



CITY OF CAPE TOWN
ISIXEKO SASEKAPA
STAD KAAPSTAD

MAITLAND OFFICE COMPLEX
 5 Berkley Road
 Maitland, 7405
 Cape Town
 Email: paac@capetown.gov.za
 Website: www.capetown.gov.za



PROTECTED AREA ADVISORY COMMITTEE APPLICATION FORM

Organisation details

Organisation's name: _____

Contact details: Tel - _____ Fax - _____

Cell - _____ Email - _____

Physical address: _____

Postal address: _____

Nominated delegate details

Nominated delegate name: _____

Nominated delegate's role in the organisation: _____

Nominated delegate's email address: _____

Name of organisation's alternate delegate: _____

Application details

Brief summary of organisation's interest in, or relation to, City nature reserves: _____

Applicant organisation's choice of Advisory Committee(s) by means of marking with an "X":

☐	Blaauwberg Nature Reserve
☐	Bracken Nature Reserve Bracken (including Perdekop and Haasendal)
☐	Durbanville Nature Reserve (including Uitkamp Wetland, Botterblom and Joostenbergskloof)
☐	Edith Stephens Nature Reserve
☐	False Bay Nature Reserve (including Rondevlei, Zeekoevlei, Pelican Park, Slangetjebos, Zandwolf and Strandfontein Birding Area)
☐	Helderberg Nature Reserve (including Silverboomkloof, Harmony Flats and Morkel's Cottage)
☐	Steenbras Nature Reserve
☐	Table Bay Nature Reserve (including Rietvlei, Diep River, Milnerton Racecourse and Zoarvlei)
☐	Tygerberg Nature Reserve (including Bothasig and Arriesfontein)
☐	Witzands Aquifer Nature Reserve (including the Klein Dassenberg Hills)
☐	Wolfgat Nature Reserve

	Zandvlei Nature Reserve (including Muizenberg East)
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By signing this form, the applicant organisation and the nominated delegate agree to interact with the Advisory Committees in terms of the Mandate and the Constitution.

Please feel free to contact us if you have any queries. If for any reason you should cancel your application, please let us know.

Signature: Applicant Organisation

Signature: Nominated Delegate
(Primary)

Signature: Nominated Delegate
(Secondary – if applicable)

X_____

X_____

X_____

Name:_____

Name: _____

Name: _____

Role: _____

Role: _____

Role: _____