

SCHEDULE 5

ACCEPTANCE BY INDIVIDUAL FOR USING HIS/HER NAME

| l, | | | , with ID |
|---------------------|----------------------------------------------|--------------------------------|---------------------------|
| number | | and contact number: | hereby |
| accept that my name | be used as a name fo | or public places as proposed l | by the community. |
| • | expect any form of corepresenting such, as a | mpensation from the municip | ality or any other person |
| Signature: | at | (place), on | (date) |
| Witness 1: | | Witness 2: | |
| Date: | | Date: | |