

E# 5788 Hermanus

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Mr P Roux
 Town Planner
 Overstrand Municipality
 Hermanus Heights 7200



TP- A Theart
 (H Olivier)

Dear Sir

As directors of the Omega Trust my wife and I are in receipt of your notice (87/2016) with file reference 5788 HHH (3260) dated 2 June 2016 and subsequently of a notice to the effect that our communication objecting to the application for consent use and departure in terms of Section 16(2)(0) to establish a health clinic on erf 5788 (23 Raed-na-Gael Street) and to deviate from the parking requirements in terms of Section 16(2)(b) of the appropriate By-Law, has been rejected.

In order to comply with the relevant requirements we wish to supply the following information:

1. Representation is made by Mr Neil van Heerden, Trustee of Omega Trust resident for more than ten years at 19 Raed-na-Gael Street Hermanus Heights tel no 028 3131792.
2. Please refer to par 1 above for physical detail of applicant who has been resident in the immediate vicinity of the property in question for more than ten years. We decided to build our own residence here because of the tranquil nature of the area in the immediate vicinity of the mountain and the declared nature reserve for fynbos. It is a natural home for a remarkable variety of wild life including small buck, tortoises, francolin, guinea fowl, owls and of course baboons. The service road which runs up the mountain side provides access to the reservoir for

FILE NO: EL 5788-17M

SCAN NO:

COLLABORATOR NO:

915400

municipal workers but also to hikers and walkers who use the extended walkaways in the mountain. This volume of traffic is in our view appropriate for the recreational needs of the community and for a balance in nature which protects the wild life.

3. After careful consideration and discussions with other residents here we believe that the introduction of a health clinic with related activities would fundamentally change the character of this residential area. A comparison with a standard guest house is in our view not appropriate as it involves a different level of vehicle movement of both persons and goods which will be ongoing and aimed at establishing and maintaining a business – a whole different standard of traffic and attention from participants will come about. It will also have to take into account the delivery of supplies of a wider nature needed by a health clinic. This will also have to provide for the handling of medical waste, an element entirely removed from the wishes of the current residents who will certainly not be supportive of a change into an industrial character here. For instance and most disturbingly medical waste to be effectively removed will have to be of adequate volume to justify this and not to be just dumped in the regular waste removal. The kind of control and monitoring which this requires will most likely be beyond the local capacity. The statement that the volume of traffic will be kept to a minimum is wishful thinking.
4. The change in circumstances outlined above and related to the conditions we believe should be maintained in our residential areas gives some indication of the manner in which local policy will be eroded by this request.
5. Against this background it is respectfully requested that the Overstrand Municipality does not approve the

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consent use and departure application submitted by Erf
5788.

Yours truly

Neil P. van Heerden

Neil P van Heerden.



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+27 (0) 12 348 9988
Facsimile: +27 (0) 12 424 4163
Mobile: +27 (0) 82 894 9935
e-mail: ewd@lawcircle.co.za

TP - A. Theart
(Hollinier)

Adv M Joubert
3 Eikedal
102 Lynnro Avenue
Lynnrodene
Pretoria
Republic of South Africa

7 July 2016

alida@overstrand.gov.za

The Municipal Manager,
Overstrand Municipality,
16 Paterson Street,
Hermanus.

Dear Sir/Madam,

FILE NO: EL 5788 - HM
SCAN NO:
COLLABORATOR NO:
917249

OBJECTION, COMMENTS AND REPRESENTATIONS IN TERMS OF SECTION 52 OF THE OVERSTRAND MUNICIPALITY'S BYLAW ON MUNICIPAL LAND USE PLANNING, 2016

1 Introduction: Nature and Purpose of Objection

- a. As indicated in the caption, this is an objection in terms of section 52 of the Overstrand Municipality's Bylaw on Municipal Land Use Planning, 2016 (**the Bylaw**).
- b. The objection is filed pursuant to the Overstrand Municipality's (**the Municipality**) Municipal Notice No 87/2016 (**the Notice**) concerning an application (**the application**) that it had received from Plan Active (**Plan Active**) in respect of Erf 5788, Hermanus Heights (**the subject property**), which is situated at 23 Raed-na-Gael Street, Hermanus Heights.
- c. The application referred to is, in the first instance, one for a *consent use* in terms of section 16(2)(o) of the Bylaw and, secondly, also one for a *permanent departure* from the provisions of the zoning scheme in terms of section 16(2)(b) of the Bylaw.
- d. The zoning scheme referred to is, of course, the Municipality's Zoning Scheme of June 2013 (**the Zoning Scheme**), as published in Provincial Notice No 400 of 2013 of the

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Province of the Western Cape's Provincial Gazette Extraordinary No 7203 of 29 November 2013.

- e. This objection is lodged against both the proposed *consent use* and the *permanent departure* sought in the application in respect of the subject property.
- f. The reasons for the objection, together with the appropriate comments and representations, are set out in the required detail in paragraph 5 below.

