TWO DUANTO BEAR IN TO TOTAGE IN BUILDING SOUTH	FOR OFFICIAL USE		nployment details of Spouse	at which you can be conta	date of appro	8
R OFFICIAL USE			Note: Any incorrect or misleading information or false documents furnished in support of this application may result in the application not being considered.  Ne the undersigned, declare that the photograph(s) submitted in support of this application is/are a true likeness of the person(s) whose names pear on the reverse side thereof, that the details reflected in this application and supporting documents are true and correct and that it is y/our intention to reside permanently in South Africa. I undertake to inform the Department of any change of address whilst the application is sing processed with the understanding that in the event of failure to do so the Department will not be responsible for any resultant breakdown in mmunication.	Note: Any incorrect or misleading information or false documents furnished in support of this application may result in the application not being considered.  Note: Any incorrect or misleading information or false documents furnished in support of this application may result in the application not being so the undersigned, declare that the photograph(s) submitted in support of this application is/are a true likeness of the person(s) whose names pear on the reverse side thereof, that the details reflected in this application and supporting documents are true and correct and that it is your intention to reside permanently in South Africa. I undertake to inform the Department of any change of address whilst the application is ning processed with the understanding that in the event of failure to do so the Department will not be responsible for any resultant breakdown in mmunication.	Employment details of Spouse  Wote: Any incorrect or misleading information or false documents furnished in support of this application may result in the application not being considered.  Note: Any incorrect or misleading information or false documents furnished in support of this application is/are a true likeness of the person(s) whose names appear on the reverse side thereof, that the details reflected in this application and supporting documents are true and correct and that it is any/our intention to reside permanently in South Africa. I undertake to inform the Department of any change of address whilst the application is being processed with the understanding that in the event of failure to do so the Department will not be responsible for any resultant breakdown in communication.	:
R OFFICIAL USE	•		Note: Any incorrect or misleading information or false documents furnished in support of this application may result in the application not being considered.	nployment details of Spouse.  Note: Any incorrect or misleading information or false documents furnished in support of this application may result in the application not being considered.	ostal address and telephone number at which you can be contacted in South Africa  mployment details of Spouse  Note: Any incorrect or misleading information or false documents furnished in support of this application may result in the application not being considered.	nes is in in
n support of this application is/an is application and supporting docke to inform the Department of are to do so the Department will no	Ne the undersigned, declare that the photograph(s) submitted in support of this application is/are a true likeness of the person(s) whose names ppear on the reverse side thereof, that the details reflected in this application and supporting documents are true and correct and that it is y/our intention to reside permanently in South Africa. I undertake to inform the Department of any change of address whilst the application is sing processed with the understanding that in the event of failure to do so the Department will not be responsible for any resultant breakdown in gnature of applicant	Ne the undersigned, declare that the photograph(s) submitted in support of this application is/are a true likeness of the person(s) whose names spear on the reverse side thereof, that the details reflected in this application and supporting documents are true and correct and that it is y/our intention to reside permanently in South Africa. I undertake to inform the Department of any change of address whilst the application is sing processed with the understanding that in the event of fallure to do so the Department will not be responsible for any resultant breakdown in gnature of applicant		nployment details of Spouse	at which you can be conta	
yes state date of application date of approval or rejection, or rejection, or cancellation, and reasons for jection/cancellation  State datess and telephone number at which you can be contacted in South Africa  Indoyment details of Spouse  Note: Any incorrect or misleading information or false documents furnished in support of this application may result in the application not being considered.  Not the undersigned, declare that the photograph(s) submitted in support of this application is/are a true likeness of the person(s) whose names upear on the reverse side thereof, that the details reflected in this application and supporting documents are true and correct and that it is sing processed with the understanding that in the event of failure to do so the Department will not be responsible for any resultant breakdown in gnature of applicant  Date  Date  Date	yes state date of application date of approval or rejection, or rejection, or cancellation, and reasons for section/cancellation date of approval or cancellation or date of approval or cancellation or cancellation.  Solution or cancellation or cancellation or date of approval or contacted in South Africa  Note: Any incorrect or misleading information or false documents furnished in support of this application may result in the application not being or considered.  We the undersigned, declare that the photograph(s) submitted in support of this application is/are a true likeness of the person(s) whose names of the reverse side thereof, that the details reflected in this application and supporting documents are true and correct and that it is not person the reverse side thereof, that the details reflected in this application is documents are true and correct and that it is not person the reverse side thereof, that the details reflected in this application of any change of address whilst the application is ming processed with the understanding that in the event of failure to do so the Department will not be responsible for any resultant breakdown in gnature of applicant.  Date  Date	yes state date of application date of approval or rejection, or rejection, or cancellation, and reasons for jection/cancellation date of approval or date of application or date of approval or date decision or date documents furnished in support of this application may result in the application not being on the reverse side thereof, that the details reflected in this application and supporting documents are true and correct and that it is posensed with the understanding that in the event of failure to do so the Department of any change of address whilst the application is ing processed with the understanding that in the event of failure to do so the Department will not be responsible for any resultant breakdown in gnature of applicant		yes state date of applicationdate of approvalor rejection,		
Have you ever applied for asylum in the Republic of South Africa [Yes.No]  If yes state date of application date of approval date of approval or rejection, or rejection, or cancellation and reasons for rejection/cancellation  Postal address and telephone number at which you can be contacted in South Africa  Employment details of Spouse  Employment details of Spouse  Employment details of Spouse  Note: Any incorrect or misleading information or false documents furnished in support of this application may result in the application not being considered.  Note: Any incorrect or misleading information or false documents turnished in support of this application is/are a true likeness of the person(s) whose names appear on the reverse side thereof, that the details reflected in this application and supporting documents are true and reverse side thereof, that the details reflected in this application and supporting documents are true and reverse and that it its being processed with the understanding that in the event of failure to do so the Department will not be responsible for any resultant breakdown in Signature of legal spouse  Date  Date  Date	yes you ever applied for asylum in the Republic of South Africa   Yes/Noj   or rejection, or rejection, or rejection, or cancellation and reasons for jection/cancellation or dete of approval or dete of application or rejection, or rejection, or cancellation and reasons for jection/cancellation or cancellation or cancellation and reasons for jection/cancellation or cancellation and reasons for jection/cancellation or cancellation and reasons for jection/cancellation or cancellation and reasons for jection-cancellation or cancellation and reasons for jection-cancellation or cancellation and reasons for jection-cancellation or cancellation .	ave you ever applied for asylum in the Republic of South Africa [Yes/Noj]  yes state date of application date of approval date of application or false documents furnished in support of this application may result in the application not being solving information or false documents furnished in support of this application is/are a true and correct and that it is your interverse side thereof, that the details reflected in this application and supporting documents are true and correct and that it is your interverse side thereof, that the details reflected in this application and supporting documents are true and correct and that it is you intention to reside permanently in South Africa. I undertake to inform the Department of any change of address whilst the application is mmunication.  Date		ave you ever applied for asylum in the Republic of South Africa <b>[Yes/No]</b> or rejection,	ave you ever applied for asylum in the Republic of South Africa [Yes/No]	
On what date did you leave your country of origin? If so please indicate —  Have you ever applied for asylum in the Republic of South Africa [Yes/No]  If yes state date of application — date of approval — or rejection, — or cancellation, and reasons for rejection/cancellation — or application — or cancellation, and reasons for rejection/cancellation — or application — or cancellation, and reasons for rejection/cancellation — or date of approval — or application in the special address and telephone number at which you can be contacted in South Africa  Employment details of Spouse — more representation or false documents furnished in support of this application may result in the application not being paper on the reverse side thereof, that the details reflected in this application and supporting documents are true and correct and that it is appear on the reverse side thereof, that the details reflected in this application and supporting occuments are true and correct and that it is being processed with the understanding that in the event of failure to do so the Department of any change of address whilst the application is communication.  Date — Dat	we you ever applied for asylum in the Republic of South Africa [Yes/No]  res state date of application date of approval date of approval or rejection, or rejection, or cancellation, and reasons for ection/cancellation  stal address and telephone number at which you can be contacted in South Africa  stal address and telephone number at which you can be contacted in South Africa  stal address and telephone number at which you can be contacted in South Africa  stal address and telephone number at which you can be contacted in South Africa  stal address and telephone number at which you can be contacted in South Africa  stal address and telephone number at which you can be contacted in South Africa  stal address and telephone number at which you can be contacted in South Africa  stal address and telephone number at which you can be contacted in South Africa  stal address and telephone number at which you can being that the details reflected in this application and support of this application is and correct and that it is four intention to reside permanently in South Africa. I undertake to inform the Department will not be responsible for any resultant breakdown in manufication.  Date  Date	In what date did you leave your country of origin? If so please indicate—  we you ever applied for asylum in the Republic of South Africa [Yes/No]  res state date of application  stal address and telephone number at which you can be contacted in South Africa  stal address and telephone number at which you can be contacted in South Africa  stal address and telephone number at which you can be contacted in South Africa  stal address and telephone number at which you can be contacted in South Africa  stal address and telephone number at which you can be contacted in South Africa  stal address and telephone number at which you can be contacted in South Africa  stal address and telephone number at which you can be contacted in South Africa  stal address and telephone number at the application or false documents furnished in support of this application may result in the application is a true and correct and that it is south Africa. I undertake to inform the Department of any change of address whilst the application is ing processed with the understanding that in the event of failure to do so the Department will not be responsible for any resultant breakdown in manufaction.  Date		n what date did you leave your country of origin? If so please indicate —  Ne you ever applied for asylum in the Republic of South Africa [Yes/No]	n what date did you leave your country of origin? If so piease indicate — Ive you ever applied for asylum in the Republic of South Africa [Yes/No]	

