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No. 38186

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GOVERNMENT NOTICES

DEPARTMENT OF HOME AFFAIRS

No. R. 877

7 November 2014

REFUGEES ACT, 1998**FIRST AMENDMENT OF THE REFUGEES REGULATIONS (FORMS AND PROCEDURE) MADE UNDER THE REFUGEES ACT, 1998**

The Minister of Home Affairs intends to, under section 38 of the Refugees Act, 1998 (Act No. 130 of 1998), make the regulations in the Schedule.

SCHEDULE**Definition**

1. In this Schedule “the Regulations” means the Regulations made under the Refugees Act, 1998 (Act No. 130 of 1998) published under Government Notice No. R.366 of 6 April 2000.

Amendment of regulation 2 of the Regulations

2. Regulation 2 of the Regulations is hereby amended by—

(a) the substitution for paragraph (b) of subregulation (1) of the following paragraph:

“(b) must be in the form and contain substantially the information prescribed in Annexure 1 to these Regulations;”.

Short title and commencement

12. These Regulations are called the First Amendment of the Refugees Regulations (Forms and Procedure), 2000.

ANNEXURE 1

| NO. | DESCRIPTION | |
|-----|----------------------|------------------------|
| 1. | Form 1 (DHA-1590) | Application for Asylum |

No. R. 878

7 November 2014

**DEPARTMENT OF HOME AFFAIRS
REFUGEES ACT, 1998 (ACT NO. 130 OF 1998)**

**PUBLICATION OF THE DRAFT FIRST AMENDMENT OF THE REFUGEES
REGULATIONS (FORMS AND PROCEDURE), 2000**

The Department of Home Affairs ("DHA") invites public comments on the draft First Amendment of the Refugees Regulations (Forms and Procedure), 2000.

Written submissions should reach DHA **on or before 3 December 2014**. Submissions should be addressed to the Chief Director: Legal Services and may be forwarded to DHA in any of the following manners:

- (a) delivered by hand to the Department of Home Affairs, 230 Johannes Ramokhoase (Proes) Street, Hallmark Building (c/o J Ramokhoase and Thabo Sehume Street), Pretoria, 0001, for **attention** Adv Moses Malakate;
- (b) mailed to the DHA at Private Bag X114, Pretoria, 0001;
- (c) faxed to 0865 144 267 or 0865 769 025; or
- (d) e-mailed to Moses.Malakate@dha.gov.za

Any enquiries should be directed to **Adv Moses Malakate** at (012) 406 4273.

| | |
|--|------|
| Residential Address/es during the last five years: | |
| Town / City: | |
| Country: | |
| Current Residential Address in RSA | |
| Province in RSA: | |
| Telephone No in RSA: | Code |
| Cell No in RSA: | |
| E-mail Address: | |
| Alternative Contact No in RSA: | |
| Surname of Contact Person: | |
| Name of Contact Person: | |
| Residential Address of Contact Person: | |
| Relationship to Applicant: | |
| E-mail Address: | |

(Applicant is advised by RRO to inform the Department of any change of Address within ten (10) days of such change of address)

.....
Signature of Applicant

A2. DETAILS OF IDENTITY AND TRAVEL DOCUMENTS

A2.1 IDENTITY DOCUMENT

Are you in possession of one or more identity document from your country of origin? Yes (Attach proof) No *(Please tick in the appropriate box)*

If yes, please present your identity document to the Administration Officer for verification of your personal particulars

Details of identity document

| | | | |
|---------------------------|-----------------|-----------------|--|
| Identity Document number: | | Place of issue: | |
| Date of issue: | Y Y Y Y M M D D | | |
| Issuing Authority: | | | |
| Date of expiry: | Y Y Y Y M M D D | | |

A2.2 TRAVEL DOCUMENT

Are you in possession of a passport / travel document? Yes (Attach proof) No *(Please tick in the appropriate box)*

If yes, please present your passport / travel document to the Administration Officer for verification of your personal particulars

Details of passport / travel document

| | | | |
|-------------------------|-----------------|-----------------|--|
| Travel Document number: | | Place of issue: | |
| Date of issue: | Y Y Y Y M M D D | | |
| Issuing Authority: | | | |
| Date of expiry: | Y Y Y Y M M D D | | |

