahlweni ka ku wisa kumbe ku kavanyetiwa koloko a wu nge amukeriwi tanihi xiphemu xa vuleteri bya ku dyondzela ntirho lowu hetiweke.

(3) Nkarhi wa khume mbirhi wa tinhweti ta vuleteri bya ku dyondzela ntirho lowu languteriweke eka xinawanantsongo xa (1) wu ta hetiwa ku nga si hela nkarhi wa malembe mambirhi ku sukela hi siku ro tsarisa tanihi mudyondzi.

(4) Loko mudyondzi a nga heti ndzetelo wa yena wo dyondzela ntirho ku nga si hela malembe mambirhi, ku tsarisiwa ka yena hi ku landza Nawu ku fanele ku hela, handle ka loko a nyika huvo swivangelo leswi enerisaka swa leswaku hikokwalaho ka yini ku tsarisiwa ka yena ku fanele ku engeteriwa.

(5) Vuleteri byi ta endliwa hi mudyondzi eka ndhawu leyi pfumeleriweke hi huvo.

(6) Loko ndhawu leyi langutisiweke eka xinawanantsongo xa (5) yi nga ri kona, huvo yi nga, hi ku vona ka yona, pfumelela ndzetelo wun'wana lowu hi ku vona ka huvo wu ringanaka na ndzetelo eka ndhawu leyi pfumeleriweke hi huvo.

(7) Loko yi pfumelela ndzetelo wun'wana hi ku landza xinawanantsongo xa (6) huvo yi nga ha veka leswaku i xiphemu ntsena xa ndzetelo xa mudyondzi loyi a nga ta endliwa eka ndhawu yoleyo, naswona leyi saleke yi ta endliwa eka ndhawu yin'wana leyi pfumeleriweke.

(8) Loko ku dyondzela ntirho eka ndhawu ya vuleteri leyi pfumeleriweke swi tekiwa hi huvo hikwalaho ka xivangelo xihi kumbe xihi tanihi lexi nga ringanelangiki kumbe lexi nga enerisiki, huvo yi nga-

(a) ku thlerisela endzhaku mpfumelelo wa yona wa ndhawu na ku tivisa vadyondzi lava dyondzelaka ntirho eka ndhawu yoleyo hi ku tsala na ku tsundzuxa vadyondzi volavo ku endla vuleteri bya ku dyondzela ntirho eka ndhawu yin'wana ya ndzetelo leyi pfumeleriweke eka nkarhi lowu saleke; kumbe

(b) eka mhaka leyi ku dyondzeriwa ntirho se ku hetiweke hi mudyondzi, kambe swi tekiwa swi nga ringanelanga kumbe swi nga enerisi hi huvo, engetela nkarhi wa ku dyondzeriwa ntirho eka mudyondzi yoloye na ku lava leswaku va hetisa nkarhi lowu engeteriweke eka ndhawu yin'wana ya ndzetelo leyi pfumeleriweke.

Xitifikheti xa ntirho tanihi vumbhoni bya ndzetelo

6. (1) Mudyondzi u fanele, loko a heta vuleteri bya ku dyondzela ntirho , a yisa xitifikheti xa ntirho wo dyondzeriwa hi ndlela leyi enerisaka huvo ku tiyisisa leswaku u endlile vuleteri bya ku dyondzela ntirho hi ndlela leyi enerisaka tani hilaha swi lavekaka hakona hi huvo naswona xitifikheti xolexo xi ta va xiyimo xa le mahlweni xo tsarisa tanihi Muongori wa Vutshila eka xiyenge xa Ntlangu.

(2) Xitifikheti xa ntirho wa ku dyondzeriwa lexi langutisiweke eka xinawanantsongo xa (1) xi fanele ku nyikiwa hi nhloko ya ndhawu ya ndzetelo leyi pfumeleriweke laha mudyondzi a nga endla vuleteri bya ku dyondzela ntirho hi ndlela leyi humelelake.

Swigwevo swa ku tsarisa endzhaku ka nkarhi

7. Laha xikombelo xo tsarisa mudyondzi loyi a nga le ku tirheni loyi a vuriweke eka nawu wa 4 xi rhumeriweke endzhaku ka siku leri boxiweke eka nawu wa 3 , xikombelo xolexo xi fanele ku va ehansi ka mali yihi kumbe yihi leyi tirhaka ya ku tsarisa endzhaku ka nkarhi kuya hi n'hweti kumbe xiphemu xa n'hweti leyi xikombelo xi rhumeriweke ha yona endzhaku ka siku leri vekiweke.

Nhlokomhaka yo koma

8. Swinawana leswi swivuriwa Milawu leyi Fambelanaka na ku Tsarisiwa ka Vuleteri bya Vatshunguri va Vutshila eka Ntlangu, 2026.

DEPARTMENT OF HEALTH

NO. 7782 **7 August 2026**

REGULATIONS REGARDING FEES PAYABLE IN TERMS OF THE PROVISIONS OF THE HAZARDOUS SUBSTANCES ACT, 1973 (ACT No. 15 of 1973)

The Minister of Health intends, in consultation with the Minister of Finance and the South African Health Products Regulatory Authority, in terms of Section 29(1)(r) read together with Section 29(2)(a) and (4) of the Hazardous Substances Act, to make the Regulations in the Schedule.

Interested persons are invited to submit any substantiated comments or representations on the proposed regulations, to the Director-General of Health, Private Bag X828, Pretoria, 0001 (for the attention of the Director: Public Entities and Relations Management, mihloti.mushwana@health.gov.za and paul.tsebe@health.gov.za), within three months of the date of publication of this Notice.

DR PAKISHE AARON MOTSOALEDI, MP
MINISTER OF HEALTH
DATE: 31/7/2026

SCHEDULE

1. Definitions In these Regulations, any word or expression to which a meaning has been assigned in the Act shall bear such meaning and, unless the context otherwise indicates-

"Authority" means the South African Health Products Regulating Authority
"MBq" means Megabecquerel;
"MRI" means Magnetic Resonance Imaging; and
"the Act" means Hazardous Substances Act, 1973, as amended (Act No. 1 of 1973).

Group IV Hazardous Substances

2. The fees payable, for the production, acquisition, disposal, importation and exportation, possession of or use or convey Group IV hazardous substances, for which an application for written authorisation is submitted as contemplated in Section 3A of the Act, are:

(a) In respect of the submission of an application for authorisation to produce, possess, convey, cause to convey, use and distribute, including temporary use per authorisation:
  (i) Category 1: **R41 200.00**
  (ii) Category 2: **R33 000.00**
  (iii) Category 3: **R29 000.00**
  (iv) Category 4: **R14 000.00** and
  (v) Category 5: **R11 200.00**.

(b) In respect of the submission of an application for authorisation to export, import and other activities related to the authorisation, including monthly reporting:
  (i) Once off export authorisation and confirmation: **R1 000.00** per sealed source,
  (ii) Once off export authorisation and confirmation: **R1 000.00** per unsealed source of activity of 370 MBq,
  (iii) Once off import authorisation and confirmation: **R1 300.00** per sealed source,

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(iv) Once off import authorisation and confirmation: **R1 300.00** per unsealed source activity of 370 MBq,

(v) Import and export of open authorisation and confirmation: **R980.00** per sealed source,

(vi) Import and export of open authorisation and confirmation: **R980.00** of unsealed source up to activity of 370 MBq provided that every additional 370 MBq, **R980.00** will be chargeable,

(vii) Transfer of sealed sources (buy/add/loan and sell/discard): **R700.00** per source,

(viii) Transfer of unsealed sources: **R700.00** per 370 MBq and

(ix) Closure of an existing authorisation: **R4 800.00**.

(c) In respect of submission of exchange forms: **R2300.00** per Form.

(d) In respect of the submission of an application to re-issue an existing authorisation or to amend an authorisation approved by the Authority:

(i) Re-issuing of an authorisation: **R1 000.00**,

(ii) Change of office bearers, Radiation Protection Officer, Medical Physicist and other: **R4 000.00**,

(iii) Addition of facility: **R7 000.00** per facility; and

(iv) Increment of an activity: **R3 500.00** per 370 MBq.

(e) In respect of the submission of an application for a certificate relating to a container:

(i) Type container with multilateral approval and type container with uniliteral approval certification: **R19 000.00** and

(ii) Type container with unilatéral approval validation : **R5 000.00**.

(f) Annually, in respect of the returns of an authorisation in accordance with Section 3A of the Act to produce, acquire, dispose, import, and export, possess, use, or convey Group IV hazardous substances: **R 2 150.00** provided that the fee is payable on or before the last working day of June that year, failing which the authorisation given may be revoked.

(g) In respect of the renewal of an authorisation to produce, acquire, dispose, import, and

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export, possess or use or convey Group IV hazardous substances (excluding open authorisation): **R5 300.00**.

Group III Hazardous Substances

3. Fees payable for licences to sell, let, use, operate and install any group III hazardous substances as contemplated in terms of section 4 of the Act, are as follows:

(a) An application for a new licence for a Group III hazardous substance, in terms of Section 4(1)(b) of the Act, per product:
- (i) Import/Manufacture licence of a listed medical electronic product: **R11 700.00**,
- (ii) Import/Manufacture licence of a listed non-medical electronic product: **R8 600.00** and
- (iii) Export licence (medical/non-medical product): **R8 600.00**.

(b) An application for a new licence to install and the use of electronic generators for medical purposes, in terms of Section 4(1)(b) and (c) of the Act per product:
- (i) Class 3B and 4 lasers: **R19 400.00,**
- (ii) MRI: **R27 000.00**,
- (iii) Computed Tomography Scanner: **R27 000.00**,
- (iv) Mammography, interventional radiology, or fluoroscopy: **R9 000.00**,
- (v) Conventional radiology: **R7 000.00**,
- (vi) Dental radiology and bone dental scans: **R6 200.00** and
- (vii) Component: **R4 100.00**.

(c) Application for new licence to install and use any electronic product for medical purposes, employing radioactive nuclides: **R27 000.00**.

(d) An application for a new licence to install and use of electronic generators for non-medical purposes, in terms of Section 4(1)(b) and (c) of the Act per product:
- (i) Industrial and veterinary radiology: **R7 000.00**,
- (ii) Well loggings: **R18 900.00**,
- (iii) X-ray irradiators, Cargo scanners, Whole body scanners: **R33 000.00**,

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(iv) Class 3B and 4 lasers: **R19 400.00**,

(v) MRI: **R27 000.00**,

(vi) CT Scanner: **R27 000.00** and

(vii) Component: **R4 100.00**.

(e) An application for a new licence to install and use of electronic generators of X-Ray and particle accelerator products, in terms of Section 4(1)(b) and (c) of the Act per product:

(i) Therapeutic machine: **R43 000.00**,

(ii) Cyclotron: **R43 000.00**.

(f) An application for the movement or exchange of an existing product licenced in terms of Section 4(1)(b) and (c) of the Act:

(i) Movement or exchange of products in section 3(b)(i-vi) and (d)(i-vi): **R2 300.00** and

(ii) Dental X-ray: **R2 000.00**.

(g) An application for the discontinuation, modification, or disposal of an existing product licenced in terms of Section 4(1)(b) and (c) of the Act: **R7 000.00**.

(h) In respect of the submission of an application to re-issue an existing or to amend an existing Licence approved by the Authority:

(i) Re-issuance of a licence: **R1 000.00** and

(ii) Amendment of a licence: **R4 000.00**.

(i) Annual submission of information compliance per licenced product: **R220.00** per product for applications under Section 3 (a) in terms of section 5 of the Act.

(j) An application for the renewal of the products licenced in Section 3(b-d), with renewal dates ranging from 1 to 5 years since its issuance, in terms of Section 5 of the Act: **R5 300.00**.

(k) In respect of the issuance of a letter, permit, or a certificate:

(i) Non-radioactive certificate: **R4 100.00** and

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(ii) Non licensable letters or inspection body certificate: **R4 700.00**.

Fees payable for inspections

4. Payable fees payable for inspections not relating to the issuing a licence are:

(a) The charge out rate per inspector will amount to **R1 700.00 per** hour per inspector for all scheduled inspections conducted that do not relate to the issuing or renewal of a licence, the inspection hours and travel time will be charged for in accordance with the applicable guideline; and

(b) Desktop inspection after licence amendments: **R2 300.00** per day per inspector.

Forfeiture and disposal of goods recovery

5. The fees payable for anything forfeited under Section 21(1) of the Act:

(a) Cost relating to the appointed inspector to oversee the disposal: **R34 000.00** and

(b) Actual cost of storage and disposal to be recovered from the offender.

Penalties

6. (1) The following are fines for the production, acquisition, disposal, importation and exportation, possession of or use or convey Group IV hazardous substances without an approved written authorisation in accordance with Section 3A of the Act:

(a) Category 1-2: **R162 500.00**,

(b) Category 3-5: **R115 000.00**,

(c) Import and export: **R50 000.00**,

(d) Source transfers, exchange forms, disposal, or closure: **R21 000.00**,

(e) None or late submission of monthly reports: **R22 000.00**,

(f) Non submission of amendments to existing authorisations: **R16 500.00**,

(g) Non-renewal, fraudulent documents, or annual return submission: **R28 500.00** and

(h) Failure to report in line with the requirements: **R68 000.00**.

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(2) The following are fines for operating without a licence to sell, let, use, operate and instal in accordance with Section 4(1)(b)(c):

(a) Medical importations: **R58 500.00**,

(b) Non-medical importation: **R45 000.00** and

(c) Other use licences: **R100 000.00**.