# PLEASE READ THE FOLLOWING IN CONJUNCTION WITH THE ACCOMPANYING INSTRUCTIONS:

IMPORTANT – (a)
(b)
(d)

The documents listed below must be submitted with the application by the persons indicated.

"Applicants" on this page includes all persons who intend to apply for a permanent residence permit.

Documents which are not in English, must be accompanied by certified translations into English.

The applicant and his/her spouse must sign the application. Where the applicant is a child both parents must sign.

<del></del> -	2 Passport photographs	All applicants	All amplicante
			A recent, passport-type, full race protograph bearing the names of
			the applicant on the reverse side thereof. Machine-type or instant
	The second secon		photographs are not acceptable.
×	Birth certificate, or extract from birth record	All applicants	Only original documents or certified copies thereof are acceptable.
(L)	Change of name document i.e. Statutory Declar	All applicants where applicable	
	ration or Deed Poll/or Adoption Certificate	an approants where approants	
4	Medical report	All applicants	Report must not be older than six months at time of submission
5.	Radiological report,	All applicants 12 years of age and	The report must not be older than six months at time of submission.
		older (excluding pregnant women)	("Mass X-ray" cards and separate radiological reports acceptable).
9.	Police certificate(s)	All applicants 18 years of age and	In respect of all countries of residence in excess of 12 months
		older	(originals only)
۲.	Marriage certificate, or extract from marriage	All applicants who are married or in a spousal relationships	ousal relationships
	record. Documentary proof of customary union		
	where applicable, prescribed affidavit and		
	Notarial contract where applicable		
ω.	Final divorce decree(s) and all relevant court	All applicants who are divorced	Required irrespective of whether or not the person concerned has
	orders regarding custody and maintenance of		since re-married
	children. Written consent of parents where		
	applicable		
о 6	Death certificate of late spouse	All widows and widowers	
10.	Highest educational, trade and/or professional	All applicants who will be employed in	N.B. (a) Full details of training and experience are to be provided
	certificates	South Africa	when relevant to confirm the applicant's ability and/or
<del>[</del>	Work references or certificates of service	All applicants who apply on grounds of	qualifications to perform the intended occupation in South
	(covering at least the last five years)	a job offer or work permit	Africa.
			(b) Documents listed under (a) must indicate the actual dates
			occupation in which trained and/or employed.
			(c) Present employer's work reference may be submitted at a
			later date if so desired.

12	_	(a) Offer for permanent employment	All applicante who controls on age.	# - F
	_	(b) Certification by the (prospective)	Defination and Amployment in terms of	The work offer must state clearly the occupation to be followed and
		employer's chartered accountant as	Section 27(a) of the Act	salary offered and must not be older than three months at time of
	_	required by section 27(a)(i)		Submission.
	_	(c) Certification by the Department of Labour		
	-	as required in section 27(a)(ii)		
	~	(a) A letter from a foreign or South African	All applicants seeking permanent resider	all all the conference of a springer of and
		organ of State, or from an established	section 27(b) of the Act	section 27(h) of the Act
	_	South African academic, cultural or	101/2010 (2)	
		business body confirming the applicant's		
	=	<ul><li>(b) Testimonials from previous employers, if</li></ul>		
		applicable, and a comprehensive		
	<u>ڪ</u>	<ul> <li>(c) Other proof to substantiate exceptional</li> </ul>		
		skills qualifications, such as publications		
		and testimonials		
14.	۳	(a) Proof of availability of funds for transfer	All applicants who apply for permanent	
		from abroad, if applicable	recidence on grounds of integraling to	if the applicant request the Department to reduce the prescribed
	=	(b) Proof of planned registration with the	establish a business in the remaining to	capitalisation requirement in terms of section 27(c)(i) of the Act, a
			catabilari a prosilicasa iri irie republic	request from the Department of Trade and Industry or
		the nature of business		documentation supporting a claim of national interest must be
	9	(c) Proof of compliance with regulation 24 and		attached
		section 27(c) of the Act		
15.	100	(a) All the requirements under item 14	All applicants who early for	
	9		residence on grounds of integral of	If the applicant requests the Department to reduce the prescribed
			invest in an established business in	capitalisation requirement in terms of section 27(c)(i) of the Act, a
		agreements	the republic	decimentation control of the property of the p
	9			upcumentation supporting a claim of national interest must be
	૭	(d) Proof of compliance with regulation 24 and		
	-	- 1		
16.	<u></u>	(a) Proof of compliance with sections 27(c) of	All applicants seeking permanent residen	All applicants seeking nermanent residence in terms of section 27/4) of the Act is seeking to the Act is seeking the Act is see
		the Refugees Act, 1998 (Act no 130 of	refugees	or at the section of the Act III respect of qualifying
	<u>e</u>	(b) Affidavit with regard to aliases used by the	NB. In respect of applications on this grow	NB. In respect of applications on this around the documentation raciniraments listed under term 0.43 (2) (2)
	_	applicant and/or family members, if	in the case of a foreign marnage, (h) to (i	in the case of a foreign marriage, (h) to (m), and (n) of Schedule A of the Regulations, if the original is not
17	(	applicable	available, may be replaced with a sworn	available, may be replaced with a sworn affidavit in respect of the country fled from only
	د	Certification by a chartered accountant as	All applicants who intend to retire in Sout	All applicants who intend to retire in South Africa, or who will be self-employed/independent masse or who
	<u>.</u>	required in section 27(e) and regulation 33(16)	will be entering into a business partnership	di d
	_			

1 <u>8</u>	Certification by a chartered accountant as	All applicants of independent means seeking permanent residence in terms of section 27/g) of the Act
	required in section 27(f), reflecting proof of a minimum net worth of R10 million and having	
	tendered R75 000 to the Department as the fee referred to section 27(f) in the Act	
19.	Consent of both parents or guardian (minors	All single applicants under the age of 21
	as recognised by meir country of origin)	
20.	(a) Proof of permanent employment offer	All applicants who have been on work permits and seek permanent residence in terms of section 26(a) of the
	and/or proof of 5 years continuous work	Act
	permit status	
	(b) Certification by the employer's chartered	
	accountant contemplated in section	
	26(a)(i)	
	(c) Certificate by the Department of Labour contemplated in section 26(a)(ii)	
21.	Declaration of support for the application by	All applicants seeking permanent residence on grounds of a spousal relationship
	the spouse who is the citizen or resident	
22	Indostruction by some of the second of the second	
.,	order taking by paretits with regard to inhandial support	In respect of a child under the age of 21 of a citizen of resident

# DEPARTMENT OF HOME AFFAIRS PERMANENT RESIDENCE PERMIT

[Sections 26 and 27 of Act No 13 of 2002 : Regulation 33]

Reference					
In terms	of the provis	sions of sect	tion 26*	or 27* of the Ir	nmigration Act, 2002,
(Act No 13 of	2002), subsect	ion		; in the category of	
Surname and	first names	Date of birth	Gender	Occupation/capacity/ category in which holder is granted permit	Permit No
		•			of taking up permanent
residence, or	if he/she on the	he date of appr	oval of the	application, already so	journs therein legally, to
reside permai	nentiy.				
If the holder	of this permit	fails to enter the	e Republic	of South Africa for the	purpose of permanent
residence wit	thin one year, th	ne Department o	of Home Aff	airs may withdraw this re	esidence permit.
Date of issue			OFFI	CE STAMP	
	r				
· ·					
	L DIRECTOR			GIONAL DIRECTOR	
(ii) If both (iii) The p (iv) This p (v) Permaright t	n signatures do Permit number n Permit is issued anent residents o permanent re	without erasure who are absent	ve, this permonal common or amenda from the Republic. A	nit is invalid. unications with the Depa nent. epublic for three years o	
ENDORSEME	ENTS/CONDITI	ons			
••••••					
*Delete which	never is not ap	plicable			Control No

