

FORM PHOTOGRAM S1

I certify that before the despondent made the oath/affirmation★ I asked him/her★ the following questions and wrote down his/her★ answers in his/her★ presence:

(I) Do you know and understand the contents of this declaration?

Answer: _____

(ii) Do you have any objection to taking the prescribed oath/making the prescribed affirmation★?

Answer: _____

(iii) Do you consider the prescribed oath/affirmation★ to be binding on your conscience?

Answer: _____

I certify that the despondent has acknowledged that he/she★ knows and understands the contents of this declaration, which was sworn to/affirmed★ before me, and that the despondent’s signature was placed thereon in my presence.

Commissioner of Oaths: _____

Designation (Rank): _____

Date: _____

★ **Delete whichever is not applicable.**

FORM PHOTOGRAM S2

**APPLICATION FOR REGISTRATION AS A
PHOTOGRAMMETRIC SURVEYOR
IN TERMS OF SECTION 22(1)(a) OF THE
PROFESSIONAL AND TECHNICAL SURVEYORS' ACT,
(ACT 40 OF 1984)**

PERSONAL INFORMATION

- 1. Full Name(s) of Applicant _____
- 2. Postal Address _____

- 3. Telephone Numbers _____ (H) _____ (W)
- 4. Date of Birth _____
- 5. Identity Number _____
- 6. Current Employer _____
- 7. Present Position _____
- 8. Date Appointed _____
- 9. Previous Employer(s) _____

FORM PHOTOGRAM S2

10. Tertiary Academic Qualifications:

Qualification	Institute	Date Completed

11. Summary of Photogrammetric Experience : _____

(A detailed and certified Schedule of Experience with regard to all Photogrammetric work undertaken since obtaining the National Diploma: Surveying or the old National Higher Diploma: Surveying should be submitted with this application).

12. Signature of Applicant: _____ Date: _____

FORM PHOTOGRAM ST1

**APPLICATION FOR REGISTRATION AS A
PHOTOGRAMMETRIC SURVEY TECHNICIAN
IN TERMS OF SECTION 22(1)(a) OF THE
PROFESSIONAL AND TECHNICAL SURVEYORS' ACT, 1984
(ACT 40 OF 1984)**

**The Registrar
The South African Council for Professional and Technical Surveyors**

I the undersigned, (Full Names)-----
of (Address) -----

hereby apply for registration as a Photogrammetric Survey Technician.

I swear/make affirmation★ and declare that the contents of this application, as presented by this form and the accompanying **Form PHOTOGRAM ST1**, are true, and further :

- (a) That I am the person mentioned in the accompanying letter signed by representatives of PLATO and on the certified copies of qualifications which I wish to be entered in the Register and which are hereby submitted in support of my application;
- (b) That I am not according to law detained as a mentally ill person;
- (c) That I have never been convicted of an offence and sentenced in respect thereof to imprisonment without the option of a fine;
- (d) That I have never been removed from an office of trust on account of improper conduct;
- (e) That I am/am not★ insolvent and that I have/have not★ assigned my estate for the benefit of creditors, and that I have/have not★ compounded with my creditors.

----- Place	----- Date	----- Signature
-----------------------	----------------------	---------------------------

NOTE : This must be signed before a Commissioner of Oaths.

FORM PHOTOGRAM ST1

I certify that before the despondent made the oath/affirmation ★ I asked him/her ★ the following questions and wrote down his/her ★ answers in his/her ★ presence:

(I) Do you know and understand the contents of this declaration?

Answer: _____

(ii) Do you have any objection to taking the prescribed oath/making the prescribed affirmation ★?

Answer: _____

(iii) Do you consider the prescribed oath/affirmation ★ to be binding on your conscience?

Answer: _____

I certify that the despondent has acknowledged that he/she ★ knows and understands the contents of this declaration, which was sworn to/affirmed ★ before me, and that the despondent's signature was placed thereon in my presence.

Commissioner of Oaths: _____

Designation (Rank): _____

Date: _____

★ **Delete whichever is not applicable.**

FORM PHOTOGRAM ST2

**APPLICATION FOR REGISTRATION AS A
PHOTOGRAMMETRIC SURVEY TECHNICIAN
IN TERMS OF SECTION 22(1)(a) OF THE
PROFESSIONAL AND TECHNICAL SURVEYORS' ACT,
(ACT 40 OF 1984)**

PERSONAL INFORMATION

- 1. Full Name(s) of Applicant _____
- 2. Postal Address _____

- 3. Telephone Numbers _____ (H) _____ (W)
- 4. Date of Birth _____
- 5. Identity Number _____
- 6. Current Employer _____
- 7. Present Position _____
- 8. Date Appointed _____
- 9. Previous Employer(s) _____

FORM PHOTOGRAM ST2

10. Tertiary Academic Qualifications:

Qualification	Institute	Date Completed

11. Summary of Photogrammetric Experience : _____

(A detailed and certified Schedule of Experience with regard to all Photogrammetric work undertaken since obtaining the National Diploma: Surveying or the old National Higher Diploma: Surveying should be submitted with this application).

12. Signature of Applicant: _____ Date: _____

CERTIFICATE OF COMPETENCY

(One copy for each Employer / Supervisor)

Issued in favour of for registration
as a ★Photogrammetric Surveyor / Photogrammetric Survey Technician as contemplated in
Section 22 of Act 40 of 1984.

I, ★Professional Surveyor / Plato registered
Photogrammetric Surveyor, hereby declare that
is a competent ★Photogrammetric Surveyor / Photogrammetric Survey Technician who can
carry out the variety of tasks and procedures within the specified standards of accuracy as
defined in the training requirements in ★paragraph 3 (Photogrammetric Survey Technician) /
paragraphs 3 and 4 (Photogrammetric Surveyor) in the Notes for Guidance for Registration as
a Photogrammetric Surveyor or Photogrammetric Survey Technician.

Signed : Date :

★Delete which is not applicable.

CERTIFICATE OF EMPLOYMENT

(One copy for each Employer / Supervisor)

I, a ★Professional Surveyor /
Photogrammetrist / Plato Registered Photogrammetric Surveyor, practising in the Republic
of South Africa, do hereby certify that
has been engaged in survey work under my personal supervision for the following periods
and performing photogrammetric work in the following categories :

Periods :.....	Category : e.g.	Flight Planning
.....		Aerial Triangulation
.....		Stereo Map Compilation
.....		Cadastral Compilation
.....		Principles of Field Survey for Photo Control
.....		Flying and processing of Aerial Photography

PARTICULARS OF WHICH IN REGARD TO THE TIME AND NATURE OF THE WORK,
ARE ANNEXED.

Dated at on theday of

Signed :

★Professional Surveyor / Photogrammetrist / Photogrammetric Surveyor,

★Delete which is not applicable.