(3) The following are fines for operating without a licence in accordance with Section 4(1)(b)(c) for:

(a) Medical installations and use: **R115 000.00**,

(b) Non-Medical installations and use: **R100 000.00**,

(c) Movement, exchange, and discontinuation: **R78 500.00**,

(d) Non submission for the amendment of an existing licence**: R20 500.00**,

(e) Non submission to renew and existing licence: **R28 500.00** and

(f) Failure to report in line with the requirements: **R68 000.00**.

Appeal against the decision of the Authority.

7. Fee payable in respect of an application in terms of Section 24 (3): **R54 180.00** per application.

Short title

8. These Regulations are called Regulations regarding Fees Payable in terms of the provisions of the Hazardous Substances Act, 1973 (Act No. 15 of 1973), 2026.

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DEPARTMENT OF JUSTICE AND CONSTITUTIONAL DEVELOPMENT

NO. 7783 **7 August 2026**

MAINTENANCE ACT, 1998 (ACT NO. 99 0F 1998)
AMENDMENT OF REGULATIONS RELATING TO MAINTENANCE

I, Mmamoloko Tryphosa Kubayi, Minister of Justice and Constitutional Development, has under section 44 of the Maintenance Act, 1998 (Act No. 99 of 1998), made the regulations in the Schedule.

Given under my hand at Pretoria on 10 day of July 2026

Ms MT Kubayi, MP
Minister of Justice and Constitutional Development

SCHEDULE

Definitions

1. In this Schedule "the Regulations" means the Regulations relating to Maintenance published under Government Notice No. R. 1361 of 15 November 1999, as amended by Government Notices No's. R. 1099 of 3 November 2006, R. 966 of 6 September 2017 and R. 1473 of 21 December 2017.

Amendment of regulation 12 of the Regulations

2. Regulation 12 of the Regulations is hereby amended by the substitution for subregulation (1) in the Regulations of the following subregulation:

"(1) Upon the variation or setting aside of an order contemplated in section 19 of the Act, the maintenance officer shall, inform—

(a) the person required to make a payment in terms of the maintenance order;

(b) the person in whose favour the maintenance order has been made; and

(c) the person on whom a notice referred to in section 16(3)*(a)* of the Act has been served,

of the variation or the setting aside of the order by a notice which shall substantially correspond with Form J of the Annexure, and in the event of a variation order, attach a copy of that order to the notice.

(2) The maintenance officer shall keep record of the manner in which the notice referred to in subregulation (1) or (2) was submitted.".

Amendment of Form J to the Annexure to the Regulations

3. The Annexure to the Regulations is hereby amended by the amendment of Form J:

"FORM J
[Regulation 12]
REQUEST FOR VARIATION OF MAINTENANCE ORDER IN TERMS OF S19 OF THE MAINTENANCE ACT, 1998 (ACT NO. 99 OF 1998)

Reference No: _____

In the maintenance matter between:

_____ Applicant

and

_____ 1st Respondent
(Person against whom maintenance order was made)

_____ 2nd Respondent
(Financial institution or person having the funds due to the respondent)

_____

To the Magistrate of the Maintenance Court, _____

1. I, _____
(Full names of person, MAINTENANCE OFFICER.)

Persal :_____hereby request for variation of the order dated (DD-MM-YYYY)_____**(copy of duly served order is attached).**

2. The reason for the request for variation is based on the following:

_____
_____
_____
_____
_____

3. In support of my request, I hereby attach a copy of the maintenance order **[*declare under oath/truly affirm that]** in terms of section 19 of the Act, a Maintenance Court that has made an order in terms of section 16(1)*(a)*(i) or *(b)*(i) may vary such order by changing the _____
_____
_____
_____
_____.

Dated at _____ this ___ day of_____20_____

_____(Signature)
Maintenance Officer

PART B: CERTIFICATION

I certify that before administering the *oath/affirmation I asked the Deponent the following questions and noted *his/her answers in * his/her presence as indicated below.

(a) Do you know and understand the contents of the above declaration?
Answer: Yes/No.
(b) Do you have any objection to taking the prescribed oath?
Answer: No/Yes.
(c) Do you consider the prescribed oath to be binding on your conscience?
Answer: Yes/No

I certify that the Deponent has acknowledged that he/she knows and understands the contents of this declaration. The deponent uttered the following words *"I swear that the contents of the declaration are true, so help me God." / "I truly affirm that the contents of the declaration are true." The signature/mark of the deponent was affixed to the declaration in my presence.

_____
Commissioner of Oaths

Full Names and Surname (block letters): _____
Designation (rank) : _____
Business Address (street address must be stated):_____

Dated at _____ this _____ day of _____20_____

*Delete whichever is not applicable"

Short title

4. These regulations are called the Amendment of Regulations Relating to Maintenance, 2026.

NON-GOVERNMENTAL ORGANIZATION

NO. 7784 **7 August 2026**

Notification in the Government Gazette

Re-application for derogation for the restricted use of an agricultural remedy identified as a substance of concern and addressing previous comments.

This notice is to inform the public of an administrative action being taken in relation to the approval of an agricultural remedy under the Fertilizer, Farm Feeds, Agricultural Remedies and Stock Remedies Act (Act No. 36 of 1947). AECI® Limited, with registration details below, hereby inform the public of their intention to re-submit an application for derogation for the registered agricultural remedy containing Glufosinate-ammonium 200 g/L. The re-application for derogation meets the criteria as per the Regulation 8(6), as outlined in the Derogation Guideline, 2024.

REGISTRATION HOLDER	Trade name and registration number	Website
AECI® Limited Co. Reg. No. 1924/002590/06	Knersus 200 SL (Reg. No. L10631, Act No. 36 of 1947)	www.aeciph.com

The active ingredient, Glufosinate-ammonium was identified as a substance of concern due to its classification as a Reproductive Toxicity Category 1B according to the Globally Harmonized System of Classification and Labelling of Chemicals; and the Derogation re-application is applied for the following restricted uses, and for a specific period only, in South Africa. Approval is sought as indicated, to provide a solution to farmers, since no suitable registered alternative product is currently available.

- Restricted use as indicated on the label to control weeds in **Vineyards** and **Citrus,** by ground application only
- A minimum period of 2 years to continue sales and its use, **or** until an alternative product has been registered
- In a survey involving Crop Advisers and Crop Producers, it became evident that no suitable alternative product is currently available, to combat resistance
- The Risk Assessment Version 8.0 for **Knersus 200 SL**, focusses on the earlier comments received

CONTINUES ON PAGE 130 OF BOOK 2

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Government Gazette
Staatskoerant

REPUBLIC OF SOUTH AFRICA
REPUBLIEK VAN SUID AFRIKA

Vol. 734 7 August / Augustus 2026 No. 55152

PART 2 OF 2

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AIDS HELPLINE: 0800-0123-22 Prevention is the cure

The following "Warnings" have been included to the **Knersus 200 SL** label, if the derogation is granted to ensure maximum safety during the use of **Knersus 200 SL**:

- Not for sale to or use by residential gardeners.
- **THIS REMEDY IS RESTRICTED DUE TO ITS CMR CLASSIFICATION 1B. THIS REMEDY MAY ONLY BE SOLD TO AND USED BY A REGISTERED PEST CONTROL OPERATOR, OR BY SOMEONE UNDER THE SUPERVISION OF A REGISTERED PEST CONTROL OPERATOR, AND ONLY FOR THOSE USES COVERED BY THE PEST CONTROL OPERATOR'S SCOPE OF REGISTRATION, AND ONLY AS DIRECTED ON THIS LABEL.**
- Mixing of the treatment solution in accordance with the "mixing instructions" on the **Knersus 200 SL label**.
- Personal protection instructions on the Safety Data Sheet must be followed, including washing hands, forearms and face thoroughly after handling **Knersus 200 SL**.
- The baseline Personal Protective Equipment (PPE) must be worn when applying **Knersus 200 SL**, including single layered clothing covering the arms and legs, closed shoes and chemical-resistant gloves as well as eye protection, viz., safety goggles.
- **RESTRICTED-ENTRY INTERVAL (REI)**
  The recommended 12 hours post application for all activities, with the exception of:
  2-days to move irrigation pipes in irrigated crops.

As per the requirements of the "Regulations relating to agricultural remedies" of August 2023, the Toxicological Risk Assessment has been conducted for the restricted end-uses during a specific time period only, and the public is hereby invited to review the Toxicological Risk Assessment Version 8.0 and submit comments in relation to the proposed re-application. This report can be accessed online available through our www.aeciph.com website or in hard copy at the Department of Agriculture (20 Steve Biko Street, Agriculture Building, Arcadia, Pretoria, 0002) during office hours (08:00 to 16:00 on Mondays to Fridays, excluding public holidays).

Mr. Maluta Mudzunga

The Registrar: Fertilizer, Farm Feeds, Agricultural Remedies and Stock Remedies, 1947 (Act no. 36 of 1947), Department of Agriculture

Private Bag X343, Pretoria, 0001

30 Hamilton Street, Harvest House Building, Office 417, Arcadia, Pretoria, 0002

Tel No: 012 319 6530

Email to: malutam@nda.gov.za

Interested parties must submit comments or objections in relation to this re-application within 30 days of the publication of this notice. Comments received after this date need not be considered.

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AMENDING GOVERNMENT NOTICE, NO:5687 OF 2024 IN THE GOVERNMENT GAZETTE NO: 51774 DATED 20 DECEMBER 2024

AMENDMENT NOTICE INTERMS OF SECTION 11A {4} OF THE RESTITUTION OF LAND RIGHTS ACT 1994 [ACT 22 OF 1994] AS AMENDED.

Notice is hereby given in terms of **Section 11A [4] of the Restitution of the Land Rights Act 1994 [Act 22 of 1994] as amended**, that the **Commissioner for Restitution of Land Rights** is amending the said Gazette Notice due to the fact that the Nkosi family land claim does not extend to Portion 2 of the farm as previously published and to record the change in details of the registered land owner of the property subject to the claim. The correct details of the Nkosi Family land claim situated in Mkhondo **Local Municipality** under **Gert Sibande District** in the **Mpumalanga Province. Krp no.1723** are set out hereunder.

CURENT PARTICULARS OF THE PROPERTY
EDINBURGH 439 IT

Description of property	Owner of Property	Title Deed Number	Extent of Property	Bonds	Bond Holder	Other Endorsements
REMAINING EXTENT OF THE FARM EDINBURGH 439 IT [195100318006]	SAPPI SOUTHERN AFRICA LTD	T8952/2024	630.8658 ha (22.7674 ha affected by the claim)	NONE	NONE	I-2040/976MN-4567/13 K2019/1997S K264/1982S K2899/1974L in favour of Creydt Norman Bodo K6618/1992S

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
Private Bag X 11330
Nelspruit
1200
or 30 Samora Machel Drive
Restitution House
Nelspruit
1200

MR. L. H. MAPHUTHA
COMMISSIONER FOR RESTITUTION OF LAND RIGHTS
DATE: 17/06/26

DEPARTMENT OF RURAL DEVELOPMENT AND LAND REFORM

NO. 7786 **7 August 2026**

AMENDMENT OF NOTICE NO 1090 OF 2005

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

Notice is hereby given in terms of section 11A (4) of the Restitution of Land Rights Act, 1994 (Act No. 22 of 1994 as amended) for the Amendment of the Gazette Notice 1090 of Government Gazette No. 27735 of 8 July 2005 are as follows:

1. Reference No : MN 005 & DD 079
2. Claimant : Chief Noto Andrew Moshoete
3. Property description: De Hoop 169 IO, Portions of Gannalaagte No 5 IO, Portions of Gannapan 11 IO, Witpan 126 IO, Deelpan 106 IO, Leeuwpan 279 IO, Mariba 171 IO, remaining extent of Nooitgedacht 127 IO, Portion 0 and Portion 1 of Barberspan 309 IO, Doornlaagte 123 IO, Mooipan 104 IO, Portions 3 and 26 Of Vaalplats 108 IO (Youngsbury)

REF NO.	CLAIMANT	PROPERTY	PORTIONS	DISTRICT
MN 005 & DD 079	Chief Noto Andrew Moshoete	Barberspan 309 IO	0,3,4,5,6,7,8,9,10,13,14,15,16,20,21,22, 23,24,25,26,27,31,36,38,40,41,47,48,49 & 50	Ngaka Modiri Molema District
		De Hoop 169 IO	0, 1,3,4,5,6,7,8,9,10 &11	
		Deelpan 106 IO	0,1,2,3,4,5,6,7,8&9	
		Doornaalgte IO	0,1,2,3,4,5 & 6	
		Gannalaagte 5 IO	R/E, 2 & 9	
		Gannapan 11 IO	40 & 41	
		Leeuwpan 279 IO	0,1,2,3,4,5,6,7,8,9,10,11,12,13 & 14	
		Mariba 171 IO	0,1,2,3,4,5,7,8,9,10,11 &12	

nal Only - DLRRD Employees

		Mooipan 104 IO	0 & 1	
		Nooitgedacht 127 IO	0, 3,4 & 5	
		Vaalplaats 108 IO	3 & 26	
		Witpan 126 IO	0,1,2,4,5,6 & 7	

Any person/party who has an interest in the above-mentioned land is hereby invited to make his/her submission within 90 (Ninety) days from the publication of this notice, any comments/information to:

The Regional Land Claims Commissioner: North-West
Private Bag X 8
MMABATHO
2735

Tel: (018) 388 7000
Fax:

MR L.H MAPHUTHA
REGIONAL LAND CLAIMS COMMISSIONER
DATE: 2026/07/15

MR V TITIES
OFFICE OF THE REGIONAL LAND CLAIMS COMMISSIONER: NW
DATE : 2026/06/09

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SOUTH AFRICAN REVENUE SERVICE

NO. 7787 **7 August 2026**

FEES PAYABLE BY AN APPLICANT IN AN APPLICATION FOR A DTA ADVANCE PRICING AGREEMENT IN TERMS OF SECTION 76D OF THE INCOME TAX ACT, 1962 (ACT NO. 58 OF 1962)

In terms of section 76D of the Income Tax Act, 1962, I, Ngobani Johnstone Makhubu, Commissioner for the South African Revenue Service, hereby prescribe in the attached Schedule, the fees payable by an applicant in an application for a DTA advance pricing agreement.



