

POWER OF ATTORNEY

I, the undersigned appointed below Authorised Representative as legal representative for the submission of the application to act on my behalf and take the necessary steps as required by the Local Authority to ensure that the application complies with the conditions contained in the law on the By-Law on Municipal Land Use Planning for Mosselbay Municipality, 2015, or any other applicable law.

OWNER NAME	G.J.KLOPPERS	ID NUMBER	620130 5004 085
ERF	783	EXTENSION AREA	KLEINBRAK
AUTHORISED REPRESENTATIVE	TIAN SCHOON	ID NUMBER	870202 5072 086
SIGNATURE OF OWNER		DATE	
SIGNATURE OF AUTHORISED REPRESENTATIVE		DATE	