

# REGISTRATION / COMMENT FORM

PROJECT REFERENCE NO: ESC 146

## MOOI-MGENI TRANSFER SCHEME PHASE 2

### *PARTICULARS OF INTERESTED & AFFECTED PARTY*

<b>Name:</b>			
<b>Postal Address:</b>			
		<b>Post code:</b>	
<b>Street Address:</b>			
		<b>Post code:</b>	
<b>Tel:</b>		<b>E-Mail:</b>	
<b>Cell:</b>		<b>Fax:</b>	
<b>Language Preference:</b>			

### COMMENTS

1. Comments, concerns or suggestions:

2. Do You require any specific additional information? If YES, please specify:

3. Is there any other information that the project team should be made aware of:

4. If you are aware of any additional people who should be contacted in this process, please provide their details here:

5. Any other:

**Please add additional pages if required.**

**Return to: Paula Tolksdorff**

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