N J MAKHUBU

COMMISSIONER FOR THE SOUTH AFRICAN REVENUE SERVICE

Schedule

1. General

Any term or expression in this notice to which a meaning has been assigned in a "tax Act" as defined in section 1 of the Tax Administration Act, 2011 (Act No. 28 of 2011), has the meaning so assigned, unless the context indicates otherwise.

2. Fees payable by an applicant in an application for a DTA advance pricing agreement

The following fees are payable by an applicant in an application for a DTA advance pricing agreement:

2.1 Pre-application consultation fee

A prospective applicant must pay a pre-application consultation fee of R100 000, which must be paid within seven days of the date of the invoice that is issued in accordance with section 76D(2) of the Income Tax Act.

2.2 Cost recovery fees

2.2.1 The eligible applicant must pay a cost recovery fee of R1 000 000 towards the processing of the application for a DTA advance pricing agreement.

2.2.2 A deposit of R200 000 in respect of the cost recovery fees under paragraph 2.2.1 must be paid within seven days of the date of the invoice that is issued in accordance with section 76D(2) of the Income Tax Act.

2.2.3 In accordance with section 76J(2), SARS must invoice the applicant for the remaining R800 000 at 90-day intervals, comprising eight equal instalments, each of which must be paid within seven days of the date of the invoice that is issued in accordance with section 76D(2).

2.2.4 Where necessary, and in consultation with the applicant, an additional amount may be charged to recover any ancillary costs in relation to the application for a DTA advance pricing agreement.

2.3 Fees associated with amending an application for a DTA advance pricing agreement

Where the applicant requires an amendment to an application for a DTA advanced pricing agreement, the applicant must pay an additional cost recovery fee in terms of section 76D(1)*(c)* of the Income Tax Act that is invoiced in terms of section 76D(2). The additional cost recovery fee for the amendment

of a DTA advance pricing agreement will be determined with reference to the facts and circumstances of the case.

2.4 Fees associated with the maintenance of an existing DTA advance pricing agreement

Once a DTA advance pricing agreement has been concluded or extended, a fee of R100 000 per annum to maintain a DTA advance pricing agreement must be paid by the applicant to SARS within seven days of the date of the invoice that is issued in accordance with section 76D(2) of the Income Tax Act.

2.5 Fees associated with the extension of an existing DTA advance pricing agreement

2.5.1 Where the applicant seeks an extension of an existing DTA advance pricing agreement, SARS must communicate the associated costs to the applicant for considering and processing the extension.

2.5.2 The fees for the extension of the DTA advance pricing agreement will be based on the facts and circumstances of the case. These fees will not exceed the cost recovery fee for an initial application and must be paid within seven days of the date of the invoice issued in accordance with section 76D(2) of the Income Tax Act.

2.6 Any fee charged by SARS in the administration of the APA programme is not refundable.

2.7 Interest will be charged at the official rate on late payments.

3. Commencement

This Notice will apply to all applications for a DTA advance pricing agreement received on or after the date of publication of this Notice in the Government *Gazette*.

SUID-AFRIKAANSE INKOMSTEDIENS

NO. 7787 **7 Augustus 2026**

FOOIE BETAALBAAR DEUR ’N AANSOEKER IN ’N AANSOEK OM ’N DBO VOORAFPRYSOOREENKOMS INGEVOLGE ARTIKEL 76D VAN DIE INKOMSTEBELASTINGWET, 1962 (WET NO. 58 VAN 1962)

Ingevolge artikel 76D van die Inkomstebelastingwet, 1962, bepaal ek, Ngobani Johnstone Makhubu, Kommissaris vir die Suid-Afrikaanse Inkomstediens, hiermee in die aangehegte Bylaag, die fooie betaalbaar deur ’n aansoeker in ’n aansoek om ’n DBO voorafprysooreenkoms.

N J MAKHUBU
KOMMISSARIS VIR DIE SUID-AFRIKAANSE INKOMSTEDIENS

Bylaag

1. Algemeen

Enige woord of uitdrukking in hierdie kennisgewing vervat waaraan ’n betekenis geheg is in ’n “Belastingwet” soos in artikel 1 van die Wet op Belastingadministrasie, 2011 (Wet No. 28 van 2011) omskryf, dra die betekenis aldus daaraan geheg, tensy die samehang andersins aandui.

2. Fooie betaalbaar deur ’n aansoeker in ’n aansoek om ’n DBO voorafprysooreenkoms

Die volgende fooie is betaalbaar deur ’n aansoeker in ’n aansoek om ’n DBO voorafprysooreenkoms:

2.1 Voor-aansoek konsultasie fooi

’n Voornemende aansoeker moet ’n voor-aansoek konsultasiefooi van R100 000 betaal, wat binne sewe dae vanaf die datum van die faktuur uitgereik kragtens artikel 76D(2) van die Inkomstebelastingwet, betaalbaar is.

2.2 Kosteverhalingsfooi

2.2.1 Die kwalifiserende aansoeker moet ’n kosteverhalingsfooi van R1 000 000 ten aansien van die verwerking van die aansoek om ’n DBO voorafprysooreenkoms, betaal.

2.2.2 ’n Deposito van R200 000 ten opsigte van die kosteverhalingsfooi in paragraph 2.2.1 moet binne sewe dae vanaf die datum van die faktuur uitgereik kragtens artikel 76D(2) van die Inkomstebelastingwet, betaal word.

2.2.3 Ingevolge artikel 76J(2), moet SAID die aansoeker faktureer vir die oorblywende R800 000 op 90-dae intervalle, wat bestaan uit agt gelyke paaiemente, elk betaalbaar binne sewe dae van die datum van die faktuur kragtens artikel 76D(2), uitgereik.

2.2.4 Waar nodig, en in konsultasie met die aansoeker, kan ’n addisionele bedrag gehef word om enige bykomende koste met betrekking tot die aansoek om ’n DBO voorafprysooreenkoms, te verhaal.

2.3 Fooie wat verband hou met die wysiging van ’n aansoek om ’n DBO voorafprysooreenkoms

Waar die aansoeker ’n wysiging tot die DBO voorafprysooreenkomsaansoek benodig, moet die aansoeker ’n addisionele kosteverhalingsfooi ingevolge artikel 76D(1)*(c)* van die Inkomstebelastingwet betaal wat gefaktureer is ingevolge artikel 76D(2). Die addisionele

kosteverhalingsfooi vir die wysiging van ’n voorafprysooreenkoms sal bepaal word met verwysing na die feite en omstandighede van elke geval.

2.4 Fooie wat verband hou met die instandhouding van ’n bestaande DBO voorafprysooreenkoms

Sodra ’n DBO voorafprysooreenkoms afgehandel of verleng is, moet die aansoeker ’n fooi van R100 000 per annum aan SAID betaal, binne sewe dae vanaf die datum van die faktuur uitgereik kragtens artikel 76D(2) van die Inkomstebelastingwet, om die DBO voorafprysooreenkoms instand te hou.

2.5 Fooie wat verband hou met die verlenging van ’n bestaande DBO voorafprysooreenkoms

2.5.1 Waar die aansoeker ’n verleninging van ’n bestaande DBO voorafprysooreenkoms versoek, moet SAID die kostes verbonde aan die oorweging en verwerking van die verlenging aan die aansoeker meedeel.

2.5.2 Die fooie vir die verlenging van die DBO voorafprysooreenkoms sal op die feite en omstandighede van die geval basseer word. Hierdie fooie sal nie die kosteverhalingsfooi vir ’n aanvanklike aansoek oorskry nie, en moet binne sewe dae vanaf die datum van die faktuur uitgereik kragtens artikel 76D(2) van die Inkomstebelastingwet betaal word.

2.6 Enige fooi deur SAID gehef in die administrasie van die VPO-program is nie terugbetaalbaar nie.

2.7 Rente sal teen die amptelike koers op laat betalings gehef word.

3. Inwerkingtreding

Hierdie Kennisgewing sal op alle aansoeke om ’n DBO voorafprysooreenkoms ontvang op of na die datum van publikasie van hierdie Kennisgewing in die *Staatskoerant* van toepassing wees.

SOUTH AFRICAN REVENUE SERVICE

NO. 7788 **7 August 2026**

PERSONS ELIGIBLE TO APPLY TO THE COMMISSIONER FOR A DTA ADVANCE PRICING AGREEMENT IN TERMS OF SECTION 76C OF THE INCOME TAX ACT, 1962 (ACT NO. 58 OF 1962)

In terms of section 76C of the Income Tax Act, 1962, I, Ngobani Johnstone Makhubu, Commissioner for the South African Revenue Service, hereby prescribe in the attached Schedule, the persons eligible to apply to the Commissioner for a DTA advance pricing agreement.



N J MAKHUBU

COMMISSIONER FOR THE SOUTH AFRICAN REVENUE SERVICE

Schedule

1. General

Any term or expression in this notice to which a meaning has been assigned in a "tax Act", as defined in section 1 of the Tax Administration Act, 2011 (Act No. 28 of 2011), has the meaning so assigned, unless the context indicates otherwise.

2. Persons eligible to apply for a DTA advance pricing agreement

A person who is a party to an affected transaction, or contemplating entering into an affected transaction, is eligible to apply to SARS for a DTA advance pricing agreement, provided that—

2.1 the person had a turnover in excess of R10 billion in the year of assessment preceding the year of assessment in which the person requests a pre-application consultation meeting;

2.2 the affected transaction is in relation to the following functions:

2.2.1 distribution;

2.2.2 manufacturing; or

2.2.3 intragroup services;

2.3 the affected transaction does not constitute financial assistance, and does not constitute or result in the creation of intangible property;

2.4 the value of the affected transaction for each of the years of assessment in section 76K(5) of the Income Tax Act is expected to exceed:

2.4.1 R1 billion for a distribution or manufacturing function; or

2.4.2 R300 million for intragroup services;

2.5 the person is tax compliant to the extent referred to in section 256(3) of the Tax Administration Act; and

2.6 the person is a "resident" as defined in section 1 of the Income Tax Act..

Despite a person meeting the above requirements, SARS retains a discretion, based on the nature of the affected transaction, the industry in which the person operates, and the available resources at SARS, to accept or reject the application for a DTA advance pricing agreement.

3. Commencement

This Notice will apply to all applications for a DTA advance pricing agreement received on or after the date of publication of this Notice in the Government *Gazette*.

SUID-AFRIKAANSE INKOMSTEDIENS

NO. 7788 **7 Augustus 2026**

PERSONE WAT KWALIFISEER OM AANSOEK TE DOEN BY DIE KOMMISSARIS OM 'N DBO VOORAFPRYSOOREENKOMS INGEVOLGE ARTIKEL 76C VAN DIE INKOMSTEBELASTINGWET, 1962 (WET NO. 58 VAN 1962)

Ingevolge artikel 76C van die Inkomstebelastingwet, 1962, bepaal ek, Ngobani Johnstone Makhubu, Kommissaris vir die Suid-Afrikaanse Inkomstediens, hiermee in die aangehegte Bylaag, die persone wat kwalifiseer om aansoek te doen by die Kommissaris om 'n DBO voorafprysooreenkoms.

N J MAKHUBU

KOMMISSARIS VIR DIE SUID-AFRIKAANSE INKOMSTEDIENS

Bylaag

1. Algemeen

Enige woord of uitdrukking in hierdie kennisgewing vervat waaraan ’n betekenis geheg is in ’n “Belastingwet” soos in artikel 1 van die Wet op Belastingadministrasie, 2011 (Wet No. 28 van 2011) omskryf, dra die betekenis aldus daaraan geheg, tensy die samehang andersins aandui.

2. Persone wat kwalifiseer om aansoek te doen om ’n DBO voorafprysooreenkoms

’n Persoon wat ’n party tot ’n geaffekteerde transaksie is, of beoog om ’n geaffekteerde transaksie aan te gaan, kwalifiseer om aansoek te doen by SAID om ’n voorafprysooreenkoms, met dien verstande dat—

2.1 die persoon ’n omset van groter as R10 biljoen gehad het in die jaar van aanslag, wat die jaar van aanslag waarin die persoon die voor-aansoek konsultasie versoek het, voorafgegaan het;

2.2 die geaffekteerde transaksie met betrekking tot die volgende funksies is:

2.2.1 distribusie;

2.2.2 vervaardiging; of

2.2.3 intragroepdienste;

2.3 die geaffekteerde transaksie nie finansiele ondersteuning daarstel nie, en nie die skepping van ontasbare eiendom daarstel of tot gevolg het nie;

2.4 die waarde van die geaffekteerde transaksie vir elkeen van die jare van aanslag in artikel 76K(5) van die Inkomstebelastingwet, verwag word om te oorskry:

2.4.1 R1 biljoen vir ’n distribusie- of vervaardigingsfunksie; of

2.4.2 R300 miljoen vir intragroepdienste;

2.5 die persoon belastingnakomend is tot die mate in artikel 256(3) van die Wet op Belastingadministrasie bedoel; en

2.6 die persoon is ’n “inwoner” soos in artikel 1 van die Inkomstebelastingwet omskryf.