# REPUBLIC OF SOUTH AFRICA DEPARTMENT OF HOME AFFAIRS

# **CERTIFICATE OF ARRIVAL**

Sections	26 and	27 of	Act No	13 of	2002 :	Regulation	on 33)
	Ref	erenc	e	. <b>.</b>			

	; in the category of			
Surname	and first name	Date of birth	Gender	Permit No
	•			aking up permanent residence,
	the date of approval of the app			
			-	se of permanent settlement be
	the permanent res	,		
	.ue	ENTRY S	TAMP	
	icer			
Rank				
			*****	
	or-General : Home Affairs		or-General : Ho	
Print Surn	ame and initials	Print sur	name and initia	ls
1.		NDED TO THE IMMIG	RATION OFFIC	DRIGINAL OF THE PERMAN ER AT THE PORT OF ENTRY (
2.	F THE PURPOSE OF T			THE PERMANENT SETTLEM
3.	THE REGION CONCERNS	D, ON THE ARRIVAL	AND ENTRY O	O THE REGIONAL DIRECTOR OF THE PERMIT HOLDER UNI LEMENT IN THE REPUBLIC.
4.	THE APPLICANT SHOUL	IGNORE THIS CERT	IFICATE IF ALE	READY PERMENENTLY SETTI

# REPUBLIC OF SOUTH AFRICA DECLARATION OF A FOREIGNER AS AN UNDESIRABLE PERSON [Section 30 of Act No 13 of 2002 : Regulation 35]

1.	2002) <b>геаs</b> o	, you are, hereby, declared an un	of the Immigration Act, 2002, (Act No 13 of desirable person because of the following
2.	*(a)	In terms of section 10(4) of the sa	id Act;
	*(b)	Being an illegal foreigner in term 10(4) and 48 of the said Act;	ns of section 1(1)(xviii) read with section
	*(c)	Having become an illegal foreign section 10(4) of the said Act;	ner in terms of section 1(1)(xviii) read with
3.	*(a)	You do not qualify for either a terrinto the Republic of South Africa.	porary residence permit or for admission
	*(b)	deemed to have lapsed. Should	e the Republic by hours of validity of any permit you may hold shall be you fail to do so on or before this date, you and subject to a fine or imprisonment and
4.	in ten	ms of section 8(1) of the Act you are epartment to review this declaration	e entitled to make written representations to within 10 days.
IMMI		N OFFICER/DIRECTOR	DATE:
PLAC			APPOINTMENT NO (IF AN
'Dele	te which	n is not applicable.	IMMIGRATION OFFICER)
	i ackn	owledge receipt of the original of this	s notice.
	SIGNA	ATURE OF UNDESIRABLE PERSO	 N
	1. 2.	*I do not wish to make representa No 13 of 2002, to make represe	nake representations to the Department. ations/I wish, in terms of section 8(1) of Ac entations to the Department to review the able person. Written representations are
	Date :		Signature of person making Representation
	Place		

\*Delete which is not applicable.

# **REPUBLIC OF SOUTH AFRICA**

# NOTICE TO PERSON TO PRODUCE EVIDENCE IN HIS/HER POSSESSION, CUSTODY OR UNDER HIS/HER CONTROL WHICH IS RELEVANT TO AN INVESTIGATION IN TERMS OF THE IMMIGRATION ACT, 2002 TO AN IMMIGRATION OFFICER

[Section 33(4)(b) of Act No 13 of 2002: Regulation 38(3)]

To (full names)					
Identity or passport number					
Residential Address		Physica	l Work Address		
YOU ARE HEREBY called upon in terms of section 33(4)(b) of the Immigration Act, 2002 to produce the article(s) infra to immigration officer (name of immigration officer)					
Article	Description		Number of articles		
THE REASON why the said articles(s) *is/are to be produced is specified infra:  The original hereof was today handed to the aforementioned personally and the import thereof explained to *him/her.					
Place:					
Date: Signature of *Immigration Officer/Sheriff					
Signature of recipient		ceived: .			
*Delete which is not applicable					

### **REPUBLIC OF SOUTH AFRICA**

# NOTICE TO PERSON TO APPEAR BEFORE AN IMMIGRATION OFFICER RELEVANT TO AN INVESTIGATION IN TERMS OF THE IMMIGRATION ACT, 2002

[Section 33(4)(c) of Act No 13 of 2002: Regulation 38(3)]

To (full names)	
Identity or passport number	
Residential Address	Physical Work Address
appear before immigration officer (name of the control of the cont	os of section 33(4)(c) of the Immigration Act, 2002 to of immigration officer)
<b>THE REASON</b> why you are called upon <i>infra</i> .	to appear before the immigration officer is specified
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
The original hereof was today handed to explained to *him/her.	the aforementioned personally and the import thereof
Place:	
Date:	Signature of *Immigration Officer/Sheriff
Signature of recipient	Date received:

\*Delete which is not applicable

# **REPUBLIC OF SOUTH AFRICA**

### **ENTRY AND SEARCH WARRANT**

[Section 33(5) of Act No 13 of 2002: Regulation 38(4)]

	TO IMMIGRATION OFFICER				
to beli upon t	as it appears to me from information received under oath that there are rea eve that, within the Magisterial District of	there is in or			
*(i) *(ii)	an illegal foreigner or, something which relates to the employment, training, occupation of, or re premises of an illegal foreigner in violation of the Immigration Act, 2002	sidence on such			
YOU ARE THEREFORE authorised to enter the identified premises <i>supra</i> during *day time/any time/night time/during the hours of					
(a)	interrogate any person found in or on such premises				
(b)	examine any thing in or upon such premises				
(c)	request from the person who is in control of such premises or in whose possession or under whose control any thing is when it is found, or who is upon reasonable grounds believed to have information with regard to such thing, an explanation or information and against the issue or a receipt make copies of or extracts from any such thing found upon or in such premises				
(d)	apprehend an illegal foreigner, subject to section 34(1)				
and to	deal with such person, illegal foreigner or thing according to law.				
Given ı	under my hand at this this				
day of					
	IMMIGRATION COURT				
}					
	Signature				
	Designati	on			

<sup>\*</sup>Delete which is not applicable

# REPUBLIC OF SOUTH AFRICA

# RECEIPT OF ITEMS SEIZED/REMOVED DURING SEARCH OF PREMISES

[Section 33(5)(c) of Act No 13 of 2002: Regulation38(5)]

I,		(full names)				
Rank	Appointment number Off	īce				
hereby acknowledge receipt of the following items seized in terms of section 33(5)(c) of the Immigration Act, 2002 from the premises of						
Item	Description	Quantity				
Signed at	Total No of  Date:	items				
Signature of Immigration Officer		Z STAMP				
Appointment number:  Receipt register control number.  File number:						

# **REPUBLIC OF SOUTH AFRICA**

# **NOTIFICATION OF DEPORTATION**

[Section 34(1)(a) and (b) of Act No 13 of 2002: Regulation 39(1)]

10	
1.	As you are hereby declared an illegal foreigner, you are hereby notified that you are to be deported to your country of origin, namely
2.	In terms of section $34(1)(a)$ and (b) of the Immigration Act, 2002 (Act No 13 of 2002) you have the rights to:
	<ul> <li>Appeal such decision in terms of section 8 of the Act within 11 calendar days.</li> <li>At any time request any officer attending to you to have your detention for the purpose of deportation confirmed by a warrant of the Court, which, if it is not issued in 48 hours of your request, shall cause your immediate release.</li> </ul>
NB:	Should you choose not to exercise your rights <i>supra</i> you will be detained pending your deportation. Should you exercise your rights, <i>supra</i> you will remain in custody and may not be deported before the relevant decision is final.
	You will not be allowed to return to the Republic without the necessary legal authority as is stipulated in section 34(5)(a) of the Act.
	tion Officer Date:
Appointr	ment number: Place:
ACKN	OWLEDGEMENT OF RECEIPT OF NOTIFICATION OF DEPORTATION
	acknowledge receipt of the original notification of deportation in which my rights in terms of section 34(1)(a) of the Immigration Act, 2002 (Act No 13 of 2002) were explained to me.
After du	ue consideration I have decided to:
*1, *2, *3, *4, *5, *6.	Await my deportation at the first reasonable opportunity, whilst remaining in custody. Appeal the decision to deport me. Not appeal the decision to deport me. Have my detention confirmed by a warrant of the Court. Not have my detention confirmed by a warrant of the Court. Leave the RSA within 14 days hereof which departure will be regarded as voluntary and will not be recorded by the Department as a deportation, unless I was deported or I used this option before, provided that the Department has satisfied itself of my genuine intention and available means to do so.
*delete	if not applicable
	Date:
Place:	

