

ANNEXURE C

FORM 1

PERMIT TO PERFORM ESSENTIAL SERVICES

REGULATION 11B(12)

Please note that the person to whom the permit is issued must at all times have a form of identification to be presented with this permit. If no identification is presented the person to whom the permit is issued will have to return to his or hers place of residence during the lockdown.

I,

SURNAME				
FULL NAMES				
IDENTITY NUMBER				
CONTACT DETAILS	CELL nr.	Tel nr. (W)	Tel nr. (H)	e-mail address

PHYSICAL ADDRESS OF INSTITUTION	
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Hereby certify that:

SURNAME	
FULL NAMES	
IDENTITY NUMBER	

Is a person working with Animal Care as described in Regulation 11A(B)(12), performs Essential Services and must be allowed to travel to and from work.

Signed at _____ on this the _____ day of _____

2020.

Official Stamp/ Name of Facility

Signature of head of institution