Behoudens dat ’n persoon bogemelde vereistes nakom, behou SAID ’n diskresie, gebaseer op die aard van die geaffekteerde transaksie, die industrie waarbinne die persoon funksioneer, en die beskikbare hulpbronne by SAID, om die aansoek om ’n DBO voorafprysooreenkoms te aanvaar of te verwerp.

3. Inwerkingtreding

Hierdie Kennisgewing sal op alle aansoeke om ’n DBO voorafprysooreenkoms ontvang op of na die datum van publikasie van hierdie Kennisgewing in die *Staatskoerant* van toepassing wees.

SOUTH AFRICAN REVENUE SERVICE

NO. 7789 **7 August 2026**

REJECTION OF AN APPLICATION FOR A DTA ADVANCE PRICING AGREEMENT IN TERMS OF SECTION 76I*(b)* OF THE INCOME TAX ACT, 1962 (ACT NO. 58 OF 1962)

In terms of section 76I*(b)* of the Income Tax Act, 1962, I, Ngobani Johnstone Makhubu, Commissioner for the South African Revenue Service, hereby prescribe in the attached Schedule, the additional requirements that will lead to the rejection of an application for a DTA advance pricing agreement.



N J MAKHUBU
COMMISSIONER FOR THE SOUTH AFRICAN REVENUE SERVICE

Schedule

1. General

Any term or expression in this notice to which a meaning has been assigned in a "tax Act", as defined in section 1 of the Tax Administration Act, 2011 (Act No.28 of 2011), has the meaning so assigned, unless the context indicates otherwise.

2. Additional requirements for the rejection of an application for a DTA advance pricing agreement.

In addition to section 76I(a) of the Income Tax Act, SARS will reject an application for a DTA advance pricing agreement in the following circumstances:

2.1 The proposed DTA advance pricing agreement would not reflect the economic reality of the affected transaction.

2.2 The application requires SARS to consider the legal form of an affected transaction without taking the substance of the affected transaction into account.

2.3 An affected transaction appears to lack commercial substance or is entered into primarily to avoid tax.

2.4 The application involves the interpretation of a general or specific anti-avoidance provision or doctrine.

2.5 The application is in respect of an issue that is the same as, or substantially similar to, an issue that is subject to—

2.5.1 a proposed amendment to a tax Act that has been published;

2.5.2 dispute resolution under Chapter 9 of the Tax Administration Act or an Article in an agreement for the avoidance of double taxation; or

2.5.3 a voluntary disclosure program application by the applicant.

2.6 The application pertains to the tax consequences of affected transactions contained in any other agreement which has already been concluded with SARS.

2.7 The application differs materially from the details provided during the pre-application consultation stage.

2.8 The application is submitted for academic purposes.

2.9 The application is in respect of a frivolous or vexatious issue.

2.10 The applicant fails or refuses to provide additional information requested by SARS.

2.11 The applicant does not pay the prescribed fees in section 76D of the Income Tax Act.

2.12 The competent authority of the other country does not want to be party to the DTA advance pricing agreement.

2.13 The applicant is not tax compliant to the extent referred to in section 256(3) of the Tax Administration Act.

3. Commencement

This Notice will apply to all applications for a DTA advance pricing agreement received on or after the date of publication of this Notice in the Government *Gazette.*

SUID-AFRIKAANSE INKOMSTEDIENS

NO. 7789 **7 Augustus 2026**

VERWERPING VAN ’N AANSOEK OM ’N DBO VOORAFPRYSOOREENKOMS INGEVOLGE ARTIKEL 76I*(b)* VAN DIE INKOMSTEBELASTINGWET, 1962 (WET NO. 58 VAN 1962)

Ingevolge artikel 76I*(b)* van die Inkomstebelastingwet, 1962, bepaal ek, Ngobani Johnstone Makhubu, Kommissaris vir die Suid-Afrikaanse Inkomstediens, hiermee in die aangehegte Bylaag, die addisionele vereistes wat tot die verwerping van ’n aansoek om ’n DBO voorafprysooreenkoms sal lei.

N J MAKHUBU
KOMMISSARIS VIR DIE SUID-AFRIKAANSE INKOMSTEDIENS

Bylaag

1. Algemeen

Enige woord of uitdrukking in hierdie kennisgewing vervat waaraan ’n betekenis geheg is in ’n “Belastingwet” soos in artikel 1 van die Wet op Belastingadministrasie, 2011 (Wet No. 28 van 2011) omskryf, dra die betekenis aldus daaraan geheg, tensy die samehang andersins aandui.

2. Addisionele vereistes vir die verwerping van ’n aansoek om ’n DBO voorafprysooreenkoms

Bykomend tot artikel 76I*(a)* van die Inkomstebelastingwet, sal SAID ’n aansoek om ’n voorafprysooreenkoms onder die volgende omstandighede verwerp:

2.1 Die voorgestelde DBO voorafprysooreenkoms sal nie die ekonomiese realiteit van die geaffekteerde transaksie weerspieël nie.

2.2 Die aansoek vereis SAID om die regsvorm van ’n geaffekteerde transaksie te oorweeg sonder om die inhoud van die geaffekteerde transaksie in ag te neem.

2.3 Die geaffekteerde transksie blyk ’n gebrek aan kommersiële inhoud te hê of is hoofsaaklik aangegaan om belasting te vermy.

2.4 Die aansoek die vertolking van ’n algemene of spesifieke teenvermydingsbepaling of -leerstelling, behels.

2.5 Die aansoek is ten aansien van ’n aangeleentheid wat soortgelyk is aan, of wesenlik soorgelyk is aan ’n aangeleentheid wat onderhewig is aan—

2.5.1 ’n voorgestelde wysiging tot ’n Belastingwet wat gepubliseer is;

2.5.2 geskilbeslegting kragtens Hoofstuk 9 van die Wet op Belastingadministrasie of ’n Artikel in ’n ooreenkoms vir die vermyding van dubbelbelasting; of

2.5.3 a vrywillige blootleggingsprogramaansoek deur die aansoeker.

2.6 Die aansoek hou verband met die belastinggevolge van geaffekteerde transaksies vervat in enige ander ooreenkoms wat alreeds met SAID gesluit is.

2.7 Die aansoek verskil wesenlik van die details voorsien tydens die voor-aansoek konsultasie fase.

2.8 Die aansoek is ingedien vir akademiese redes.

2.9 Die aansoek is ten opsigte van ’n beuselagtige of kwelsugtige aangeleentheid.

2.10 Die aansoeker versuim of weier om addisionele inligting vereis deur SAID te verskaf.

2.11 Die aansoek betaal nie die voorgeskrewe fooie in artikel 76D van die Inkomstebelastingwet nie.

2.12 Die bevoegde gesag van die ander land wil nie ’n party tot die DBO voorafprysooreenkoms wees nie.

2.13 Die aansoeker is nie belastingnakomend tot die mate in artikel 256(3) van die Wet op Belastingadministrasie, na verwys nie.

3. Inwerkingtreding

Hierdie Kennisgewing sal op alle aansoeke om ’n DBO voorafprysooreenkoms ontvang op of na die datum van publikasie van hierdie Kennisgewing in die *Staatskoerant* van toepassing wees.

SOUTH AFRICAN REVENUE SERVICE

NO. 7790 **7 August 2026**

REQUIREMENTS FOR PROCESSING AN APPLICATION FOR A DTA ADVANCE PRICING AGREEMENT IN TERMS OF SECTION 76J(1) OF THE INCOME TAX ACT, 1962 (ACT NO. 58 OF 1962)

In terms of section 76J(1) of the Income Tax Act, 1962, I, Ngobani Johnstone Makhubu, Commissioner for the South African Revenue Service, hereby prescribe in the attached Schedule, the requirements for processing an application for a DTA advance pricing agreement.



N J MAKHUBU

COMMISSIONER FOR THE SOUTH AFRICAN REVENUE SERVICE

Schedule

1. General

Any term or expression in this notice to which a meaning has been assigned in a "tax Act", as defined in section 1 of the Tax Administration Act, 2011 (Act No. 28 of 2011), has the meaning so assigned, unless the context indicates otherwise.

2. Requirements for processing an application for a DTA advance pricing agreement

The requirements for processing a DTA advance pricing agreement are as follows:

2.1. Development of a DTA advance pricing agreement project plan

2.1.1. Once the application for a DTA advance pricing agreement has been accepted, SARS must consult the applicant and the competent authority of the other country to agree on a project plan to process the application.

2.1.2. The project plan should include the stages of processing the application for a DTA advance pricing agreement, the key milestones to be achieved during each stage and the expected duration of each stage.

2.2. Information gathering

Upon conclusion of the project plan, SARS must take such steps as necessary, to form a position for discussions with the competent authority of the other country, which may include:

2.2.1. requesting further information deemed relevant to review and evaluate the application for a DTA advance pricing agreement, including information relating to the multinational enterprise as a whole;

2.2.2. conducting functional analysis interviews with relevant persons;

2.2.3. engaging any industry experts; and

2.2.4. conducting benchmarking studies, data and information gathering and analysis of comparable entities.

2.3. Coordination of the information gathering process

2.3.1. During the information gathering phase, SARS will coordinate the gathering of information with the competent authority of the other country, based on the facts and circumstances of each case.

2.3.2. Where practical, functional analysis interviews, site visits and information gathering will be coordinated and conducted jointly.

2.3.3. Where any information gathering is not conducted jointly, this information must be shared with the relevant competent authority.

2.4. The provision of taxpayer information to competent authorities

2.4.1. The applicant must provide any requested information to both competent authorities simultaneously even if the information was only requested by one specific competent authority.

2.4.2. Information must be provided on a date agreed between the parties.

2.5. Position paper and competent authority negotiations

2.5.1. Once all relevant information is received and considered, SARS must compile a position paper to be shared with the competent authority of the other country.

2.5.2. The position paper will contain information that is considered necessary to facilitate further discussions with the competent authority of the other country.

2.5.3. The applicant will not have a direct role during the preparation of position papers or in the subsequent negotiations between the competent authorities.

3. Commencement

This Notice will apply to all applications for a DTA advance pricing agreement received on or after the date of publication of this Notice in the Government *Gazette*.

SUID-AFRIKAANSE INKOMSTEDIENS

NO. 7790 **7 Augustus 2026**

VEREISTES VIR VERWERKING VAN ’N AANSOEK OM ’N DBO VOORAFPRYSOOREENKOMS INGEVOLGE ARTIKEL 76J(1) VAN DIE INKOMSTEBELASTINGWET, 1962 (WET NO. 58 VAN 1962)

Ingevolge artikel 76J(1) van die Inkomstebelastingwet, 1962, bepaal ek, Ngobani Johnstone Makhubu, Kommissaris vir die Suid-Afrikaanse Inkomstediens, hiermee in die aangehegte Bylaag, die vereistes vir verwerking van ’n aansoek om ’n DBO voorafprysooreenkoms.

N J MAKHUBU

KOMMISSARIS VIR DIE SUID-AFRIKAANSE INKOMSTEDIENS

Bylaag

1. Algemeen

Enige woord of uitdrukking in hierdie kennisgewing vervat waaraan ’n betekenis geheg is in ’n “Belastingwet” soos in artikel 1 van die Wet op Belastingadministrasie, 2011 (Wet No. 28 van 2011) omskryf, dra die betekenis aldus daaraan geheg, tensy die samehang andersins aandui.

2. Vereistes vir verwerking van ’n aansoek om ’n DBO voorafprysooreenkoms

Die vereistes vir verwerking van ’n DBO voorafprysooreenkoms is as volg:

2.1. Ontwikkeling van ’n DBO voorafprysooreenkomsprojekplan

2.1.1. Sodra die aansoek om ’n DBO voorafprysooreenkoms aanvaar is, moet SAID met die aansoeker en die bevoegde gesag van die ander land konsulteer ten einde ooreen te kom op ’n projekplan vir die verwerking van die aansoek.

2.1.2. Die projekplan moet die stadiums vir die verwerking van die aansoek om ’n DBO voorafprysooreenkoms, die sleutelmylpale wat bereik moet word gedurende elke stadium en die verwagte tydperk van elke stadium, insluit.

2.2. Versameling van inligting

By afhandeling van die projekplan, moet SAID sulke stappe neem soos nodig om ’n posisie in te neem vir samesprekings met die bevoegde gesag van die ander land, wat kan insluit:

2.2.1. die versoek om verdere inligting geag toepaslik te wees ten einde die aansoek om ’n DBO voorafprysooreenkoms te hersien en evalueer, ingesluit inligting wat met die multinationale besigheid as ’n geheel verband hou;

2.2.2. die uitvoer van funksionele analiseringsonderhoude met tersaaklike persone;

2.2.3. betrekking van enige industrie spesialiste; en

2.2.4. doen van maatstafstudies, data- en inligtingversameling en analisering van vergelykbare entiteite.

2.3. Koördinering van die inligtingversamelingsproses

2.3.1. Gedurende die inligtingversamelingsfase sal die SAID die insameling van inligting met die bevoegde gesag van die ander land koördineer, gebasseer op die feite en omstandighede van elke geval.

2.3.2. Waar prakties, sal funksionele analiseringsonderhoude, terreinbesoeke en versameling van inligting gekoördineer word en gesamentlik uitgevoer word.

2.3.3. Waar enige versameling van inligting nie gesamentlik uitgevoer word nie, moet hierdie inligting aan die bevoegde gesag beskikbaar gestel word.

2.4. Die verskaf van belastingpligtige inligting aan bevoegde gesagte

2.4.1. Die aansoeker moet enige aangevraagde inligting aan beide bevoegde gesagte gelyktydig verskaf selfs al was die inligting slegs deur een bevoegde gesag aangevra.