# **REPUBLIC OF SOUTH AFRICA**

# COURT WARRANT OF DETENTION OF AN ILLEGAL FOREIGNER

[Sections 34(1) and 34(5) and 34(8) of Act No.13 of 2002: Regulation 39(2)]

	Station Commis	ssioner		
	Head of Prison			
	***************************************			
liable such Immig	to *deportatior *deportation/ren	n/removal noval, in te	from the Republic and for detention penderms of section *34(1) / *34(5) / *34(8) of the hereby authorised and ordered to detain the section to the section to detain the section is a section to detain the section is a sec	ing the
until s	such time * he/s	he is *dep	orted/removed from the Republic.	
	deportation of solution of solution ()		n in terms of the Immigration Act, 2000 (Act	13
immiq regula	gration officer	by mean the regula	ected without the written authority of is of a warrant of release referred to itions published in terms of section 7 of t 13 of 2002).	in
immig regula Immig Given	gration officer ation 39(12) of t gration Act, 200 under my	by mean the regula 2 (Act No	is of a warrant of release referred to itions published in terms of section 7 of to 13 of 2002).	in
immig regula Immig Given	gration officer ation 39(12) of t gration Act, 200	by mean the regula 12 (Act No hand at	is of a warrant of release referred to itions published in terms of section 7 of t 13 of 2002).	in he
immig regula Immig Given	gration officer ation 39(12) of t gration Act, 200 under my	by mean the regula 12 (Act No hand at	is of a warrant of release referred to itions published in terms of section 7 of t 13 of 2002).	in :he this

<sup>\*</sup>Delete what is not applicable

Annexure 32A

# REPUBLIC OF SOUTH AFRICA DEPARTMENT OF HOME AFFAIRS

# ADMINISTRATIVE WARRANT OF DETENTION OF AN ILLEGAL FOREIGNER

[Sections 34(1), 34(5) or ) of Act No.13 of 2002: Regulation 39(2)]

То:	Station Commissioner Head of Prison	
and h and fo / *34(	nas made *himself/herself liable or detention pending such *depo	to *deportation/removal from the Republic ortation/removal, in terms of section *34(1) Act, 2002 you are hereby requested to
until s	such time * he/she is *deported/r	emoved from the Republic.
immig regul	gration officer by means of	without the written authority of an a warrant of release referred to in published in terms of section 7 of the 2002).
lmmig	gration Officer	
Appoi	ntment number	
Date:		· • • • • • • • • • • • • • • • • • • •
		OFFICE STAMP
Place:		
Telepi	hone number	
*Delete v	what is not applicable	

### REPUBLIC OF SOUTH AFRICA

# NOTIFICATION OF EXTENSION OF DETENTION WHILST AWAITING DEPORTATION

[Section 34(1)(d) of Act No 13 of 2002: Regulation 39(5)]

To: (full names of detainee)	
At: (name of detention facility)	
You are hereby notified that in view of the fact that	your detention pending the execution of
the warrant for your deportation to	issued
on is likely to exceed 30 ca	elendar days on for
the reasons mentioned in the affidavit on the revers	se side of this notice. I am under section
34(1)(d) of the Immigration Act, 2002 obliged to su	bmit the matter for consideration to the
magistrate of the Court at	on or before
You are entitled to submit in writing whatever repre	sentations you wish to be considered by
the magistrate of the Court who will rule on your ex	tended detention and you are requested to
hand me such representations on or before	If you require
assistance, you should approach the head of the ins	stitution where you are being detained.
	OFFICE STAMP
Immigration Officer	
Appointment number:	;
Date:	
Place:	

# **REPUBLIC OF SOUTH AFRICA**

# COVER SHEET: APPLICATION FOR THE EXTENSION OF THE DETENTION OF AN ILLEGAL FOREIGNER WHILST AWAITING HIS/HER DEPORTATION

[Section 34(1)(d) and 34(2) of Act No 13 of 2002: Regulation 39(5)(c)]

To: The	clerk c	of the Co	ourt
Re: I	Extensi	ion of d	etention of (full names of detainee)
I	Detaine	ed at	
	1.	Piease	e refer this matter for consideration of the magistrate of the court in
		terms	of section 34(1)(d) of the Immigration Act, 2002 and regulation 39(4) to
		(6) ma	de thereunder.
2	2.	The fo	llowing documents are attached:
		(a)	certified copy of the warrant of detention of (full names)
			issued on
		(b)	notification to the detained on personal time 20/1) of the
		(D)	notification to the detainee as per regulation 39(1) of the Immigration Regulations, duly completed and
			minigration regulations, duly completed and
		(c)	representation by the said detainee.
		(-)	
Signed a	t	<b>.</b>	on this day of
			20
Immigrat	ion Off	icer	
Appointm	ent nu	mber:	

# DECISION BY MAGISTRATE OF THE COURT

After (	perusing	the documentation referred to in paragraph 2 above/* and after further
invest	igation	referred to in regulation of the regulations
publis	hed in te	erms of section 7 of the Immigration Act, 2002, I hereby –
	*1.	Confirm the order for detention of
		on good grounds as reasonable and necessary; or
	*2.	Set aside the order for the detention of
		as unwarranted or unreasonable, and I direct that the said
		be released from custody immediately and/or
	*3.	Make the following order in addition to the order made under
		paragraph 1 or 2:
Given	under	my hand at this
day of		
uay u		
		Signature
		Designation

<sup>\*</sup>Delete which is not applicable

# **AFFIDAVIT**

I, (full names of deponent)state herewith
under oath / solemnly declare:
I am a duly appointed immigration officer stationed at:
I have ordered the detention of (full names of detainee)
because the warrant for his/her deportation issued by me on
could for the following reasons not be executed immediately *
and his or her detention was on good grounds considered reasonable and necessary because *
It is likely to be necessary that the said (full names of detainee)
be detained for longer than (state period)
because *
4. I append hereto certified copies of the following documentation as proof of my endeavours to expedite the deportation of the said (full names of detainee)

and or to ensure that he/she is not detained for longer than what is reasonable and necessary:
(a)
(b)
(c)
(d)
Signed at on this day of 20
Immigration Officer
Appointment number:

\* use separate sheet(s) of paper, if necessary

# REPUBLIC OF SOUTH AFRICA

### WARRANT OF DETENTION OF A PERSON SUSPECTED TO BE AN ILLEGAL **FOREIGNER**

[Section 34(2)(or section 41 of Act No 13 of 2002: Regulation 39(8)]

To: Stat	tion Commissioner/Head of Prison		
1.	WHEREAS (full forenames and surname of	f detainee)	
	is, for the reasons stated in the attached a		
	me (full names of immigration officer/poli		
	in terms of section 3(1)(e) read with secti		002 (Act No 13 of 2002) that he/she is
	entitled to be in the Republic; and		
	WHEREAS it is deemed necessary to detail	in the said	
	for the following reasons:		
	YOU ARE HEREBY ordered to detain the sa	aid	
	UNTIL his or her <i>prima facie</i> status or citiz		
2.	A copy of this detention warrant was hand	ded to the immigration officer sta	itioned at
	on:	Date:	Time:
Given of			this
	IMMIGRATION COURT	]	
			Signature
}			
		••••	Designation
1			Designation
*Doloto	which is not applicable	,	

Delete which is not applicable

# REPUBLIC OF SOUTH AFRICA ORDER TO AN ILLEGAL FOREIGNER TO DEPOSIT A SUM TO COVER EXPENSES RELATING TO DETENTION, DEPORTATION AND OTHER COSTS

[Section 34(3) of Act No 13 of 2002 : Regulation 39(9)]

		· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·					
WHER	EAS you	are to be	deported fro	om the Rep	ublic of Sc	outh Africa	under a warrant	of deportat	ion as an
			ntial expens	ses of your	deportation	n are calcu	lated as follows:		
(a)									
(b) (c)				 æ					
(d)	Actua	l costs of c	custody						
the De	EAS sec	tion 34(3) o a sum of n	of the Immi	gration Act, cient to cov	2002 emp er the said	owers me expenses		ou to depo	sit with
							ore#		
imprise FURTI the Im filing th	nment ne HERMOR migration his order s	ot exceeding E, PLEASI Court of the shall have to	ng 12 mont E TAKE NO ne district of the effect o	hs. OTE that a of	copy of this	s order will	o a fine not exce be filed at the of all then in terms oreditor in this ma	fice of the one of the	Clerk of Ipon such
	nigration					Appointmen	t number		
lmn Date	nigration (	Officer 20			F	Appointmen Place			
TO TH As the	E CLERM person siss a judge	20 COF THE lupra has farment of you	IMMIGRAT ailed to corr our Court an	TION COUR	T e order you	are hereb	y requested to p		rd this
TO TH As the	E CLERM person siss a judge	20 COF THE lupra has farment of you	IMMIGRAT ailed to corr our Court an	TION COUR	T e order you	are hereb	y requested to p		nd this
TO TH As the	E CLERM person siss a judge	20 COFTHE lupra has farment of you	IMMIGRAT ailed to corr aur Court an	TION COUR nply with the nd complete	T e order you	are hereb	y requested to p		rd this
TO TH As the order a	E CLERM person siss a judge	20 COF THE I	IMMIGRAT ailed to com our Court and ies to me w	TION COUR nply with the nd complete	T e order you	are hereb	y requested to p section C of this days.		rd this
TO TH  As the order a Return	E CLERI person sis a judge	20 COF THE I	IMMIGRAT ailed to com our Court and ies to me w	TION COUR nply with the nd complete	T e order you	are hereb	y requested to p		rd this
TO TH  As the order a Return	E CLERI person sis a judge two com	20 COF THE I	IMMIGRAT ailed to com our Court and ies to me w	TION COUR nply with the nd complete	T e order you	are hereb rsement in	y requested to p section C of this days.		nd this

<sup>\*</sup>State address of office of the Department #State date in full

# REPUBLIC OF SOUTH AFRICA WARRANT FOR DEPORTATION/RELEASE PENDING REMOVAL [Section 34(7) of Act No 13 of 2002 : Regulation 38(12)]

# WARRANT FOR DEPORTATION

PARI A
TO: PERSON IN CHARGE OF PRISON/DETENTION FACILITY
As (surname and full forenames )
Born on (date) in (place)
Passport/Travel Document no.
whose fingerprints appear on the reverse side, has made himself/herself liable to deportation from the
Republic, you are, therefore, hereby, requested to deliver him/her into my custody pending such removal, in
terms of section of the Act.
Deportation from the Republic of South Africa shall be affected via
the responsible immigration officer or police officer shall impress the left and right thumb prints of the above-
mentioned person hereunder when he/she is removed and certify that the prints were taken by him/her.
Date Place
Reference No
FOR THE MINISTER OF HOME AFFAIRS
IMMIGRATION OFFICER
PART B
CERTIFICATE BY IMMIGRATION OFFICER
I hereby confirm that the above-mentioned person was deported from the Republic of South Africa on
via
l also confirm that his/her left and right thumb print were taken by me.
LEFT THUMB PRINT RIGHT THUMB PRINT
Immigration officer
Appointment number
Date
Port of entry
(*) Use and fill in Part A only if applicable

# Reverse side of Annexure 37

# FINGERPRINT FORM

		Ui	assification			_
NOTIFICATION OF						
Fingerprints may of official of the Department	nly be taken by an					
Affairs. PLEASE N	IOTE: Should a					
finger be missing, of injured that the imp			PHOTOGRAF			
taken, this fact sho	uld be noted in		THE ILLEGAL FOREIGNER	WHO		
the space provided impression.	for that		IS DEPORTE	P		
Fingerprints taken	hv	·				
	-,	_				
R thumb	R index	R middle	R ring	R little	e finger	
				İ		
L thumb	L index	L middle	L ring	L little	finger	
						_
FOR OFFICIAL LISE						
FOR OFFICIAL USE	:					
FINGERPRINTS TAK						
FINGERPRINTS TAK (PLEASE PRINT)	KEN BY :					
FINGERPRINTS TAK	KEN BY :					
FINGERPRINTS TAK (PLEASE PRINT)	KEN BY :					
FINGERPRINTS TAK (PLEASE PRINT) IDENTITY NUMBER	KEN BY :					
FINGERPRINTS TAK (PLEASE PRINT) IDENTITY NUMBER	KEN BY :					
FINGERPRINTS TAK (PLEASE PRINT) IDENTITY NUMBER	(EN BY :					
FINGERPRINTS TAK (PLEASE PRINT) IDENTITY NUMBER PCN NUMBER:	(EN BY :					
FINGERPRINTS TAK (PLEASE PRINT) IDENTITY NUMBER PCN NUMBER: REGISTERING FINGERS	(EN BY :					
FINGERPRINTS TAM (PLEASE PRINT) IDENTITY NUMBER PCN NUMBER:	(EN BY :					
FINGERPRINTS TAK (PLEASE PRINT) IDENTITY NUMBER PCN NUMBER: REGISTERING FINGERS	(EN BY :					

# REPUBLIC OF SOUTH AFRICA WARRANT OF RELEASE

[Section 34(7) of Act No 13 of 2002 : Regulation 39(12)]

To:					
-					
-					
You are I	hereby ordered to releas	e the following illegal f	oreigner preser	ntly being detained by yo	ou:
		·			
*Immigra	tion Officer / Peace Office	r			
	tment number / Force N				
*Appoint	tment number / Force N	lumber			
Date :	••••••				
Place:	••••••				
'Delete which	is not applicable				
				OFFICE STAMP	

# **REPUBLIC OF SOUTH AFRICA**

# NOTICE OF REFUSAL OF ENTRY INTO THE REPUBLIC OF SOUTH AFRICA

[Section 34(8) of Act No 13 of 2002: Regulation 39(13)]

То	
	re in terms of the provisions of section *29(1), 30(1), 34(8) of the Immigration Act, 2002
	o. 13 of 2002) refused admission to the Republic of South Africa as you -
*(a)	are a prohibited person; or
*(b)	are an undesirable person; or
*(c)	are an illegal foreigner as you are not in possession of a valid passport and / or a
	valid visa; or
*(d)	have failed to comply with the examination procedure.
in term	ns of section 34(9)(c) of the said Act the conveyor responsible for your conveyance to
the Re	public, namely will be responsible for
your m	aintenance and removal from the Republic.
repres	ns of section 8(5) of the Act, this decision is effective notwithstanding any further entations from you or on your behalf, and final for purposes of your removal / return to y of origin.
notice,	our removal / return to country of origin you may, within 20 days from the date of this appeal to the Director-General of Home Affairs against this decision. Such an appeal
	be lodged through your representative in the Republic via the nearest or most nient South African diplomatic or consular representative.
Date	
	Immigration Officer
Place .	
i ackno	owledge receipt of the original of this notice
Signati	ure of inadmissible person
Date	
*Delete	which is not applicable

03-111404-8

# REPUBLIC OF SOUTH AFRICA

# DECLARATION TO MASTER OF SHIP REGARDING PROHIBITED PERSONS

Permission for the following per Because they are prohibited pe	sons to enter the Republic was r rsons. The persons indicated be 4(8)&(9) of the Immigration Act,	refused on (date) low shall be detained by
Surname	First Name/s	Reasons for refusal
Port		Immigration Officer
Date		orce number
AC	KNOWLEDGEMENT OF RECE	PT
I acknowledge receipt of the ori	ginal of this notice.	
Date		Signature of Master

# **REPUBLIC OF SOUTH AFRICA**

# CERTIFICATE BY IMMIGRATION OFFICER FOR THE PURPOSE OF OBTAINING A RELEASE PAPER FROM THE CUSTOMS OFFICER

[Section 35(6) of Act No.13 of 2002: Regulation 39(16)]

TO THE OFFICER IN CHARGE: CUSTOMS AI PORT	
I hereby certify that the master of the ship (namon(date) with the provisions of the Immigration Act, 2002 made thereunder.	.,
Date	
,	Immigration Officer
Place	
	Appointment Number/Force

# REPUBLIC OF SOUTH AFRICA

# ORDER TO ILLEGAL FOREIGNER TO LEAVE THE REPUBLIC

[Section 32(2) read with section 49(1)(b) of Act No 13 of 2002 : Regulation 39(17)]

10		
At:		
1.	You are hereby notified that as an illegal f provisions of the Immigration Act 2002, (A an offence for which you may be charged	Act No 13 of 2002), you are guilty of
2.	However, as you have undertaken to leave hereby instructed to leave the Republic by	y Hours on warrant for your deportation will be
DATE	E:	IMMIGRATION OFFICER
PLAC	CE :	
	Appointment No	··········
	Force No	
l ackno	nowledge receipt of the original of this notice	<b>).</b>
•••••		
SIGNA	IATURE OF ILLEGAL FOREIGNER	
DATE:	Z.	