If you are not in possession of a passport or travel document, please give reasons: _____

Which Port of Entry did you enter RSA through:

When did you enter the Republic?: Y Y Y Y M M D D

Mode of travel: Air Land Sea

When did you leave your country of origin?: Y Y Y Y M M D D

(Please attach Section 23 permit issued to you at the Port of Entry)

List the countries transited en route to the Republic of South Africa and the duration of your stay:

| Country | Port of Entry Used | Mode of transport | Travel Documents Used | Duration in Transit Country | Immigration Status in the transit country | Address in transit country |
|---------|--------------------|-------------------|-----------------------|-----------------------------|---|----------------------------|
| 1 | | | | | | |
| 2 | | | | | | |
| 3 | | | | | | |
| 4 | | | | | | |
| 5 | | | | | | |

State reason for entry and exit in each country

| |
|------------------|
| Country 1: Entry |
| Country 1: Exit |
| Country 2: Entry |
| Country 2: Exit |
| Country 3: Entry |
| Country 3: Exit |
| Country 4: Entry |
| Country 4: Exit |
| Country 5: Entry |
| Country 5: Exit |

Did you apply for asylum in any of the above listed countries? Yes No *(Please tick in the appropriate box)*

If no, give reasons? _____

If yes, please provide details:

Was your application for asylum granted? Yes No *(Please tick in the appropriate box)*

When did you apply? Y Y Y Y M M D D

Type of permit issued:

Permit Number

Status validity: Y Y Y Y M M D D to Y Y Y Y M M D D

Please provide reasons for your departure from the country where you applied for asylum: _____

Did you notify the Refugee Commissioner of your intended departure? Yes No.

If no, state reason: _____

Are you recognised as a refugee by the UNHCR? Yes No *(Please tick in the appropriate box)*

If yes, specify date: Y Y Y Y M M D D and UNHCR Field office in RSA: _____

Are you registered with an Embassy, a Consulate or any other authority of your home country?

If yes, please give details: _____

B1. PARTICULARS OF FAMILY (SPOUSE AND DEPENDANTS) IN RSA

B.1.1. PARTICULARS OF SPOUSE

Surname (Family)

First name

Middle name

Date of birth Y Y Y Y M M D D

Identity No.

Travel Doc No.

Gender Male Female *(Please tick in the appropriate box)*

Relationship with applicant

Status in RSA Asylum Seeker Refugee Permit Immigration Permit

Date of marriage Y Y Y Y M M D D *(Please provide marriage certificate)*

Type of marriage Civil Marriage Religious Marriage Customary/Indigenous

Occupation

Residential address

Code

Tel/Cell Number

B.1.2. PARTICULARS OF DEPENDANT OR RELATIVE IN RSA

Surname (Family)

First name

Middle name

Date of birth Y Y Y Y M M D D

Identity No.

Travel Doc No.

Gender Male Female *(Please tick in the appropriate box)*

Relationship with applicant

Status in RSA Asylum Seeker Refugee Permit Immigration Permit

Date of marriage Y Y Y Y M M D D

Type of marriage Civil Marriage Religious Marriage Customary/Indigenous

Occupation

Residential address

Code

Tel/Cell Number

B.1.3. PARTICULARS OF DEPENDANT OR RELATIVE IN RSA

Surname (Family)

First name

Middle name

Date of birth Y Y Y Y M M D D

Identity No.

Travel Doc No.

Gender Male Female *(Please tick in the appropriate box)*

Relationship with applicant

Occupation

Residential address

Code

Tel/Cell Number

B.1.4. PARTICULARS OF DEPENDANT OR RELATIVE IN RSA

Surname (Family)

First name

Middle name

Date of birth Y Y Y Y M M D D

Identity No.

Travel Doc No.

Gender Male Female *(Please tick in the appropriate box)*

Relationship with applicant

Occupation

Residential address

Code

Tel/Cell Number

B.1.5. PARTICULARS OF DEPENDANT OR RELATIVE IN RSA

Surname (Family)

First name

Middle name

Date of birth Y Y Y Y M M D D

Identity No.

Travel Doc No.