2.4.2. Die inligting moet verskaf word op ’n datum tussen die partye ooreengekom.

2.5. Posisieverslag en bevoegde gesag onderhandelinge

2.5.1. Sodra alle tersaaklike inligting ontvang en oorweeg is, moet SAID ’n posisieverslag saamstel wat met die bevoegde gesag van die ander land gedeel sal word.

2.5.2. Die posisieverslag sal inligting bevat wat geag word nodig is om verdere samesprekings met die bevoegde gesag van die ander land te fasiliteer.

2.5.3. Die aansoeker sal nie ’n direkte rol speel gedurende die voorbereiding van die posisieverslag of in die daaropvolgende onderhandelinge tussen die bevoegde gesagte nie.

3. Inwerkingtreding

Hierdie Kennisgewing sal op alle aansoeke om ’n DBO voorafprysooreenkoms ontvang op of na die datum van publikasie van hierdie Kennisgewing in die *Staatskoerant*, van toepassing wees.

SOUTH AFRICAN REVENUE SERVICE

NO. 7791 **7 August 2026**

INFORMATION TO BE CONTAINED IN A PRELIMINARY DTA ADVANCE PRICING AGREEMENT IN TERMS OF SECTION 76J(3) OF THE INCOME TAX ACT, 1962 (ACT NO. 58 OF 1962)

In terms of section 76J(3) of the Income Tax Act, 1962, I, Ngobani Johnstone Makhubu, Commissioner for the South African Revenue Service, hereby prescribe in the attached Schedule, the information to be contained in a preliminary DTA advance pricing agreement under that section.

N J MAKHUBU

COMMISSIONER FOR THE SOUTH AFRICAN REVENUE SERVICE

Schedule

1. General

Any term or expression in this notice to which a meaning has been assigned in a “tax Act”, as defined in section 1 of the Tax Administration Act, 2011 (Act No. 28 of 2011), has the meaning so assigned, unless the context indicates otherwise.

2. Information to be contained in a preliminary DTA advance pricing agreement

2.1 The legal names, e-mail addresses, postal addresses, physical addresses, and countries of residence of the parties to the DTA advance pricing agreement.

2.2 The contact details of the competent authorities that are party to the agreement.

2.3 The date the application for the DTA advance pricing agreement was filed.

2.4 A definition of each of the key terms in the DTA advance pricing agreement.

2.5 The primary business activities of the applicant.

2.6 Background to the affected transaction, including a summary of the applicant’s business and functional analysis.

2.7 The organisational structure of the applicant in relation to the other affected parties and their organisational structures.

2.8 The latest financial information available, which may include unaudited annual financial statements, to the extent that the applicant represents that the annual financial statements give an accurate view of an affected transaction in the DTA advance pricing agreement.

2.9 The applicable accounting standards on which the applicant's annual financial statements are based.

2.10 The currency in which an affected transaction is calculated, expressed and paid.

2.11 An affected transaction that will form part of the DTA advance pricing agreement, with the following information in respect of each affected transaction—

2.11.1 the applicable critical assumptions;

2.11.2 the quantum;

2.11.3 the most appropriate transfer pricing method;

2.11.4 the selection of comparables;

2.11.5 the arm's length transfer price;

2.11.6 the arm's length allocation; and

2.11.7 the adjustments, where necessary.

2.12 The duration of the DTA advance pricing agreement.

2.13 The date on which the compliance report must be submitted.

2.14 An undertaking by the applicant to submit to SARS, within 21 days after the finalisation of the DTA advance pricing agreement, the relevant amended income tax return(s) applying the transfer pricing methodology in terms of the DTA advance pricing agreement.

2.15 Any other information that SARS may consider to be relevant for purposes of the DTA advance pricing agreement.

3. Commencement

This Notice will apply to all applications for a DTA advance pricing agreement received on or after the date of publication of this Notice in the Government *Gazette.*

SUID-AFRIKAANSE INKOMSTEDIENS

NO. 7791 **7 Augustus 2026**

INLIGTING WAT INGEVOLGE ARTIKEL 76J(3) VAN DIE INKOMSTEBELASTINGWET, 1962 (WET NO. 58 VAN 1962) IN ’N VOORLOPIGE DBO VOORAFPRYSOOREENKOMS VERVAT MOET WORD

Ingevolge artikel 76J(3) van die Inkomstebelastingwet, 1962, bepaal ek, Ngobani Johnstone Makhubu, Kommissaris van die Suid-Afrikaanse Inkomstediens, hiermee in die aangehegte Bylaag, die inligting wat in ’n voorlopige DBO voorafprysooreenkoms ingevolge daardie artikel, vervat moet word.

N J MAKHUBU
KOMMISSARIS VIR DIE SUID-AFRIKAANSE INKOMSTEDIENS

Bylaag

1. Algemeen

Enige woord of uitdrukking in hierdie kennisgewing vervat waaraan ’n betekenis geheg is in ’n “Belastingwet” soos in artikel 1 van die Wet op Belastingadministrasie, 2011 (Wet No. 28 van 2011) omskryf, dra die betekenis aldus daaraan geheg, tensy die samehang andersins aandui.

2. Inligting wat in ’n voorlopige DBO voorafprysooreenkoms vervat moet word

2.1 Die regsname, epos addresse, posaddresse, fisiese addresse, en lande waar die partye tot die DBO voorafprysooreenkoms woonagtig is.

2.2 Die kontakbesonderhede van die bevoegde gesagte wat partye tot die ooreenkoms is.

2.3 Die datum waarop die aansoek om ’n DBO voorafprysooreenkoms ingedien is.

2.4 ’n Omskrywing van elkeen van die sleutelterme in die DBO voorafprysooreenkoms.

2.5 Die primêre besigheidsbedrywighede van die aansoeker.

2.6 Agtergrond tot die geaffekteerde transaksie, ingesluit ’n opsomming van die aansoeker se besigheid en funksionele analise.

2.7 Die organisatoriese struktuur van die aansoeker met betrekking tot ander geaffekteerde partye en hulle organisatoriese strukture.

2.8 Die nuutste finansiele inligting beskikbaar, wat mag insluit ongeouditeerde jaarlikse finansiele state, tot die mate wat die aansoeker aanvoer dat die jaarlikse finansiele state ’n akkurate beskouing van ’n geaffekteerde transaksie in die DBO voorafprysooreenkoms bied.

2.9 Die toepaslike boekhoustandaarde waarop die aansoeker se jaarlikse finansiele state basseer is.

2.10 Die geldeenheid waarin ’n geaffekteerde transaksie bereken, uitgedruk en betaal is.

2.11 ’n Geaffekteerde transaksie wat deel sal vorm van die DBO voorafprysooreenkoms, met die volgende inligting ten opsigte van elke geaffekteerde transaksie—

2.11.1 die toepaslike kritiese aannames;

2.11.2 die quantum;

2.11.3 die mees toepaslike oordragprysmetode;

2.11.4 die keuse van vergelykbares;

2.11.5 die armlengte oordragprys;

2.11.6 die armlengte toedeling; en

2.11.7 die aanpassings, waar nodig.

2.12 Die duur van die DBO voorafprysooreenkoms.

2.13 Die datum waarop die nakomingsverslag ingedien moet word.

2.14 ’n Onderneming deur die aansoeker om binne 21 dae na die finalisering van die DBO voorafprysooreenkoms, die tersaaklike gewysigde inkomstebelastingopgawe(s) wat die oordragprysmetode ingevolge die DBO voorafprysooreenkoms toepas, by die SAID in te dien.

2.15 Enige ander inligting wat SAID relevant mag ag vir doeleindes van die DBO voorafprysooreenkoms.

3. Inwerkingtreding

Hierdie Kennisgewing sal op alle aansoeke om ’n DBO voorafprysooreenkoms ontvang op of na die datum van publikasie van hierdie Kennisgewing in die *Staatskoerant* van toepassing wees.

SOUTH AFRICAN REVENUE SERVICE

NO. 7792 **7 August 2026**

PROCEDURES AND GUIDELINES FOR THE IMPLEMENTATION AND OPERATION OF THE DTA ADVANCE PRICING AGREEMENT SYSTEM IN TERMS OF SECTION 76P OF THE INCOME TAX ACT, 1962 (ACT NO. 58 OF 1962)

In terms of section 76P of the Income Tax Act, 1962, I, Ngobani Johnstone Makhubu, Commissioner for the South African Revenue Service, hereby prescribe in the attached Schedule, the procedures and guidelines for the implementation and operation of the DTA advance pricing agreement system.



N J MAKHUBU
COMMISSIONER FOR THE SOUTH AFRICAN REVENUE SERVICE

Schedule

1. General

Any term or expression in this notice to which a meaning has been assigned in a "tax Act", as defined in section 1 of the Tax Administration Act, 2011 (Act No. 28 of 2011), has the meaning so assigned, unless the context indicates otherwise.

2. Procedures and guidelines for the implementation and operation of the DTA advance pricing agreement system

The procedures and guidelines for the implementation and operation of the DTA advance pricing agreement system are as follows:

2.1. Language requirement for the administration of an advance pricing agreement system

2.1.1. All correspondence for purposes of administering Part IA of Chapter III of the Income Tax Act must be in English.

2.1.2. SARS will not accept an application for a DTA advance pricing agreement unless the competent authorities agree, prior to the submission of the application, that the processing of the application and the proceedings will be conducted in English.

2.1.3. The applicant must ensure that the information in relation to the application for a DTA advance pricing agreement to be provided to the competent authority of the other country will be in the language required by such competent authority.

2.2. Pre-application consultation

2.2.1. The request for a pre-application consultation meeting must be e-mailed to APAapplications@sars.gov.za.

2.2.2. For purposes of the pre-application consultation meeting, the prospective applicant must prepare and submit a presentation that includes the information required in section 76E(3) of the Income Tax Act.

2.2.3. SARS must issue an invoice for the pre-application consultation fee in accordance with section 76D(2) of the Income Tax Act. The fee must be paid within seven days of the date of the invoice.

2.2.4. Once the presentation in paragraph 2.2.2 is received and the required pre-application consultation fee is paid, SARS will arrange a pre-application consultation meeting with the prospective applicant.

2.3. Rollback

2.3.1. If applicable, a prospective applicant must make the specific request in section 76K(6) of the Income Tax Act during the pre-application consultation. Issues relating to the period of limitations for issuance of assessments in accordance with section 99 of the Tax Administration Act must be addressed during the pre-application consultation meeting.

3. Commencement

This Notice will apply to all applications for a DTA advance pricing agreement received on or after the date of publication of this Notice in the Government *Gazette*.

SUID-AFRIKAANSE INKOMSTEDIENS

NO. 7792 **7 Augustus 2026**

PROSEDURES EN RIGLYNE VIR DIE IMPLEMENTERING EN WERKING VAN DIE DBO VOORAFPRYSOOREENKOMSSISTEEM INGEVOLGE ARTIKEL 76P VAN DIE INKOMSTEBELASTINGWET, 1962 (WET NO. 58 VAN 1962)

Ingevolge artikel 76P van die Inkomstebelastingwet, 1962, bepaal ek, Ngobani Johnstone Makhubu, Kommissaris van die Suid-Afrikaanse Inkomstediens, hiermee in die aangehegte Bylaag, die prosedures en riglyne vir die implementering en werking van die DBO voorafprysooreenkomssisteem.

N J MAKHUBU
KOMMISSARIS VIR DIE SUID-AFRIKAANSE INKOMSTEDIENS

Bylaag

1. Algemeen

Enige woord of uitdrukking in hierdie kennisgewing vervat waaraan ’n betekenis geheg is in ’n “Belastingwet” soos in artikel 1 van die Wet op Belastingadministrasie, 2011 (Wet No. 28 van 2011) omskryf, dra die betekenis aldus daaraan geheg, tensy die samehang andersins aandui.

2. Prosedures en riglyne vir die implementering en werking van die DBO voorafprysooreenkomssisteem

Die prosedures en riglyne vir die implementering en werking van die DBO voorafprysooreenkomssisteem is as volg:

2.1. Taalvereiste vir die administrasie van ’n voorafprysooreenkomssisteem

2.1.1. Alle korrespondensie vir doeleindes van die administrasie van Deel IA van Hoofstuk III van die Inkomstebelastingwet, moet in Engels wees.

2.1.2. SAID sal nie ’n aansoek om ’n DBO voorafprysooreenkoms aanvaar tensy die bevoegde gesagte, voor die indien van die aansoek, toestem dat die verwerking van die aansoek en die prosedures in Engels behartig sal word nie.

2.1.3. Die aansoeker moet verseker dat die inligting wat verband hou met die aansoek om ’n DBO voorafprysooreenkoms wat aan die bevoegde gesag van die ander land voorsien gaan word, in die taal soos vereis deur daardie bevoegde gesag sal wees.

2.2. Voor-aansoek konsultasie

2.2.1. Die versoek om ’n voor-aansoek konsultasievergadering moet ge-epos word na APAapplications@sars.gov.za.

2.2.2. Vir doeleindes van die voor-aansoek konsultasievergadering moet die voornemende aansoeker ’n voorlegging voorberei en indien wat die inligting vereis in artikel 76E(3) van die Inkomstebelastingwet, insluit.

2.2.3. SAID moet ’n faktuur vir die voor-aansoek konsultasievergadering kragtens artikel 76D(2) van die Inkomstebelastingwet, uitreik. Die fooi moet binne sewe dae van die datum van die faktuur betaal word.

2.2.4. Sodra die voorlegging in paragraaf 2.2.2 ontvang is en die vereiste voor-aansoek konsultasiefooi betaal is, sal SAID ’n voor-aansoek konsultasievergadering met die voornemende aansoeker belê.

