



# SOUTH AFRICAN POLICE SERVICE APPLICATION FOR CONDONATION / EXTENSION OF TIME

Section 39 of the Second-Hand Goods Act, 2009 (Act No. 6 of 2009)

<b>OFFICIAL DATE STAMP</b>
<b>DATE RECEIVED</b>

A. FOR OFFICIAL USE BY THE POLICE STATION/PROVINCIAL OFFICE/ NATIONAL OFFICE WHERE THE APPLICATION IS CAPTURED										
<sup>1</sup> SAPS 602/603* Reference No	NO					YEAR				
<sup>2</sup> SHG Control System Reference No										

B. TYPE OF APPLICATION <small>(Indicate with an X)</small>				
<sup>1</sup> Condonation of any Disqualification in terms of Section 14 of the Act				<input type="checkbox"/>
<sup>2</sup> Extension of any period contemplated in the Act <small>(Indicate the type of period contemplated in the Act)</small>				<input type="checkbox"/>
<sup>3</sup> Representations <small>(Section 6(2); 9(2); 10(4))</small>	<sup>4</sup> Representations with the option to apply for Condonation (Section 6(2))	<sup>5</sup> Renewal Registration <small>(Section 11(1))</small>	<sup>6</sup> Amendment of Information (Section 8(1))	<sup>7</sup> Appeal <small>(Regulation 14(1))</small>

C. FOR OFFICIAL USE BY THE STATION/OFFICE WHERE APPLICATION IS RECEIVED	
<sup>1</sup> Province/Office	
<sup>2</sup> Police Station/Component	
<sup>3</sup> Component code	

D. FOR OFFICIAL USE BY THE PROVINCIAL / NATIONAL OFFICE WHERE THE APPLICATION IS PROCESSED	
<sup>1</sup> Outstanding/Additional information required	
.....	
.....	

<sup>2</sup> Persal No								<sup>3</sup> Date								
.....																
<sup>4</sup> Signature of Police Officer/DSO										<sup>5</sup> Name of Police Officer/DSO in block letters						

<sup>6</sup> Condonation / Extension* of Time Approved <small>(Indicate with an X)</small>																<input type="checkbox"/>
<sup>7</sup> Persal No								<sup>8</sup> Date								
.....																
<sup>9</sup> Signature of Deciding Authority										<sup>10</sup> Deciding Officer Code			<sup>11</sup> Name of Deciding Authority in block letters			

<sup>12</sup> Condonation / Extension* of Time Refused <small>(Indicate with an X)</small>																<input type="checkbox"/>	<sup>13</sup> Reason(s) for Refusal			
.....																				
.....																				

<sup>14</sup> Persal No								<sup>15</sup> Date								
.....																
<sup>16</sup> Signature of Deciding Authority										<sup>17</sup> Deciding Officer code			<sup>18</sup> Name of Deciding Authority in block letters			

\* Delete where applicable. Condonation application to be forwarded to the National SHG Control Office.  
Extension of Time application (except when applicable on an Association) to be forwarded to the Provincial SHG Control Office.







**G. SIGNATURE OF APPLICANT, POLICE OFFICIAL AND WITNESS**

<p>1 <input style="width:95%;" type="text"/> Name and surname of Applicant in block letters</p>	<p>2 Date <input style="width:100%;" type="text"/></p>
<p>3 ..... Signature of Applicant</p>	<p>4 Place <input style="width:95%;" type="text"/></p>

**5 PARTICULARS OF POLICE OFFICIAL DEALING WITH APPLICATION**

<p>5.1 <input style="width:95%;" type="text"/> Name of Police Official in block letters</p>	<p>5.2 <input style="width:100%;" type="text"/> Persal number of Police Official</p>
<p>5.3 <input style="width:95%;" type="text"/> Rank of Police Official in block letters</p>	<p>5.4 ..... Signature of Police Official</p>

**6 PARTICULARS OF WITNESS**

<p>6.1 <input style="width:95%;" type="text"/> Initials and Surname of witness in block letters</p>	<p>6.2 <input style="width:100%;" type="text"/> Persal number of witness</p>
<p>6.3 <input style="width:95%;" type="text"/> Rank of witness in block letters</p>	<p>6.4 ..... Signature of witness</p>

**H. PARTICULARS OF INTERPRETER**  
(This section must be completed only if the applicant cannot read or write or does not understand the content of this form)

<p>1 Name and surname of interpreter</p>			
<p>2 Identity/Passport number of interpreter</p>	<input style="width:100%;" type="text"/>		
<p>3 Residential address of interpreter</p>	<input style="width:100%;" type="text"/>		
<p>4 Postal Code</p>	<input style="width:100%;" type="text"/>		
<p>5 Postal address of interpreter</p>	<input style="width:100%;" type="text"/>		
<p>6 Postal Code</p>	<input style="width:100%;" type="text"/>		
<p>7 Contact details of interpreter</p>	<p>7.1 Home Tel No ( )</p>	<p>7.2 Cellphone number ( )</p>	
	<p>7.3 Work Tel No</p>	<p>7.4 Fax No ( )</p>	
	<p>7.5 E-mail address <input style="width:100%;" type="text"/></p>		
<p>8 Interpreted from (language)</p>	<p>To (language)</p>		
<p>9</p>	<p>Date <input style="width:100%;" type="text"/></p>		
<p>10</p>	<p>Place <input style="width:95%;" type="text"/></p>		
<p>11</p>	<p><input style="width:100%;" type="text"/></p>		
<p>12</p>	<p>Rank of Interpreter in block letters (if applicable)</p>	<p>13</p>	<p><input style="width:100%;" type="text"/> Persal number of of Interpreter (if applicable)</p>

**I. FOR OFFICIAL USE BY NATIONAL / PROVINCIAL LEGAL SERVICES** (Provincial Legal Services applicable on Extension of Time)

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**COMMENTS (LEGAL FACTS) REGARDING THE APPLICATION FOR CONDONATION / EXTENSION OF TIME\***

Area with horizontal dotted lines for entering comments.

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