# LIST OF PASSENGERS [Section 35(3)(a) of Act No 13 of 2002 : Regulation 40]

TAKE NOT	TAKE NOTE:								
In terms o	f section	35(3)(	a) of t	the imm	nigratio	n A	ct, 2002 (Act	No 13 of 2	.002) read with
Regulation	39, the r	master	of a sh	nip enter	ing a p	port	of entry of the	e Republic sh	nall, on demand
deliver to a	n immigr	ation of	ficer a	list of al	ll passe	eng	ers containing	the following	information :
Name of st	nip				Por	t of	Entry	• • • • • • • • • • • • • • • • • • • •	
Full names of Master									
Flight No Date of entry									
A. The pa	rticulars	of all	passe	ngers o	n boa	rd,	classified ac	cording to t	neir respective
destina	ations. (I	nboun	d)						
Names of pass passport or tra			Pass Trave		Trave	- 1	Nationality	Embarked at	Destination
Surname	First na	me	No	ment	Class			al	
B. Details	of int	ernatio	nal tr	ansit p	oassen	nge	rs arriving/d	eparting* o	n the above-
mentio	ned ship	o/flight	(Trans	sit)			•		
Surname & Init	ials Pa	ssport l	Vo	Nation	ality	An	eparture/ rival* ght No	Departure/ Arrival* Date	Destination
							<b>4</b> :::::==		
C. Passei	ngers ref	fused c	nward	conve	vance	(Oi	ıtbound)		
Sumame & init								laka a da d	December
Surname & mit	iais	Pass	port No	Nai	ionality	,	Intended Departure	Intended Departure	Reason for refusing onward
							Flight No	Date	conveyance & Action taken
		<del> </del>	•			-			Action taken
I hereby certify	that this	list con	tains th	ne partic	ulars o	of all	passengers	on board my	ship.
	• • • • • • • • • • • • • • • • • • • •			••					
DATE							MASTER		
List received t	у	• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •	•			(Immigratio	n Officer)	***************************************
Date			••••••	•					
*Delete what is	not app	olicable	•						

# REPUBLIC OF SOUTH AFRICA. LIST OF STOWAWAYS

[Section 35(3)(b) of Act No.13 of 2002: Regulation 40]

TAKE NO	TE:		ķ		
ship enter		ublic at a po	Immigration Act, 2002 (Act ort of entry shall on demand en found:		, .
NAME OF	SHIP		PORT OF ENTRY		***********
<b>FULL NAM</b>	MES OF MA	STER	****************		
DATEON	WHICH SH	IIP ENTERE	D THE REPUBLIC		
*Names of St	owaways in full				
Surname	First Name	Passport/ Travel	Particulars of travel document	Nationality	Country of origin
		Document	in his or her possession		
		No.			
	• • • • • • • • • • • • • • • • • • • •				
**********	**********				
******	**********	*********			• • • • • • • • • • • • • • • • • • • •
	•••••				
**********	*********				
	•••••	***********		************	
I hereby co	ertify that thi	s list contair	ns the particulars of all stow	aways foun	d on board my ship.
Date			. Master		•••••
Date		• • • • • • • • • • • • • • • • • • • •	. Immigr	ation Office	-

### **REPUBLIC OF SOUTH AFRICA**

# LIST OF CREW, PERSONS EMPLOYED OR CARRIED OR PRESENT (other than passengers and stowaways)

[Section 35(3)(c) of Act No.13 of 2002: Regulation 40]

# **TAKE NOTE:**

whic	ch enters any p		he immigra	ition officer of	on demand a l	), the master of a ship ist of all the crew and all ent on the ship.
FUL DAT PLA	L NAMES OF TE ON WHICH ACE WHERE E	MASTER SHIP ENTERED TI NTERED	HE REPUB	SLIC		(DATE)
No.	Rank and grading	Names as in passport/travel document/seaman's identity certificate	Nationality	Date of Birth	Number and seaman's identity certificate	Expiry date of passport/travel document
1.						
2. 3.						
3.						
4.						
I certify that this list contains the names of all persons as referred to in section 35(3)(c) of Act No.13 of 2002.						
Date	<b>.</b>	•••••		Master		
Date	<b>)</b>			List Re	eceived by	
				Immiar	ation Officer	

# REPUBLIC OF SOUTH AFRICA RETURN OF MASTER

[Section 35(3)(d) of Act No.13 of 2002: Regulation 40]

MUST BE DELIVERED TO THE IMMIGRATION OFFICER WHO HAS BOARDED THE VESSEL UNDER HAND OF THE MEDICAL OFFICER OF THE SHIP OR OF THE MASTER

NAME OF SHIP..... PORT OF ENTRY.....

Name	Crew Member or passenger (mention rank or class)	Nature of illness	Remarks
***************************************			
***************************************			
***************************************	***************************************	***************************************	
***************************************			
******************	••••••		
rt: lame (mention father	Crew Member or passenger	State whether birth or	the present and pro
ort:			
ort: Name (mention father and mother's name in	Crew Member or passenger	State whether birth or	
lame (mention father and mother's name in case of birth)	Crew Member or passenger (mention rank or class)	State whether birth or death and date	Remarks
Name (mention father and mother's name in case of birth)	Crew Member or passenger (mention rank or class)	State whether birth or death and date	Remarks
rt: lame (mention father nd mother's name in case of birth)	Crew Member or passenger (mention rank or class)	State whether birth or death and date	Remarks
Name (mention father and mother's name in case of birth)	Crew Member or passenger (mention rank or class)	State whether birth or death and date	Remarks

# REPUBLIC OF SOUTH AFRICA

# REPORT ON CUSTOMERS WHO FAILED TO IDENTIFY THEMSELVES AS CITIZENS OR STATUS HOLDERS

[Section 40(1) of Act No 13 of 2002: Regulation 42]

TO: (nearest office of) THE DEPARTMENT OF HOME AFFAIRS						
FROM: (Name of business offering overnight accommodation)						
Busin	ess address:					
	hone number:		Fi	ax number:		
-	l address:					
status	having made a good holders, we failed to by with the duty imposed of 2002)	o establish the id	dentity of the o	customer(s)	on the list ini	fra and hereby
		Available par	ticulars of cus	stomer(s)*		
No	Full first names	Surname	Nationality	Date of birth	Booked in on	Date of departure
*If the information is not available please indicate with N/A  I certify that the list contains the particulars of all persons referred to in section 40(1) of the Act.						
i ceru	ry that the list contain	·	or all persons i	reterred to in	SECTION 40(1	) of the Act.
Signat	ure of owner / mana	ger				
Date:						

### **REPUBLIC OF SOUTH AFRICA**

# REPORT ON PERSONS RECEIVING SERVICES WHO FAILED TO IDENTIFYTHEMSELVES TO ORGANS OF STATE AS CITIZENS OR STATUS HOLDERS [Section 44 of Act No 13 of 2002: Regulation 45]

TO: (nearest office of) THE DEPARTMENT OF HOME AFFAIRS

••••••		••••••			•••••
FROM	I: (Name of or	gan of the Sta	te rendering th	ne service)	
	ess address:				
			**************		
Teleph	none number :		Fa	ax number:	
Cellph	one number: .		•		
Email	address:	••••••••••			
citizen: the list	s or status hol infra and here	ders, we faile	d to establish the the duty im	posed on us in	g services as he person(s) on terms of section
		•		receiving se	rvices
No.		•		•	rvices Current residential address
	Availab	le particulars	s of person(s)	receiving se	Current residential
No.	Availab Full first names	Surname	of person(s)  Nationality	Date of Birth	Current residential address
No.	Availab Full first names  If the informat	Surname ion is not avai	Nationality Hable please in	Date of Birth  Date of Birth	Current residential address
No.  * I certify of the A	Availab Full first names  If the informat	Surname ion is not avai	Nationality Hable please in	Date of Birth  Date of Birth	Current residential address
No.  * I certify of the /	Full first names  If the informate that the list conditions and the list conditions are the list conditions.	Surname ion is not avaiontains the pa	Nationality Hable please in	Date of Birth  Date of Birth	Current residential address