2.3. Terugrol

2.3.1. Indien van toepassing, moet ’n voornemende aansoeker die spesifieke versoek in artikel 76K(6) van die Inkomstebelastingwet gedurende die voor-aansoek konsultasie maak. Aangeleenthede wat verband hou met die tydperk vir beperkinge op die uitreik van aanslae ingevolge artikel 99 van die Wet op Belastingadministrasie moet gedurende die voor-aansoek konsultasievergadering aangespreek word.

3. Inwerkingtreding

Hierdie Kennisgewing sal op alle aansoeke om ’n DBO voorafprysooreenkoms ontvang op of na die datum van publikasie van hierdie Kennisgewing in die *Staatskoerant* van toepassing wees.

DEPARTMENT OF WATER AND SANITATION

NO. 7793 **7 August 2026**

PROPOSED RESERVE DETERMINATION FOR WATER RESOURCES FOR USUTHU-MHLATHUZE CATCHMENTS IN THE INKOMATI-USUTHU AND PONGOLA-MTAMVUNA WATER MANAGEMENT AREAS.

I, **Pemmy Castelina Pamela Majodina**, in terms of section 16(1) and (2) of the National Water Act, 1998 (Act No. 36 of 1998), hereby determine the Reserve for the water resources in the Inkomati-Usuthu and Pongola-Mtamvuna Water Management Areas, as set out in the Schedule.

MISS PEMMY C.P. MAJODINA (MP)
MINISTER OF WATER AND SANITATION
DATE: 10 / 06 / 2026

This gazette is also available free online at **www.gpwonline.co.za**

SCHEDULE

1. DESCRIPTION OF WATER RESOURCE

(1) The Reserve is determined for all or part of every significant water resource within the catchments of the Usuthu-Mhlathuze, as set out below:

Water Management Areas: Inkomati-Usuthu and Pongola-Mtamvuna
Drainage Region: W Primary Drainage Region
River(s): W1 catchment (main river: Mhlathuze).
W2 catchment (main river: UMfolozi).
W3 catchment (main river: Mkuze).
W4 catchment (main river: Pongola) - part of this catchment area falls within Eswatini.
W5 catchment (main river: Usutu) - much of this catchment falls within Eswatini.
W7 catchment (Kosi Bay and Lake Sibaya).

(2) The Reserve is hereby determined for all or part of the water resource referred to in sub-clause 1.1, which classes have been determined in Government Notice No. 52814 of 06 June 2025.

2. ACRONYMS AND DEFINITIONS

(1) Acronyms used in Annexure A

BHN	Basic Human Needs
BHNR	Basic Human Needs Reserve
EcoSpecs	Ecological Specifications
EIS	Ecological Importance and Sensitivity
EWR	Ecological Water Requirement
EWR_MLF	Ecological Water Requirement_Maintenance Low Flows
WARMS	Water Allocation Registration Management System
GRA II	Groundwater Resource Assessment Phase II
GRDM	Groundwater Resource Directed Measures
MAR	Mean Annual Runoff
MCM	Million Cubic Metres
PES	Present Ecological Status
REC	Recommended Ecological Category
TEC	Targeted Ecological Category
DWS	Department of Water and Sanitation
DWAF	Department of Water Affairs and Forestry
EC	Electrical Conductivity
TIN	Total Inorganic Nitrogen
SRP	Soluble Reactive Phosphorus
RC	Reference Condition
WQU	Water Quality Unit
IUA	Integrated Unit of Analysis
RU	Resource Unit

(2) DEFINITIONS

In this Notice unless the context indicates otherwise –

"Baseflow" means a sustained low flow in rivers during dry or fair-weather conditions and includes contribution from delayed interflow and groundwater discharge;

"EWR" means Ecological Water Requirements and refers to the flow patterns (magnitude, timing and duration) and water quality needed to maintain a riverine ecosystem in a particular condition;

"Recharge" means the addition of water to the zone of saturation, either by downward percolation of precipitation or surface water and/ or the lateral migration of groundwater from adjacent aquifers; and

"the Act" means the National Water Act, 1998 (Act No. 36 of 1998).

3. RESERVE DETERMINATION IN TERMS OF SECTION 16(3) OF THE ACT

(1) The Reserve determination for the quantity component of the Rivers in the Usuthu-Mhlathuze catchment includes the EWR sites as shown in **Table 1** and illustrated in **Figures 1 to 5** of **Annexure A**, and the basic human needs are as set out in **Table 2** of **Annexure A.**

(2) The Reserve determination for the quality component of the Rivers at EWR sites in the Usuthu-Mhlathuze catchment is set out in **Tables 3.1 to 3.8** of **Annexure A.**

(3) A summary of the Water Quantity & Quality Reserve for selected Wetlands for the Usuthu-Mhlathuze catchment is set out in **Tables 4.1 to 4.7** of **Annexure A.**

(4) The Reserve determination for the Estuaries in the Usuthu-Mhlathuze catchment is set out in **Tables 5.1** and the Threshold of Potential Concerns (TPC's) associated with each of the ecological specifications are provided in **Table 5.2 to 5.9** of **Annexure A.**

(5) The Reserve determination for the groundwater contribution to the Reserve for Water Quantity for the Usuthu-Mhlathuze catchment is set out in **Table 6.1** of **Annexure A.**

(6) The Reserve determination for the groundwater contribution to the Reserve for Water Quality for the Usuthu-Mhlathuze catchment is set out in **Tables 7.1 to 7.9** of **Annexure A.**

4. COMMENCEMENT

The Reserve determinations made in this Notice commence on and apply from the date of publication hereof.

The Annexure to this Notice, containing the Reserve determination for the quantity and quality component of the rivers at EWR sites and the extrapolated nodes, estuaries, wetlands, groundwater contribution to the Reserve for water quantity and quality for the Inkomati-Usuthu and Pongola-Mtamvuna Water Management Areas, can be accessed from:

https://www.dws.gov.za/wem/currentstudies/gazettedreserves.aspx

or requested from:

Director: Reserve Determination
Attention: Mr. Yakeen Atwaru
Department of Water and Sanitation
Ndinaye Building 5082
178 Francis Baard Street
Private Bag x 313
Pretoria
0001

E-mail: Atwaruy@dws.gov.za

PRUKUNQUNYWA KWENDAWO YOKUGCINA OKUHLONGOZWAYO KWEMITHOMBO YAMANZI EZINDAWENI EZIPHATHA AMANZI E-USUTHU-MHLATHUZE EZINDAWENI ZOKULAWULWA KWAMANZI E-INKOMATI-USUTHU KANYE NASE-PONGOLA-MTAMVUNA.

Mina, **Pemmy Castelina Pamela Majodina**, ngokwesigaba 16(1) no- (2) soMthetho Wamanzi Kazwelonke, ka-1998 (uMthetho Nombolo 36 ka-1998), ngalokhu ngishicilela, ukuze abantu baphawule ngokunqunywa Kwendawo Yokugcina yemithombo yamanzi yase-Inkomati-Usuthu kanye Nezindawo Zokulawulwa Kwamanzi zase-Pongola-Mtamvuna, njengoba kubekiwe Ohlelweni.

NKOSAZANA PEMMY C.P. MAJODINA (ILUNGU LEPHALAMENDE)
UNGQONGQOSHE WEZAMANZI NOKUTHUTHWA KWENDLE
USUKU: 12/06/2026

1

UHLELO

1. UHLELO LOMTHOMBO WAMANZI

(1) Indawo Yokugcina inqunyelwa yonke noma ingxenye yemithombo yamanzi emikhulu ezindaweni eziphatha amanzi e-Usuthu-Mhlathuze, njengoba kubekwe ngezansi:

Indawo Yokulawulwa Kwamanzi: Inkomati-Usuthu and Pongola-Mtamvuna

Izifunda Zamapayipi Okudonsa Amanzi: Isifunda Sepayipi Lokudonsa Amanzi Esiyinhloko e-W

Imifula: Indawo ephatha amanzi i-W1 (umfula omkhulu: iMhlathuze).
Indawo ephatha amanzi i-W2 (umfula omkhulu: i-UMfolozi).
Indawo ephatha amanzi i-W3 (umfula omkhulu: iMkuze).
Indawo ephatha amanzi i-W4 (umfula omkhulu: iPongola) – ingxenye yalendawo ephatha amanzi iwela ngaphansi kwase-Eswatini.
Indawo ephatha amanzi i-W5 (umfula omkhulu: i-Usutu) - ingxenye yalendawo ephatha amanzi iwela ngaphansi kwase-Eswatini.
Indawo ephatha amanzi i-W7 (i-Kosi Bay kanye neChibi laseSibaya).

(2) Indawo Yokugcina ngalokhu inqunyelwa yonke noma ingxenye yemithombo yamanzi okubhekiselwa kuyo esigatshaneni 1.1, osigaba saso sinqunywe kwiSaziso sikaHulumeni Nombolo 52814 sika-06 Juni 2025.

2. Ama-AKHRONIMI NEZINCAZELO

(1) Ama-akhronimi asetshenziswe kuSithasiselo A

i-BHN	Izidingo Zabantu Eziyisisekelo (i-Basic Human Needs)
i-BHNR	Indawo Yokugcina Yezidingo Zabantu Eziyisisekelo (i-Basic Human Needs Reserve)
i-EcoSpecs	Ukucaciswa Kwemvelo (i-Ecological Specifications)
i-EIS	Ukubaluleka Kwemvelo Nokuzwela (i-Ecological Importance and Sensitivity)
i-EWR	Izidingo Zamanzi Emvelo (i-Environmental Water Requirement)
i-EWR_MLF	Izidingo Zamanzi Emvelo_Ukusebenza Kokunakekelwa Okuncane (i-Ecological Water Requirement_Maintenance Low Flows_
i-WARMS	Uhlelo Lokulawulwa Kokubhaliswa Kokwabiwa Kwamanzi (i-Water Allocation Registration Management System)
i-GRA II	Isigaba II Sokuhlolwa Kwemithombo Yamanzi Angaphansi Komhlaba (i-Groundwater Resource Assessment Phase II)
i-GRDM	Izinyathelo Eziqondiswe Emithonjeni Yamanzi Angaphansi Komhlaba (i-Groundwater Resource Directed Measures)
i-MAR	Isilinganiso Sonyaka Kokugeleza (i-Mean Annual Runoff)
i-MCM	Ama-Cubic Mitha Ayizigidi (i-Million Cubic Metres)
i-PES	Isimo Sezemvelo Samanje (i-Present Ecological Status)
i-REC	Isigaba Semvelo Esiphakanyisiwe (i-Recommended Ecological Category)
i-TEC	Isigaba Semvelo Esihlosiwe (i-Target Ecological Category)
i-DWS	UMnyango Wezamanzi Nokuthuthwa Kwendle (i-Department of Water and Sanitation)

i-DWAF	UMnyango Wezamanzi Namahlathi (i-Department of Water Affairs and Forestry)
i-EC	Ukudluliselwa Kukagesi (i-Electrical Conductivity)
i-TIN	Ingqikithi ye-Nitrogen Yezinto Ezingaphili (i-Total Inorganic Nitrogen
i-SRP	I-Phosphorus Esebenzayo Encibilikayo (i-Soluble Reactive Phosphorus)
i-RC	Isimo Sokubhekiselwa (i-Reference Condition)
i-WQU	Iyunithi Yezinga Lamanzi (i-Water Quality Unit)
i-IUA	Iyunithi Yokuhlaziya Edidiyelwe (i-Integrated Unit of Analysis)
i-RU	Iyunithi Yomthombo (i-Resource Unit)

(2) IZINCAZELO

Kulesi Saziso ngaphandle uma isimo sibonisa okuhlukile –

"ukugeleza okuyisisekelo" kusho ukugeleza okuphansi okuqhubekayo emifuleni phakathi nezimo zezulu ezomile noma ezilungile futhi kuhlanganisa umnikelo osuka ekubambezelekeni kokugeleza nokuphuma kwamanzi angaphansi komhlaba;

"i-EWR" isho Izidingo Zamanzi Ezemvelo futhi ibhekisela kumaphethini okugeleza (ubukhulu, isikhathi nobude) kanye nezinga lamanzi elidingekayo ukuze kugcinwe imvelo yomfula esimeni esithile;

"Ukugcwaliswa" kusho ukwengezwa kwamanzi endaweni yokugcwala, kungaba ngokungena phansi kwemvula noma kwamanzi angaphezulu kanye/noma ukufuduka kwamanzi angaphansi komhlaba avela eziphethwini ezingomakhelwane; kanye

"uMthetho" usho uMthetho Wamanzi Kazwelonke, 1998 (uMthetho Nombolo 36 ka-1998).

3. UKUNQUNYWA KWENDAWO YOKUGCINA NGOKUPHATHELENE NESIGABA 16(3) SOMTHETHO

(1) Ukunqunywa Kwendawo Yokugcina yengxenye yenani Lemifula endaweni ephatha amanzi e-Usuthu-Mhlathuze kuhlanganisa izindawo ze-EWR njengoba kuboniswe **kuThebula 1** futhi kufanekisiwe **Kwimifanekiso 1** kuya ku-**5 yeSithasiselo A**, futhi izidingo zabantu eziyisisekelo zibekwe **kuThebula 2 leSithasiselo A.**

(2) Ukunqunywa Kwendawo Yokugcina yengxenye yezinga Lemifula endaweni ephatha amanzi ezindaweni ze-EWR e-Usuthu-Mhlathuze kubekwe **kumaThebula 3.1 kuya ku-3.8 eSithasiselo A**.

