

Form 2

REPUBLIC OF NAMIBIA
ENVIRONMENTAL MANAGEMENT ACT, 2007

(Section 39)

APPLICATION FOR ~~AMENDMENT OF CONDITIONS OF~~ ENVIRONMENTAL
CLEARANCE CERTIFICATE



A. PARTICULARS OF APPLICANT

Name of Applicant: Ongwediva Town Council
 Address: Private Bag 5549, Ongwediva
 Telephone Number: 0814127359
 Cell phone Number: 0814127359
 Fax Number: N/A
 E-mail Address: planning@nghivelwa.com.na
 Name of Contact Person: Nghivelwa Planning Consultants
 Telephone Number:
 Cell phone Number:
 0814127359
 Fax Number:
 N/A
 E-mail Address:
 natangwe@nghivelwa.com.na

B. PARTICULARS OF CURRENT ENVIRONMENTAL CLEARANCE CERTIFICATE

1. Name of current holder of Environmental Clearance Certificate:
 N/A
2. Date of Issue of current Environmental Clearance Certificate:
 N/A

PART C PROPOSED AMENDMENTS TO THE CONDITIONS IN CURRENT

| | |
|----|---|
| 1. | Condition(s) on the Current Environmental Clearance Certificate: <i>N/A</i> |
| 2. | Proposed Amendment(s): <i>ECC application for township establishment</i> |
| 3. | Reason for Amendment(s): <i>To establish a township</i> |
| 4. | Describe the environmental changes arising from the proposed amendment(s): <i>Removal of vegetation and soil disturbance</i> |
| 5. | Describe how the environment and the community might be affected by the proposed amendment(s): <i>The community will benefit from municipal services and employment creation</i> |
| 6. | Describe how and to what extent the environmental performance requirements set out in the assessment report previously approved or activity profile previously submitted for this activity may be affected: <i>Please see attached Scoping report and EMP</i> |
| 7. | Describe any additional measures proposed to eliminate, reduce or control any adverse environmental effect arising from the proposed amendment(s): <i>Please see attached Scoping Report & EMP.</i> |

PART D DECLARATION BY APPLICANT

I hereby certify that the particulars given above are correct and true to the best of my knowledge and belief. I understand the environmental clearance certificate may be suspended, amended or cancelled if any information given above is false, misleading, wrong or incomplete.

Lu Hde Nghivelwashisho Ndeku de Counselants

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|--|----------------------------|-------------------|
| Signature of Applicant | Full Name in Block Letters | Position |
| on behalf of <i>Ongwediva Tour Council</i> | | <i>22/04/2026</i> |
| | Date | |