



**THE WILDS HOMEOWNERS ASSOCIATION**

Reg No: 2003/008761/08

PHYSICAL ADDRESS:  
De Villebois Mareuil Drive  
Pretoria East  
Pretorius Park  
0081

POSTAL ADDRESS:  
PO Box 28951  
Sunnyside  
Pretoria  
0132

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**APPLICATION TO OPERATE A SCHOOL SHUTTLE SERVICE**

**1. SHUTTLE SERVICE**

1. NAME OF VEHICLE OWNER
2. BUSINESS OWNERS ID NUMBER
3. TELEPHONE NUMBER
4. EMAIL ADDRESS
5. RESIDENTIAL/BUSINESS ADDRESS
6. NAME OF BUSINESS
7. BUSINESS REGISTRATION NUMBER OR PRIVATE
8. OPERATING HOURS First Entry Final Exit

**2. DETAILS OF VEHICLE**

1. TYPE
2. REGISTRATION NUMBER
3. NAME OF VEHICLE DRIVER
4. DRIVERS ID NUMBER

5. RESIDENTIAL ADDRESS
6. TELEPHONE NUMBER

**THE FOLLOWING DOCUMENTS ARE COMPULSORY AND CERTIFIED COPIES MUST BE ATTACHED TO THE APPLICATION**

- a) ID Copies of both the vehicle owner and driver
- b) Copy of the driver's valid driver's license
- c) Copy of the vehicle's license disk and numberplate
- d) PDP Registration and accreditation

**3. SERVICE DETAILS**

1. WHERE IN THE ESTATE WILL SERVICES BE RENDERED
2. NAME OF SCHOOL FOR WHICH THIS SERVICE IS RENDERED
3. TELEPHONE NUMBER AND CONTACT PERSON AT SCHOOL

**4. DETAILS OF PARENTS [ RESIDENTS]**

1. NAME AND SURNAME OF PARENTS
2. PARENT'S ID NUMBERS
3. TELEPHONE NUMBER
4. EMAIL ADDRESS
5. RESIDENTIAL ADDRESS IN THE WILDS Stand Number Street Name
6. NUMBER OF CHILDREN SHUTTLED
7. SIGNATURE OF PARENT

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1. Letter from the client [parents]:
  - Confirm that the shuttle service has been appointed.
  - Confirm that the client [parents] indemnify the HOA against any claim or other where it concerns the service to collect and drop off children.
  - That if the service is not issued with an official PDP certification the client has accepted this.

**SPECIAL NOTES**

1. Driver only be registered on the biometric system NO RF Tags will be issued.
2. The access is only valid for 12 months.
3. The driver is aware of the speed limits and confirms that if any speed infringement is recorded access will be denied.

5. REGISTRATION OFFICE

1. ALL DOCUMENTS RECEIVED
2. REGISTRED ON THE SYSTEM
3. NAME OF SECURITY CONTROLLER
4. SIGNATURE OF SECURITY CONTROLLER
5. DATE

6. HOA

<p>1. APPROVAL BY HOA OFFICE</p> <p>Name</p> <p>Signature</p> <p>Date</p>
<p>2. APPROVAL BY SECURITY COMMITTEE</p> <p>Name</p> <p>Signature</p> <p>Date</p>