(3) Isifinyezo Sendawo Yokugcina Yenani kanye Nezinga Lamanzi Ezindaweni Ezingamaxhaphozi ezikhethiwe endaweni ephatha amanzi e-Usuthu-Mhlathuze sibekwe **kumaThebula 4.1 kuya ku-4.7 eSithasiselo A.**

(4) Ukunqunywa Kwendawo Yokugcina Yezizalo Zemifula endaweni ephatha amanzi e-Usuthu-Mhlathuze kubekwe **kuThebula 5.1** futhi Izinkinga Ezingaba Khona (ama-Threshold of Potential Concerns) (ama-TPC) Izinkinga ezihambisana nokucaciswa kwemvelo ngayinye nazo zinikezwe **kumaThebula 5.2 kuya ku-5.9** of **eSithasiselo A.**

(5) Ukunqunywa Kwendawo Yokugcina ekufakeni isandla kwamanzi angaphansi komhlaba Endaweni Yokugcina Kwinani Lamanzi endaweni ephatha amanzi e-Usuthu-Mhlathuze kubekwe **kuThebula 6.1 weSithasiselo A**.

(6) Ukunqunywa Kwendawo Yokugcina ekufakeni isandla kwamanzi angaphansi komhlaba Endaweni Yokugcina Ezingeni Lamanzi endaweni ephatha amanzi e-Usuthu-Mhlathuze kubekwe **umaThebula 7.1 kuya ku-7.9 eSithasiselo A**.

4. UKUQALA

Ukunqunywa Kwezindawo Zokulondoloza okwenziwe kulesi Saziso kuzoqala futhi kusebenze kusuka ngosuku lokushicilelwa kwalokhu.

Isithasiselo salesi Saziso, esiqukethe ukunqunywa Kwendawo Yokugcina yengxenye yenani nezinga lemifula ezindaweni ze-EWR kanye nezindawo ezandisiwe, izizalo zemifula, izindawo zamaxhaphozi, igalelo lamanzi angaphansi komhlaba Endaweni Yokugcina yenani nezinga lamanzi e-Inkomati-Usuthu kanye Nezindawo Zokulawulwa Kwamanzi zase-Pongola-Mtamvuna, singatholakala ku-:

https://www.dws.gov.za/wem/currentstudies/gazettedreserves.aspx

noma sicelwe ku-:

Umqondisi: Ukunqunywa Kwendawo Yokugcina
Ukunakwa: Mnu. Yakeen Atwaru
Umnyango Wezamanzi Nokuthuthwa Kwendle
Ndinaye Building 5082
178 Francis Baard Street
Private Bag x 313
Pretoria
0001

i-Imeyli: Atwaruy@dws.gov.za

PARLIAMENT OF THE REPUBLIC OF SOUTH AFRICA

NOTICE 4081 OF 2026

MR G. MICHALAKIS, MP

NOTICE OF INTENTION TO INTRODUCE A PRIVATE MEMBER'S BILL AND INVITATION FOR COMMENT ON THE DRAFT PUBLIC PROCUREMENT AMENDMENT BILL, 2026

Mr G. Michalakis, 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, 2026 ("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 ppab-bee@parliament.gov.za and copied to legislation@da.org.za.

Copies of the draft Bill may be obtained by emailing legislation@da.org.za.

PARLIAMENT OF THE REPUBLIC OF SOUTH AFRICA

NOTICE 4082 OF 2026

MR ALAN DAVID BEESLEY

NOTICE OF INTENTION TO INTRODUCE A PRIVATE MEMBER'S BILL, 2026 AND INVITATION FOR COMMENT

Hon Alan David Beesley, MP, acting in accordance with section 73(2) of the Constitution of the Republic of South Africa, 1996, intends to introduce the Public Procurement Amendment Bill ("the Bill"). An explanatory summary of the Bill is hereby published in accordance with Rule 276(1)(*c*) of the Rules of the National Assembly (9th Edition).

The Bill seeks to amend the Public Procurement Act, 2024 (Act No. 28 of 2024) ("principal Act"), so as to strengthen procurement integrity by enhancing the debarment framework in the principal Act, including empowering the Public Procurement Office to intervene where procuring institutions fail or unreasonably delay initiating debarment proceedings, prescribing time periods for the initiation and completion of debarment proceedings, requiring the Public Procurement Office to update the public debarment register within a specified period, and requiring procuring institutions to report annually to the Public Procurement Office on supplier misconduct, debarment decisions and decisions not to initiate debarment proceedings.

The Bill also seeks to integrate debarment recommendations and orders arising from investigations conducted under the Special Investigating Units and Special Tribunals Act, 1996, into the debarment framework of the Public Procurement Act, 2024, including by empowering the Special Investigating Unit and the Special Tribunal to give effect to such recommendations and orders.

Interested parties and institutions are invited to submit written representations on the proposed content of the Bill to the Speaker of the National Assembly within 30 days of the publication of this notice. Representations can be delivered to the Speaker, Africa House Building, Cape Town; mailed to the Speaker, PO Box 15, Cape Town, 8000; or emailed to blacklisting@parliament.gov.za and copied to parliament@actionsa.org.za.

Copies of the Bill may be obtained upon request from parliament@actionsa.org.za

DEPARTMENT OF TRADE, INDUSTRY AND COMPETITION

NOTICE 4083 OF 2026

INTERNATIONAL TRADE ADMINISTRATION COMMISSION

NOTICE OF INITIATION OF AN INVESTIGATION INTO THE ALLEGED DUMPING OF BOARDS, SHEETS, PANELS, TILES AND SIMILAR ARTICLES OF PLASTER OR OF COMPOSITIONS BASED ON PLASTER, NOT ORNAMENTED, FACED OR REINFORCED WITH PAPER OR PAPERBOARD ONLY ("GYPSUM PLASTERBOARD") CLASSIFIABLE UNDER TARIFF SUBHEADING 6809.11, ORIGINATING IN OR IMPORTED FROM THE PEOPLE'S REPUBLIC OF CHINA AND THE KINGDOM OF SAUDI ARABIA

The International Trade Administration commission of South Africa ("the Commission") accepted an application alleging that boards, sheets, panels and tiles of plaster or of compositions based on plaster, not ornamented, faced or reinforced with paper or paperboard only originating in or imported from People's Republic of China ("PRC") and the Kingdom of Saudi Arabia ("Saudi") is being dumped into the Southern African Customs Union ("SACU"), causing material injury to the SACU industry.

THE APPLICANT

The application was lodged by Saint-Gobain Construction Products South Africa (Pty) Ltd ("the Applicant") and supported by Etex South Africa Building (Pty) Ltd ("Etex") and the Namibian Gypsum Industries ("NGI"). The Applicant is the major producer of the subject product in SACU.

The Applicant submitted *prima facie* evidence to indicate that the subject product originating in or imported from the PRC and Saudi is being imported into the SACU industry at dumped prices, thereby causing material injury to the SACU industry.

This gazette is also available free online at **www.gpwonline.co.za**

THE SUBJECT PRODUCT

The product allegedly being dumped into the SACU industry is board, sheet, panel or tile of plaster or of compositions based on plaster, not ornamented, faced or reinforced with paper or paperboard only ("Gypsum Plasterboard") originating in or imported from the PRC and Saudi, classifiable under tariff sub-headings 6809.11.

THE ALLEGATION OF DUMPING

The allegation of dumping is based on the comparison of normal values in the respective countries of origin and the export prices of the subject products when exported to SACU.

Normal value for the PRC was determined based on a quotation obtained by the Applicant from the domestic manufacturer and seller of the subject product in PRC. Normal value for Saudi was determined based on a quotation obtained by the Applicant from the domestic manufacturer and seller of the subject product in Saudi Arabia.

The export prices were determined based on official import statistics obtained from the South African Revenue Service ("SARS").

THE ALLEGATION OF MATERIAL INJURY

The applicant submitted evidence to show that there is price suppression. The applicant's information indicated a decline in sales and production volumes, profit, productivity, decline in cash flow, return on investment, market share, and increase in inventory.

Cumulative assessment:

Two countries are involved in this investigation. The information shows that the imported products from the PRC and Saudi satisfy the criteria to be cumulatively assessed as the margins of dumping for each country are more than two percent, the volume of imports from each country are above negligibility levels, and the imported products compete with each other and also compete with the SACU like product.

On this basis the Commission decided to cumulatively assess the effect and/or impact of the alleged dumped imports on the issue of material injury to the SACU industry.

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On this basis, the Commission found that there was *prima facie* proof of material injury.

THE ALLEGATION OF THREAT OF MATERIAL INJURY

The applicant submitted information indicating that there is unrestricted disposable capacity of the exporters in PRC and Saudi, significant increase of allegedly dumped imports into the SACU market which indicates the likelihood of substantially increased importation, and that the subject product is entering the SACU market at prices which will have a suppressing effect on SACU prices and are likely to increase demand for further imports.

On this basis, the Commission found that there was *prima facie* proof of threat of material injury to the SACU industry.

CAUSAL LINK

On this basis, the Commission found that there was *prima facie* proof of material injury to the SACU industry, and that there is a causal link between the alleged dumped imports and the material injury suffered by the SACU industry.

PERIOD OF INVESTIGATION

The period of investigation for purpose of determining the dumping margin is from 01 January 2025 to 31 December 2025. The period of investigation for purposes of determining the material injury is from 01 January 2023 to 31 December 2025.

LEGAL PROCEDURAL FRAMEWORK

Having decided that there is sufficient evidence and a *prima facie* case to justify the initiation of an ani-dumping investigation, the Commission has begun an investigation in terms of section 16 of the International Trade Administration Act, 2002 (the ITA Act). The Commission will conduct its investigation in accordance with the relevant sections of the ITA Act and the Anti-Dumping Regulations of the International Trade Administration Commission (ADR).

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Both the ITA Act and the ADR are available on the Commission's website (www.itac.org.za) or from the Trade Remedies section, on request.

PROCEDURES AND TIME FRAMES

In order to obtain the information, it deems necessary for its investigation, the Commission will send non-confidential versions of the application and questionnaires to all known importers and exporters and known representative associations. The trade representative of PRC and Saudi had also been notified.

Importers and other interested parties are invited to contact the Commission as soon as possible in order to determine whether they have been listed and were furnished with the relevant documentation. If not, they should immediately ensure that they are sent copies. The questionnaire has to be completed, and any other representations must be made within the time limit set out below.

The Senior Manager: Trade Remedies II, should receive all responses, including non - confidential copies of the responses, not later than 30 days from the date hereof, or from the date on which the letter accompanying the abovementioned questionnaire was received. The said letter shall be deemed to have been received 7 days after the day of its dispatch.

Late submissions 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 14 days on good cause shown (properly motivated and substantiated), if received prior to the expiry of the original 30-days period. Merely citing insufficient time is not an acceptable reason for extension. Please note that the Commission will not consider requests for extension by the Embassy on behalf of exporters.

The information submitted by any party may need to be verified by the Investigating officers in order for the Commission to take such information into consideration. The

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Commission may verify the information at the premises of the party submitting the information, within a short period after the submission of the information to the Commission. Parties should therefore ensure that the information submitted would subsequently be available for verification. It is planned to do the verification of the information submitted by the exporters within three to five weeks subsequent to submission of the information.

This period will only be extended if it is not feasible for the Commission to do it within this time period or upon good cause shown, and with the prior written consent of the Commission, which should be requested at the time of the submission. It should be noted that unavailability of, or inconvenience to consultants will not be considered to be good cause.

Parties should also ensure when they engage consultants that they will be available at the requisite times, to ensure compliance with the above time frames. Parties should also ensure that all the information requested in the applicable questionnaire is provided in the specified detail and format. The questionnaires are designed to ensure that the Commission is provided with all the information required to make a determination in accordance with the rules of the Anti-Dumping Agreement. The Commission may therefore refuse to verify information that is incomplete or does not comply with the format in the questionnaire, unless the Commission has agreed in writing to a deviation from the required format.

Failure to submit an adequate non-confidential version of the response that complies with the rules set out under the heading **Confidential Information** will be regarded as an incomplete submission.

Parties who experience difficulty in furnishing the information required, or submitting in the format required, are therefore urged to make written applications to the Commission at an early stage for permission to deviate from the questionnaire or provide the information in an alternative format that can satisfy the Commission’s requirements. The

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Commission will give due consideration to such a request on good cause shown.

Any interested party may request an oral hearing at any stage of the investigation in accordance with Section 5 of the ADR, provided that the party indicates reasons for not relying on written submissions only. The Commission may refuse an oral hearing if granting such hearing will unduly delay the finalisation of a determination. Parties requesting an oral hearing shall provide the Commission with a detailed agenda for, and a detailed version, including a non-confidential version, of the information to be discussed at the oral hearing at the time of the request.

If the required information and arguments are not received in a satisfactory form within the time limit specified above, or if verification of the information cannot take place, the Commission may disregard the information submitted and make a finding on the basis of the facts available to it.

CONFIDENTIAL INFORMATION

Please note that if any information is considered to be confidential then a non-confidential version of the information must be submitted for the public file, simultaneously with the confidential version. In submitting a non-confidential version the following rules are strictly applicable and parties must indicate:

- where confidential information has been omitted and the nature of such information;
- reasons for such confidentiality;
- a summary of the confidential information which permits a reasonable understanding of the substance of the confidential information; and
- in exceptional cases, where information is not susceptible to summary, reasons must be submitted to this effect.

This rule applies to all parties and to all correspondence with and submissions to the Commission, which unless indicated to be confidential and filed together with a non-confidential version, will be placed on the public file and be made available to other

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interested parties.

