REPUBLIC OF RWANDA MINISTRY OF NATURAL RESOURCES **RWANDA WATER AND FORESTRY AUTHORITY** Declaration of Water Use Activities before their beginning Article 32, 33 Law N°62/2008 of 10/09/2008 relating to the use, conservation, protection and management of water resources Article 8 of the Ministerial Order N°002/16.01 of 24/05/2013 determining the procedure for declaration, authorization and concession for the utilization of water **IDENTIFICATION OF DETAILS** I. DECLARANT 1. Full name of Declarant (In Block Letters) Category of Declarant (Individual. 2. Company, Cooperative, Organization, Institution, Other (specify) ID/Passport Number of Declarant 3. Attach copy (Individual) or Certificate of Registration/Legal personality for Company, Cooperative or Organization **Contact Address of Declarant** 1. P.O Box 2. Town, Province, District, Cell, Village 3. Telephone Contact (Landline) 4. Telephone Contact (Mobile) 5. Email Contact **Alternative Contact Person** 1. Full names of Alternative Contact Person 2. ID/Passport Number 3. Town, Province, District, Cell, Village 4. Telephone contact (Mobile) 5. Telephone contact (Landline) 6. Email Address

II. PROJECT DESCRIPTION

- 1. Is your project existing or proposed? Yes
- 2. Provide a detailed description of your project, including but not limited to the method of water use, all structures and equipment (Nature, capacity and/or dimension) related to the use of water and a general overview of how you will operate the project under this Declaration. Attach additional pages and documents as necessary.

No

III. LOCATION OF THE PROJECT

For your Declaration you have to provide the Ministry with accurate information showing the source of water and location of water use. For this purpose you must submit geographic/topographic maps, photographs with this form that clearly indicates the location of (1) the source of water, (2) point of intervention) and (3) the place of use.

1. For the source of water and point(s) of intervention, provide the Catchment Name and Level (I and II)

Name------Level II------Level II------

Village-----, Cell-----, Sector-----, District-----

-----and Province -----

2. For the place of use, provide the Catchment Name and Level (I and II)

Name-----Level II-----

Village-----, Cell-----, Sector-----, District-----

----- and Province -----

IV. SOURCE OF WATER

1. The name of the lake, river, stream or other source of the water for your project is:

----- Tributary to -----

2. Reliability of water source Water always available Dry during certain season Frequently Dry

V. PURPOSE OF WATER USE, AMOUNT, AND DURATION

In the table below, state the purpose of use, the amount of water, and the duration of your project.

Purpose of	Amount		Duration	
use				
	m ³ /day	m ³ / year	Beginning Date (Day/Month/Year)	Ending Date (Day/ Month/Year)
Total				

VI. RIGHT OF ACCES

1. Do you own all of the lands that may be necessary to access and/or use water?

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Yes
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No	
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If your answer is No to item (1), complete item (2) below.

2. Do you have a recorded easement or written authorization allowing access?

No	
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If your answer is Yes to item (2), attach copies of easement or authorization allowing access. If your answer is No to item (2), proved the names and addresses of all affected landowners and describe your process for obtaining access:------

VII. MAPS, PLANS, PHOTOGRAPHS OR OTHER SPECIFICATIONS

Remember that you have to provide complete and clearly dated and labeled maps, plans, photographs or other specifications showing the following:

The source of water, point(s) of intervention and place of use.

NOTE: The maps, plans, photographs or other specifications accompanying this application are a part hereof.

VIII. CERTIFICATION AND SIGNATURE OF DECLARANT

CERTIFICATION

I certify that the information provided in this Declaration is correct to the best of my knowledge. I also agree that no decision will be made nor action taken with respect to this Declaration until I

receive a Declaration Receipt from the Ministry of Natural Resources that I have provided all the necessary information.

Dated, at	Location
SIGNATURE of Declarant or duly authorized	ed agent
Full names	Title or Relationship
Official seal/stamp	
OFFICIAL SECTION	
Reception date: day of	, Month20
Full names	Title/Position
Signature of Ministry Official	