Gender Male Female *(Please tick in the appropriate box)*

Relationship with applicant

Occupation

Residential address

Code

Tel/Cell Number

B.1.6. PARTICULARS OF DEPENDANT OR RELATIVE IN RSA

Surname (Family)

First name

Middle name

Date of birth Y Y Y Y M M D D

Identity No.

Travel Doc No.

Gender Male Female *(Please tick in the appropriate box)*

Relationship with applicant

Occupation

Residential address

Code

Tel/Cell Number

B2. PARTICULARS OF FAMILY (SPOUSE AND DEPENDANTS) OUTSIDE RSA

B.2.1. PARTICULARS OF DEPENDANT OR SPOUSE OUTSIDE RSA

Surname (Family)

First name

Middle name

Date of birth

Passport No.

Gender Male Female *(Please tick in the appropriate box)*

Relationship with applicant

Occupation

Residential address

Code

Tel/Cell Number

B.2.2. PARTICULARS OF DEPENDANT OUTSIDE RSA

Surname (Family)

First name

Middle name

Date of birth

Passport No.

Gender Male Female *(Please tick in the appropriate box)*

Relationship with applicant

Occupation

Residential address

Code

Tel/Cell Number

B.2.3. PARTICULARS OF DEPENDANT OUTSIDE RSA

Surname (Family)

First name

Middle name

Date of birth

Passport No.

Gender Male Female *(Please tick in the appropriate box)*

Relationship with applicant

Occupation

Residential address

Code

Tel/Cell Number

B.2.4. PARTICULARS OF DEPENDANT OUTSIDE RSA

Surname (Family)

First name

Middle name

Date of birth

Passport No.

Gender Male Female *(Please tick in the appropriate box)*

Relationship with applicant

Occupation

Residential address

Code

Tel/Cell Number

B.2.5. PARTICULARS OF DEPENDANT OUTSIDE RSA

Surname (Family)

First name

Middle name

Date of birth

Passport No.

Gender Male Female *(Please tick in the appropriate box)*

Relationship with applicant

Occupation

Residential address

Code

Tel/Cell Number

B.2.6. PARTICULARS OF DEPENDANT OUTSIDE RSA

Surname (Family)

First name

Middle name

Date of birth

Passport No.

Gender Male Female *(Please tick in the appropriate box)*

Relationship with applicant

Occupation

Residential address

Code

Tel/Cell Number

G. FOR OFFICIAL USE ONLY

G.1. APPLICATION RECEIVED BY:

Surname:

Forenames in full:

Persal No:

Rank: _____

Refugee Reception Office: _____

Supporting Documents, please tick:

Identity Document

Marriage Certificate

Child's unabridged birth certificate

Section 23 Permit

Passport / Travel Document

Educational Qualifications

Other, specify _____

..... declare that I have received and checked the document that it is fully completed.

Signature of Officer _____ Date:

G.2 PRELIMINARY COMMENTS BY OFFICER

.....

Signature of Officer _____ Date:

G.3. DECISION BY RSDO

The decision on application for asylum is as follows:

Asylum Granted

Rejected as Manifestly unfounded Abusive

Unfounded Fraudulent

Reasons for decision: _____

Signature of RSDO _____ Date:

STAMP

Commissioner of Oaths

Full names _____

Business Address _____

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As the mandated government security printer, providing world class security products and services, Government Printing Works has adopted some of the highly innovative technologies to best serve its customers and stakeholders. In line with this task, Government Printing Works has implemented a new telephony system to ensure most effective communication and accessibility. As a result of this development, our telephone numbers will change with effect from 3 February 2014, starting with the Pretoria offices.

The new numbers are as follows:

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- Advertising : 012 748 6205/6206/6207/6208/6209/6210/6211/6212
- Publications Enquiries : 012 748 6052/6053/6058 GeneralEnquiries@gpw.gov.za
- Maps : 012 748 6061/6065 BookShop@gpw.gov.za
- Debtors : 012 748 6060/6056/6064 PublicationsDebtors@gpw.gov.za
- Subscription : 012 748 6054/6055/6057 Subscriptions@gpw.gov.za
- SCM : 012 748 6380/6373/6218
- Debtors : 012 748 6236/6242
- Creditors : 012 748 6246/6274

Please consult our website at www.gpwonline.co.za for more contact details.

The numbers for our provincial offices in Polokwane, East London and Mmabatho will not change at this stage.

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