If a party considers that any document of another party, on which that party is submitting representations, does not comply with the above rules and that such deficiency affects that party's ability to make meaningful representations, the details of the deficiency and the reasons why that party's rights are so affected must be submitted to the Commission in writing forthwith (and at the latest 14 days prior to the date on which that party's

submission is due). Failure to do so timeously will seriously hamper the proper administration of the investigation, and such party will not be able to subsequently claim an inability to make meaningful representations on the basis of the failure of such other party to meet the requirements.

Subsection 33(1) of the ITA Act provides that any person claiming confidentiality of information should identify whether such information is *confidential by nature* or is *otherwise confidential* and, any such claims must be supported by a written statement, in each case, setting out how the information satisfies the requirements of the claim to confidentiality. In the alternative, a sworn statement should be made setting out reasons why it is impossible to comply with these requirements.

Section 2.3 of the ADR provides as follows:

"The following list indicates "information that is by nature confidential" as per section 33(1)(a) of the Main Act, read with section 36 of the Promotion of Access to Information

Act (Act 2 of 2000):

- *(a) management accounts;*
- *(b) financial accounts of a private company;*
- *(c) actual and individual sales prices;*
- *(d) actual costs, including cost of production and importation cost;*
- *(e) actual sales volumes;*
- *(f) individual sales prices;*
- *(g) information, the release of which could have serious consequences for the person*

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that provided such information; and

(h) information that would be of significant competitive advantage to a competitor; Provided that a party submitting such information indicates it to be confidential."

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 or threat of material injury must be submitted in writing to the following address:

Physical address

The Acting Senior Manager: Trade Remedies II
International Trade Administration Commission
Block E – The DTI Campus
77 Meintjies Street
SUNNYSIDE
PRETORIA
SOUTH AFRICA

Postal address

The Acting Senior Manager
Trade Remedies II
Private Bag X753
PRETORIA
0001
SOUTH AFRICA

Should you have any queries, please do not hesitate to contact the investigating officers: Mr. Tshinanne Maphagela at email address tmaphagela@itac.org.za, Ms. Makungu Millicent Maluleke at email address mbaloyi@itac.org.za or Mr Musa Mazibuko at email address mmazibuko@itac.org.za.

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DEPARTMENT OF TRANSPORT

NOTICE 4084 OF 2026

AIR SERVICES LICENSING COUNCIL 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: domesticcouncil@dot.gov.za within 21 days of date of the publication thereof.

APPENDIX I (New Applications) (A)

(A) 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.

A) **FUZE AVIATION ACADEMY t/a FUZE AVIATION ACADEMY.** (B) Hangar 4, Oribi Airport, 1 Pharazyn way, Pietermaritzburg, Kwazulu Natal. (C) Class III. (D) Type G3, G4, G5, G8, G13, G16 (RPAS/UAS) (F) Category A4 & H1

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) **IDUBE FORESTRY 2CC** (B)Plot 1488, Kolgans Close (10) Vermont, Hermanus. (C) Class III (D) Type G3, G4, G16(UAS Operations(E) Category H1 (F) Amendment of personnel: Accountable Manager from Elmine Marx to Dwayne Marx; Quality Manager from Jayne Christie to Themba Kekana; Safety Manager from Mykaila Forte to Mary Sofala; Responsible Person Aircraft from Dwayne Marx to Louis McCarthy; Security Manager from Dwayne Marx to Louis McCarthy. Addition of **G code: G5 & G13**

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 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 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) **GLOBAL AVIATION OPERATIONS (PTY) LTD t/a GLOBAL AIRWAYS AND LIFT** (B)Hangar 2, Northen perimeter Road, Precinct 3 OR Tambo International Airport. (C) Class I (D) Type S1 & S2. (E) Category A1 (F) Amendment due to addition of frequency: King Shaka International Aiport- Sir Seewoosagur Ramgoolam International Airport 1(one) frequency per week

BOARD NOTICE 970 OF 2026

INTEGRITY I PUBLIC INTEREST I AUDIT QUALITY

BOARD NOTICE

NOTICE OF AN INVITATION TO COMMENT ON THE PROPOSED COMPETENCY FRAMEWORK (REVISED 2026)

The Independent Regulatory Board for Auditors (IRBA) is a statutory body established in terms of Section 3 of the Auditing Profession Act (Act No. 26 of 2005), as amended.

Sections 4(1)(c) and 7(1)(f) of the Auditing Profession Act 26 of 2005, as amended (the APA), require the IRBA to prescribe competency requirements for auditors. The IRBA meets this responsibility through the prescription of the Competency Framework.

In terms of section 19(1) of the APA, the Board delegates and assigns the duty to formulate and recommend to the Board professional competency requirements for Registered Auditors (RAs) to the Education, training and professional development committee (EDCOM) [Section 4(1)(c) and 7(1)(f) of the APA]. To fulfil this responsibility and undertake the revisions to the Competency Framework, the EDCOM appointed a Competency Framework Task Force as an ad-hoc working group to the committee. The EDCOM appointed all the members of the task force.

The IRBA Board has approved the issuing of the Proposed Competency Framework (Revised 2026), for public comment by **7 September 2026.**

The IRBA Competency Framework was introduced in 2013. Since 2013, there have been numerous developments in the profession, that impact the competencies that RAs are required to develop and maintain, including shifts and developments in response to technological advancements, regulatory change, economic conditions and emerging risks. These developments formed the context against which the Competency Framework was revised.

Overview of the Proposed Revisions

The proposed Competency Framework (Revised 2026) is a comprehensive revision to the Competency Framework. The significant revisions are those indicated below.

Fundamental Shift in Design Philosophy

The proposed framework is repositioned as a principles-based, outcomes-driven regulatory framework, with competencies expressed as observable outcomes and behaviours. The framework is designed to operate at a regulator level and not as a curriculum, syllabus or job description. The proposed framework has been designed to support multiple education and training pathways, enable consistent application across stakeholders and remain adaptable as the profession evolves. This will further enhance and improve its usability across the ecosystem.

Simplified and Integrated Model

The proposed framework introduces a clear integrated model by organising competencies into domains, clusters and competencies. This structure allows users to move from a broad

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Tel 010 496 0600 Fax 086 482 3250 E-mail board@irba.co.za

understanding of what capability areas are required for the specific behaviours and outcomes expected at each stage of development.

Expanded and Enhanced Competency Coverage

The proposed framework is future-orientated and expands technical competency coverage significantly to include competencies relating to sustainability and environmental, social and governance reporting; technology, data analytics and cybersecurity; and business, economic and regulatory analysis.

The Enabling and Professional competency coverage has been expanded to include competencies that support effective performance in increasingly complex, judgement-driven and ethically demanding environments. These competencies recognise that audit quality is not achieved through technical expertise alone, but through the consistent application of sound judgement, disciplined behaviours and principled conduct.

Improved Competency Measurability and Assessment Clarity

Competencies in the proposed framework are defined as principle-based, observable, assessable outcomes, with an explicit focus on measurability and an evidence-based evaluation of competencies. This shift supports the consistent application of the framework across different education and training environments.

Proposed Effective Date

Subject to the comments received, the final Revised Competency Framework will be presented to the IRBA Board for approval and issue in October 2026. The proposed effective date of the Competency Framework (Revised 2026) is 1 April 2027, with a phased in implementation with accredited professional bodies and the Audit Development Programme to take place within 2 years from the effective date.

Request for Comments

The EDCOM welcomes comments on all matters that are addressed in this proposed Competency Framework (Revised 2026), especially those questions that are set out in the Request for Specific Comments section. To assist the IRBA in evaluating responses effectively, respondents are encouraged to reference specific sections, components or competencies within the framework, provide clear reasons for their views, suggest specific wording changes or practical alternatives where relevant, and indicate where they agree with the proposals, as this helps the IRBA assess the level of stakeholder support for the proposed revisions.

Respondents should email their feedback, in Word and PDF formats, to edutrain@irba.co.za. The deadline for submission is **7 September 2026**. To download the Proposed Competency Framework, please visit the IRBA website.

Information Sessions

The IRBA will host information sessions, which respondents are encouraged to attend. These sessions will provide respondents with an overview of the process that was undertaken to revise the Competency Framework and outline the call for comment process and timelines.

For further details of the information sessions please visit the IRBA website.

Nadine Kater

Director: Education and Transformation

BOARD NOTICE 971 OF 2026

CONSTRUCTION INDUSTRY DEVELOPMENT BOARD

NAMES OF CONTRACTORS REMOVED FROM THE CIDB REGISTER OF CONTRACTORS PUBLISHED IN TERMS OF THE CONSTRUCTION INDUSTRY DEVELOPMENT REGULATIONOF 2024

The Construction Industry Development Board hereby publishes in terms of regulation 30(2) of the Construction Industry Development Regulations, the particulars of the findings of the Board as set out in the **Schedule**.

Contractor name	**CRS** (Contractor Registration Service) number	**Company/Corporation Registration Number**	**Nature of Complaint**
Succeding Construction Group	10282517	2021/704994/07	The contractor breached the requirements and conditions of registration by submitting fraudulent documents as track record for grading purpose.
Sanction imposed by cidb			
Effective date: 24 July 2026 The Board orders that: 1. The contractor be removed from the cidb Register of Contractors database.			

Contractor name	**CRS** (Contractor Registration Service) number	**Company/Corporation Registration Number**	**Nature of Complaint**
Zasembo 13 Group	10367263	2020/052792/07	The contractor breached the requirements and conditions of registration by submitting fraudulent documents as track

			record for grading purpose.
Sanction imposed by cidb			
Effective date: 24 July 2026 The Board orders that: 1. The contractor be removed from the cidb Register of Contractors database.			

Contractor name	**CRS** (Contractor Registration Service) number	**Company/Corporation Registration Number**	**Nature of Complaint**
VT Maphanga's General Business (Name changed to) Mashobodela General Business Enterprise	219404	2003/032147/23	The contractor breached the requirements and conditions of registration by submitting fraudulent documents as track record for grading purpose.
Sanction imposed by cidb			
Effective date: 24 July 2026 The Board orders that: 1. The contractor be removed from the cidb Register of Contractors database.			

Contractor name	**CRS** (Contractor Registration Service) number	**Company/Corporation Registration Number**	**Nature of Complaint**
Manekwane Business Enterprise	119654	2003/022472/23	The contractor breached the requirements and conditions of registration by submitting fraudulent documents as track

			record for grading purpose.
Sanction imposed by cidb			
Effective date: 24 July 2026 The Board orders that: 1. The contractor be removed from the cidb Register of Contractors database.			

Contractor name	**CRS** (Contractor Registration Service) number	**Company/Corporation Registration Number**	**Nature of Complaint**
Data Tekhouse	10272022	2016/107322/07	The contractor breached the requirements and conditions of registration by submitting fraudulent documents as track record for grading purpose.
Sanction imposed by cidb			
Effective date: 24 July 2026 The Board orders that: 1. The contractor be removed from the cidb Register of Contractors database.			

Contractor name	**CRS** (Contractor Registration Service) number	**Company/Corporation Registration Number**	**Nature of Complaint**
Masase Trading	10226758	2015/177166/07	The contractor breached the requirements and conditions of registration by submitting fraudulent documents as track record for grading purpose.

Sanction imposed by cidb
Effective date: 24 July 2026 The Board orders that: 1. The contractor be removed from the cidb Register of Contractors database.

Contractor name	**CRS** (Contractor Registration Service) number	**Company/Corporation Registration Number**	**Nature of Complaint**
Nduna Mhlengi	10131683	2017/147354/07	The contractor breached the requirements and conditions of registration by submitting fraudulent documents as track record for grading purpose.
Sanction imposed by cidb			
Effective date: 24 July 2026 The Board orders that: 1. The contractor be removed from the cidb Register of Contractors database.			

Contractor name	**CRS** (Contractor Registration Service) number	**Company/Corporation Registration Number**	**Nature of Complaint**
Mtiro Trading and Projects	10285053	2021/745587/07	The contractor breached the requirements and conditions of registration by submitting fraudulent documents as track record for grading purpose.
Sanction imposed by cidb			
Effective date: 24 July 2026			

The Board orders that:

1. The contractor be removed from the cidb Register of Contractors database.

Contractor name	**CRS** (Contractor Registration Service) number	**Company/Corporation Registration Number**	**Nature of Complaint**
Kamazwane Food and Kulture	10037086	2013/226237/07	The contractor breached the requirements and conditions of registration by submitting fraudulent documents as track record for grading purpose.
Sanction imposed by cidb			
Effective date: 24 July 2026 The Board orders that: 1. The contractor be removed from the cidb Register of Contractors database.			

Contractor name	**CRS** (Contractor Registration Service) number	**Company/Corporation Registration Number**	**Nature of Complaint**
Ncamsile Contracting and Trading	10117950	2012/020459/07	The contractor breached the requirements and conditions of registration by submitting fraudulent documents as track record for grading purpose.
Sanction imposed by cidb			
Effective date: 24 July 2026 The Board orders that:			

1. The contractor be removed from the cidb Register of Contractors database.

Contractor name	**CRS** (Contractor Registration Service) number	**Company/Corporation Registration Number**	**Nature of Complaint**
MKZ Trading and Projects	10371229	2022/861382/07	The contractor breached the requirements and conditions of registration by submitting fraudulent documents as track record for grading purpose.
Sanction imposed by cidb			
Effective date: 24 July 2026 The Board orders that: 1. The contractor be removed from the cidb Register of Contractors database.			

Contractor name	**CRS** (Contractor Registration Service) number	**Company/Corporation Registration Number**	**Nature of Complaint**
Tess Construction and Developments	10175122	2018/394086/07	The contractor breached the requirements and conditions of registration by submitting fraudulent documents as track record for grading purpose.
Sanction imposed by cidb			
Effective date: 24 July 2026 The Board orders that: 1. The contractor be removed from the CIDB Register of Contractors database.			

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