# NOTICE OF ADMINISTRATIVE FINE INCURRED FOR OVERSTAY

[Section 50(1) of Act No 13 of 2002 : Regulation 47]

To:	
You are hereby informed that in terms of Section (Act No 13 of 2002), you have incurred a fine in the overstaying the validity period of your temporary re-	ne amount of R for
You are hereby required to pay the fine. Should y fine shall be payable and recoverable as a debt as In such an event you will not be admitted to the permit, or, if already admitted, your permit shall ne permit issued. Proof of payment of the fine must into the Republic.	gainst the Republic of South Africa.  Republic or issued with a visa or ither be renewed nor a subsequent
DATE :	FOR THE DIRECTOR GENERAL: IMMIGRATION OFFICER
PLACE :	
I acknowledge receipt of the original of this notice.	
CIONATURE OF OVERSTAVER	
SIGNATURE OF OVERSTAYER	

# NOTICE OF ADMINISTRATIVE FINE INCURRED FOR INCORRECT CERTIFICATION OF A FOREIGNER'S PARTICULARS

[Section 50(2) of Act No 13 of 2002 : Regulation 47]

10:	
(Act No 13 of 2002), you have negligently or purposely produ	erms of Section 50(2) of the Immigration Act, 2002 incurred a fine in the amount of R7 000-00 for ucing an incorrect certification in respect of
Should you fail to pay the said	ne fine within three days of the date of this notice.  amount within the said period, the fine shall be tagainst the Republic of South Africa.
DATE :	IMMIGRATION OFFICER/INSPECTORATE
PLACE :	
I acknowledge receipt of the original	al of this notice.
DECIDIENT OF THIS NOTICE	

### DEPARTMENT OF HOME AFFAIRS REPUBLIC OF SOUTH AFRICA

### NOTICE OF ADMINISTRATIVE FINE INCURRED

### BY OWNER/MASTER/CHARTERER OF A CONVEYANCE

[Section 50(3) of Act No 13 of 2002 : Regulation 47(3)]

To:
You are hereby informed that in terms of Section 50(3) of the Immigration Act, 2002, (Act No 13 of 2002), you have incurred a fine in the amount of R for contravening the provisions of section 35 of the aforementioned Act by failing to (a) cause your ship to enter the Republic by landing or shoring at a port of entry
(b) remove passenger
on Flight No/ship bound forfrom the
Republic after he/she was refused admission.
(c) upon demand, deliver to an immigration officer
(i) a passenger list, as prescribed
(ii) a list of stowaways, if any
(iii) a list of crew members
(iv) a list of persons other than passengers and stowaways
(v) a return, under the hand of the medical officer of the ship, of in in the
absence of such officer, under the hand of the master, stating
(a) any case of disease, infectious or otherwise
(b) the names of persons suffering from such disease
(c) details of any death or birth that occurred during the voyage
(d) ensure that all passengers bound for a destination outside the Republic are on
board when the ship leaves the Republic

(e) ensure that foreigner(s) conveyed to a port of entry for purpose of travelling to a

foreign country hold transit visa, if required.

You are hereby required to pay the fine within three days of the date of this notice. Should you fail to pay the said amount within the said period, the fine shall be payable and recoverable as a debt against the Republic of South Africa.

DATE :	IMMIGRATION OFFICER
PLACE :	
I acknowledge receipt of the original of this notice.	
SIGNATURE OF MASTER, OWNER,	
CHARTERER OR PERSON IN CHARGE OF CON	IVEYANCE

### **REPUBLIC OF SOUTH AFRICA**

# APPLICATION FOR A PERMIT TO REPORT TO A REFUGEE RECEPTION OFFICE [Section 23 of Act No 13 of 2002 : Regulation 32]

	undersigned,
	me
First N	Names in full
	of Birth Nationality
Gend	er
from o	country of residence City/town City/town
Previo	ous residential address
	attach the following proof of my identification
Passp	port No
	fication document No
	document No
	pertificate
	ol certificates
	's licence No
	ue book, bank book/card, credit card*
Otner	and a settle and a set of a large of the settle of the set
nereb	y make oath and say/solemnly affirm*
1.	That I am a seeking asylum in South Africa for the following reason(s)
1.	· · · · · · · · · · · · · · · · · · ·
2.	That I crossed the border of the following country(ies)
۷.	on prior to my arrival at this border post of
	and I was able to enter and depart through
	such country's (ies') border post/s with/without* a passport or positive proof of
	identification. (If without a passport, state particulars of how this was
	accomplished).
	uooomphonouy.
3.	That I did not apply for asylum in that country/those countries because
4.	That I have not applied for asylum in South Africa before.
	,
<b>5</b> .	I understand that if I have made a false statement I shall be guilty of an
	offence and liable on conviction to a fine or imprisonment and in terms of
	section 48 of the Immigration Act, 2002, (Act No 13 of 2002) not be allowed to
	sojourn in the Republic.

I understand that I must report to a designated Refugee Reception Office within 14 days to complete an asylum seeker's application and receive an

asylum seeker's permit, that my permit to report to a refugee reception office is not extendable, and that upon expiry, I shall be an illegal foreigner and may be guilty of an offence and liable on conviction to a fine or to imprisonment.

6.

Signature	Date:
Thus signed and sworn/solemnly affirmed set out below, in accordance with the regulath or an affirmation in GN1258 of 21 July	lations governing the administration of an
Commissioner of Oaths	OFFICE STAMP
Full names :	
Left thumb print	Photograph

Note: If the asylum seeker is accompanied by dependents please indicate their Names, Surnames, Gender and dates of birth on the reverse side of this form and also attach their left thumb prints and photographs.

<sup>\*</sup>Delete what is not applicable

#### REPUBLIC OF SOUTH AFRICA

# WORK PERMIT UNDER A CORPORATE PERMIT AUTHORISATION CERTIFICATE NO ......

This authorisation entitles the following foreign	national, hereinafter referred to as the
CORPORATE WORKER, to approach the	South African Mission/South Africar
Department of Home Affairs with a contract of	employment signed by both parties, to
obtain a work permit valid for	as a corporate worker to be employed
by,	hereinafter referred to as the
CORPORATE EMPLOYER.	
Surname :	Name:
DOB:	Passport number
Nationality	Occupation
Contact person of Corporate Employer	(Official stamp of the company to
	confirm the information)
Position:	Signature:
Division:	Contact Tel
On receipt of a work permit the CORPO	PRATE WORKER shall return this
authorisation to the CORPORATE EMPL	OYER for safekeeping with the
CORPORATE WORKER'S employment record	s

2. The validity of this authorisation is subject to the following conditions –

1.

- (a) It entitles the corporate worker to work for the corporate employer including its affiliates, branches and subsidiaries and in the above-mentioned position only. It does not entitle the corporate worker to engage in any other form of employment or self-employment.
- (b) The corporate employer and corporate worker undertake to ensure that the corporate worker is at all times in possession of a passport valid for no less than 30 days after the expiry date of the intended stay.
- (c) The corporate employer undertakes to immediately notify the Department of Home Affairs if it has reason to believe that the corporate worker is no longer in compliance with section 21(b)(i) of the Immigration Act, 2002 (Act No 13 of 2002) or when the corporate worker has left its employ, by completing part 5 below.

- (d) The corporate employer ensures the forthwith departure of the corporate worker from the Republic on completion of his/her tour of duty.
- (e) 'The corporate employer provides the relevant certification, prepared by a chartered accountant in accordance with the legislation.
- (f) (\*) The corporate worker employed in terms of an inter-governmental agreement or for seasonal labour shall not have his/her permit extended.

