

FORM F

Application for the revocation of a licence in terms of section 24 of the Petroleum Pipelines Act, 2003 (Act No. 60 of 2003)

INSTRUCTIONS

1. Before completing this form, you are advised to read the following documents:
 - (a) the Petroleum Pipelines Act, 2003 (Act No. 60 of 2003) and its regulations; and
 - (b) the Rules made in terms of the Petroleum Pipelines Act, specifically rule
2. Please note that this form has four sections (A, B, C, & D). An applicant must provide **all** information and supporting documentation required. Incomplete applications will not be accepted.
3. The completed form with supporting documentation must be delivered to the Energy Regulator:
 - (a) by registered mail to: P O Box 40343, Arcadia 0007; or
 - (b) by hand at: Kulawula House, 526 Madiba Street, Arcadia, Pretoria; or
 - (c) electronically to pipelines@nersa.org.za; or
 - (d) by fax to 012 401 4700
4. If you want to request the confidential treatment of certain information in your application, you must do so in accordance with Rule 4 of the Rules made in terms of the Petroleum Pipelines Act.

ENQUIRIES:

Contact:	Executive Manager: Petroleum Pipelines Regulation
Contact no.:	(012) 401 4600
Fax no.:	(012) 401 4700

OFFICIAL USE ONLY

Date received	<u>4 December 2018</u>
Reference number	<u>PPL.sf.F3/11/6/2006</u>

SECTION A: PARTICULARS OF LICENSEE

1. Name of licensee **Total SA Pty (Ltd)**
2. Licence number **PPL.sf.F3/11/16/2006**
3. Type of licence **Operating License**
4. Date on which the Energy Regulator issued the licence **18th August 2008**
5. Details of the licensed facility/ area **The depot is situated at following address**
Erf, 15-17 Louis Lange Street,
Worcester
Western Cape
6. Details of mandated representative, including:
 - a) Designation: **Logistics Business Support Manager**
 - b) family name: **Rossouw**
 - c) first name: **Pieter**
 - d) telephone number: **011 778 3645**
 - e) fax number: **086 680 2601**
 - f) email address : **pieter.rossouw@total.co.za**

SECTION B: REASON(S) FOR APPLICATION

7. Indicate the reason(s) for the application by ticking the appropriate box below:
 - (a) The licensed facility or activity is no longer required
 - (b) The licensed facility or activity is not economically justifiable
 - (c) Another person is willing and able to assume the rights and obligations of the licensee concerned in accordance with the requirements and objectives of the Act
8. If the reason for the application is that the licensed facility or activity
 - (a) is no longer required, or
 - (b) is not economically justifiable,

provide a detailed explanation and submit documentation in support of your reason(s).

The facility has been sold to Kaap Agri Bedryf Limited. The new owner is an Agricultural company who uses the site for retailing and is excluded from the

Act as the site is used for both agricultural and retail purposes. See attached retail licence

If the reason for the application is that another person is willing and able to assume the rights and obligations of the licensee in accordance with the requirements and objectives of the Act, provide the following information about that person - **N/A**

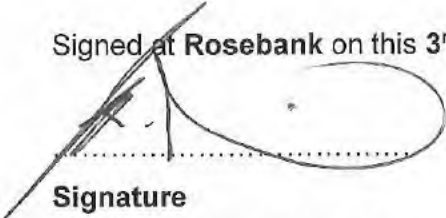
- (a) registered name:
- (b) trading name (if different from registered name)
- (c) physical address of the registered place of business
- (d) physical address of the principle place of business (if different from the registered place of business)
- (e) postal address
- (f) telephone number
- (g) fax number
- (h) Email address
- (i) Contact person at applicant, including:
 - designation
 - family name
 - first name
 - telephone number
 - fax number
 - email address
- (j) submit an undertaking (Section C of this form) by that person confirming its willingness and ability to assume the rights and obligations of the licensee in accordance with the requirements and objectives of the Act and that the person will apply for the relevant licence.
- (k) submit documentary proof of the ability to assume the rights and obligations of the licensee in accordance with the requirements and objectives of the Act.

SECTION D: SOLEMN DECLARATION BY THE APPLICANT OR MANDATED REPRESENTATIVE

I **Petrus Stephanus Rossouw**, Identity Number _____ hereby declare that

- (a) I am authorised by **Total SA Pty (Ltd)** to make this declaration (attach the authorisation); and
- (b) all information provided herein is within my personal knowledge and is both true and correct.

Signed at **Rosebank** on this **3rd** day of **December** 2018.



Signature

I certify that the deponent:

- (a) has acknowledged that she/he knows and understands the contents of this application form and its annexures, that she/he has no objection to taking the prescribed oath and that she/he considers the oath binding on her/his conscience; and
- (b) has in the prescribed manner sworn that the contents of this application form and its annexures are true and signed same before me at Rosebank (place) on this 3rd day of December (month) 2018 (year).

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COMMISSIONER OF OATHS

Name Muthuphuzi Gauder
Address 15 Gauder ave
Capacity Rosebank SAPS