The Department of Home Affairs may withdraw or modify the Corporate Permit and/or this authorisation for good and reasonable cause.					
REGI	REGIONAL DIRECTOR:  DEPARTMENT OF HOME AFFAIRS wet seal/date stamp of DOHA				
	e Department of Home Affairs				
(1)	It is hereby confirmed that the above CORPORATE WORKER has either.  (a)* left South Africa; or  (b)* is no longer in compliance with the Act because				
(2)*	The Department is hereby requested to exchange this authorisation certificate to issue another certificate for the following foreign national.  Surname: Name: Name: Name: Nationality Occupation				
	PORATE EMPLOYER				
Surna	me: Name:				
Certifi Issued	cate cancelled / new authorisation certificate No				

(wet seal/stamp)

\*Delete if not applicable

**REGIONAL DIRECTOR** 

## APPLICATION FOR REGISTRATION AS AN IMMIGRATION PRACTITIONER [Section 46 Act 13 of 2002 : Regulation 46]

# TO: ASSOCIATION OF IMMIGRATION PRACTITIONERS [of which the specific practitioner is a member]

- 1. I hereby apply for registration as a practitioner in terms of item 2(10)(f) of Schedule F of the Immigration Regulations promulgated in terms of the Immigration Act, 2002 ["the Act"].
- 2. I certify that the information supplied below is true and correct in all material respects and that I have not previously been found guilty of any offence in terms of the Act, or Schedule 1 thereto.
- 3. I commit myself/ourselves to the Code of Conduct and undertake to abide by the provisions thereof.

### PERSONAL DETAILS OF APPLICANT(S)

<u>Nt</u>	3: The names of all directors/partners of the business must be supplied
	Please use reverse side hereof if necessary.
1.	Full names and surname:
	Identity number:
	Full residential address:
(pe	ostal code)(telephone number)
Ĥи	ill names and surnames
	entity number:
Fu	Ill residential address:
	ostal code(telephone number)
	(
DE	TAILS OF BUSINESS
	The or Boomedo
2	Full name of business and trade name:
	Abbreviated trade name of business (if any):
	Full address where the business will be operated from:
₹.	·
	/ 1 \
	(postal code)

Postal address of the business:

Telephone number(s):     Facsimile number (s):	· · · · · · · · · · · · · · · · · · ·		·		
Documentation Attached 7. Copy of identity document 8. Original letterhead of the business 9. Curriculum Vitae 10. Police clearance no older than 6 months					
Signed at	on	this		day	of
(1) Signature and capacity		(2)	Signature and		

# REPUBLIC OF SOUTH AFRICA CERTIFICATE OF REGISTRATION AS AN IMMIGRATION PRACTITIONER (Section 46 of Act 13 of 2002 : Regulation 46)

It is hereby certified that the person whose particulars appear hereunder is registered as an Immigration Practitioner or is deemed to be registered as an Immigration Practitioner in terms the Regulations made in terms of the Immigration Act 2002 (Act 13 of 2002). The validity of this certificate expires within twenty-four months after the date of issue.

PEr	RSONAL PARTICULARS OF PRACTITIONER
1.	First name(s) and surname:
2.	Identity number:
3.	Full residential address:
	(Tel no:)
	(Cell no:)
PAF	RTICULARS OF BUSINESS
1.	Full name of business:
2.	Abbreviated name of business (if any):
3.	Full address where business is conducted:
REC	GISTRATION NUMBER:
Sign	ned at on this day of
	20

p.p. DIRECTOR-GENERAL

### REPUBLIC OF SOUTH AFRICA

POWER OF ATTORNEY IN RESPECT OF AN APPLICATION FOR A PERMIT FOR PERMANENT OR TEMPORARY RESIDENCE IN THE REPUBLIC OF SOUTH AFRICA, OR FOR THE EXTENSION OF THE VALIDITY THEREOF, OR FOR OTHER REASON

[Section 46 of Act No 13 of 2002 : Regulation 46]

### PART A POWER OF ATTORNEY

I (full name and surname),
of (full address)
hereby appoint (full names and surname)
of (full address and his/her registration number as immigration practitioner)
to apply on my behalf for a residence permit referred to in sections 11 to 23 and sections 26 and 27 of the Immigration Act, 2002 (Act No 13 of 2002) / the extension of the validity of permits referred to in sections 11 to 23, at a South African foreign mission / office of the Department of Home Affairs*, or in respect of or to submit any further relevant information concerning myself, and to receive the decision of the Department in connection with the application.

I hereby confirm that-

- (a) I personally signed this power of attorney and my application for a residence permit/the extension of the validity of a permit\*;
- (b) a residence permit which is issued to me or whereof the validity is extended, may be withdrawn if any particulars in my application or which is submitted by the person holding power of attorney, are incorrect;
- (c) my application for a residence permit does not grant me any rights to enter the Republic of South Africa before a residence permit has been granted to me;
- (d) I am aware that my application for a residence permit or the extension of the validity thereof shall be considered by the Department of Home Affairs and that the granting of a power of attorney to the person holding power of attorney, in no way will expedite or benefit my application; and
- (e) I shall give notice to the Department if I withdraw or amend the power of attorney before the Department has taken a final decision on my application.
- (\* Delete which is not applicable)

### CERTIFICATE

understand the conten	is of this power of att	orney	<i>(</i> .	
Signed at		on	this	day of
R2,00 revenue				
stamp				Signature of person giving power of attorney
			POW	VER OF ATTORNEY
I (full name and surnam	,,			
	oned appointment ar			that the address hereunder is
my business address/ho				
* (Submit business a	ddress if employed			business for own account,
or home address in ot hereby confirm that	,			
	dentified myself with particulars in the			nts of this document and the for a residence permit/the
(c) I am aware that a rethe validity thereof, said application are Immigration Act, 20 residence in the React, or by conduct, s	residence permit issue may be withdrawn if incorrect, and that incorrect any other permit is sue that incorrect is sue that it is not be a supplied in the correct and incorrect	f any t is a to fac ersor e ma	partic contr cilitate by the king a	applicant or the extension of ulars in this document or the avention of section 42 of the or assist the entrance to or ne committing of a fraudulent my false representation; applicant as a lien to enforce
(* Delete which is not Signed at	applicable)	. or	n this	sday of
				Signature of person giving power of attorney

## PART C CERTIFICATE BY INTERPRETER

i (tuli name and surname),
of (full address)
hereby confirm that I have mastered (state language)
(full name of applicant)
the contents of this document in the said language and that I am satisfied that the applicant fully understands it.
Signed at on this day of
Signature of interpreter

### **CERTIFICATE BY INTERPRETER**

(If required)

I (first name/s and surname)
of (full address)
hereby confirm that I have mastered
(state language)
That I have explained to (full names of detainee)
That the contents of this notice in the said language and that I am satisfied that the said detainee fully understands it.
Signed at on thisday of
20
Signature of interpreter

To be used in connection with the Notice of Deportation set out in Annexure 37

## DELEGATION FROM A CHARTERED ACCOUNTANT TO ANOTHER ACCOUNTANT

[Section 1(1)(v) of Act No 13 of 2002 : Regulation 50(5)]

	[Cooker 1(1)(V) of 7 to 110 to 01 2002 : 1 togulation 00(0)]
[CHARTER	ED ACCOUNTANT'S LETTERHEAD]
	, a chartered accountant within the meaning of the Chartered Accountants Designation (Private) Act, 1993 (Act No. with offices at
horeby dolo	gate Mr/Mrs/Ms, an
accountant	gate Mr/Mrs/Ms, an recognised as such under the law, to perform under my delegation
*(a)	the following activities
*(b)	all activities
	n in terms of the Immigration Act 2002 (Act 13 of 2002) a chartered untant may perform for purposes of said Act.
	d that the person whom I hereby delegate to act on my behalf has capacity to perform the delegated functions.
This delegated date hereof.	tion expires on *20 / * or three years from
[Chartered A	Accountant's Signature]
[Chartered A	Accountant's name]
Date	
Witnessed b	y [witness' printed name] nature]

<sup>\*</sup> Delete what does not apply

# DEPARTMENT OF HOME AFFAIRS REPUBLIC OF SOUTH AFRICA IDENTIFICATION CERTIFICATE FOR AFFIXING A TEMPORARY RESIDENCE PERMIT

### TO WHOM IT MAY CONCERN

This is to certify that the foreigner whose particulars appear hereunder, is unable to produce a
passport but, by virtue of being the \*spouse/child of a \*South African citizen/resident is legally entitled
to sojourn in the Republic on the terms and conditions of the temporary residence permit affixed
hereto.

Note: An original marriage certificate or, in the case of a spousal relationship, a copy of a notarial contract showing that it was duly registered, or in the case of a child, a full birth certificate must be attached hereto at all times.

2.	Particulars of temporary permit holder	t holder	
	Surname	* Maiden name	•••••
	Forename(s) in full		
	Gender date of birth	Nationality	
	Country of birth		
	Permanent residential address in the Reput	olic	
			•••••
3.	Particulars of South African *Spouse/Parent	•	
	Surname	••••	
	Forenames in full		
	DEGIGNAL PIPEGEO		
	REGIONAL DIRECTOR		STAMP