2 **The objector's name – section 52(3)(a) of the Bylaw**

- a. My full name is Miranda Joubert (ID 5105260064086).
- b. I am an adult female, a retired legal practitioner, as well as a former Chief State Law Advisor (International Affairs) in the erstwhile Department of Foreign Affairs (since renamed to the Department of International Relations and Cooperation).

3 **The objector's address – section 52(3)(b) of the Bylaw**

- a. My physical addresses are as follows: (i) Pretoria: No 3 Eikedal, 102 Lynnro Avenue, Lynnrodene, 0081; Telephone number: 012 348 9988; Mobile number: 082 894 9935; and email: ewd@lawcircle.co.za; and (ii) Hermanus: 16 Raed-na-Gael Street, Hermanus Heights, Hermanus, 7200; Telephone number: 028 312 1946. The remainder of the details remain the same.
- b. However, and notwithstanding the addresses and other contact details provided for the sake of completeness in paragraph 3.a above, I *specifically nominate*:

- (i) the following physical address at which I will accept notice or service of hard copies of all *documents that are sought to be delivered to me either by hand by means of registered post, viz:*

NICOLETTE LLOYD
 32 Mitchell Street, Hermanus, 7200
 Phone: +27 (0) 28 312 3771 / Fax: +27 (0) 28 312 2026
lloydn@hermanus.co.za

- (ii) the following email address, i.e. ewd@lawcircle.co.za, at which I will accept notice or service of all soft or electronic copies of *documents that are sought to be delivered or transmitted to me electronically.*

4 **The objector's interest in the application – section 52(3)(c) of the Bylaw**

My interest in the application arises from one, more or all of the following three grounds, viz:

- a. First, as the registered owner of Erf 5850, Hermanus Heights (**Erf 5850**), which is situated at 16 Raed-na-Gael Street, Hermanus Heights, and which I hold under Title Deed No 000077940/2012 dated 12 December 2012. Since this is a public document that can be inspected in the Office of the Registrar of Deeds, Cape Town, a copy thereof is not attached, but can be made available if same were to be required. As can be seen from the Locality Map dated August 2015, which accompanied the application, Erf 5850 lies on the southern side of Raed-na-Gael Street and, approximately, three (3) stands further to the west of the subject property, which makes it quite plain why I have a *direct and substantial interest* in the application.
- b. Second, as a fully paid-up rate-payer – my municipal account (Account Number: 900000241581) is usually paid-up between two or three months in advance – and thus someone who also has a *direct and substantial interest* in the proper and orderly application and enforcement of the Zoning Scheme, as well as the proper and orderly application and enforcement of the provisions of the Bylaw; and
- c. Third, as a citizen of the Republic of South Africa, who also has the inalienable personal right to an environment that is not harmful to my health and well-being in terms of the Constitution of the Republic of South Africa, 1996 (**the Constitution**). This nature of this right adheres personally to each of the other individual land owners and residents of Hermanus, in general, and Hermanus Heights, in the particular; and as such I am a member of this broader class of individuals who collectively have an interest in ensuring that the Municipality takes adequate measures to protect their environment.

5 **The objector's reason(s) for the objection, comment and representation - section 52(3)(d) of the Bylaw**

Prefatory remarks

- a. There are some *preliminary objections* to the application, as well as, at least, two *fundamental objections* to it.
- b. For the sake of convenience, I will deal with the more fundamental ones at the outset. The reason for this is because the nature of each of the preliminary objections is such that



issues addressed therein *might* be capable of clarification and resolution to the complete satisfaction of the Municipality. However, until such time as any of those objections (i.e. the *preliminary objections*) are indeed so clarified to the Municipality's satisfaction they are to be treated as having equal force as my fundamental objections.

- c. To appreciate the nature of the *fundamental objections* I raise herein, it is necessary to properly contextualise the application for *consent use* brought in terms of section 16(2)(o) of the Bylaw, which is to accommodate a health clinic, in fact a *sub-acute medical care facility*, on the subject property,¹ with the aim of providing or offering –

(i) “... *patients with medical services such as post operation care and support, mobile therapy and other relevant medical therapy*”;² and

(ii) “... *recovery accommodation where patients can rehabilitate and recover after surgeries/treatments received at the surrounding hospitals*”;³

(iii) “*The proposed sub-acute medical care facility will provide care for adults or paediatric patients who have undergone surgery or treatment in a hospital or focused health facility that still require further nursing care and medical supervision at a lower intensity. It is also commonly known as a type of recovery accommodation for patients. Therefore, the proposed land use is a low impact land use and similar to establishing a guesthouse on the subject property*”⁴ (Emphasis added); and

(iv) “*The proposed sub-acute medical care facility will serve as a facility where post-operative/post-treatment patients, who are already out of the danger zone but still too weak to take care of themselves, can be accommodated. The facility will assist patients to recover by providing all the necessary amenities to nurse them back to health. This type of facility is ideal for patients without the necessary support at home or in close proximity to assist in their recovery process after medical procedures/treatment received*”.⁵

¹ Plan Active's Motivation Report: §3.4, first bullet point, pp. 2 and 3.

² *Ibid.* §3.4, second unnumbered paragraph, p. 3.

³ *Ibid.* §3.4, third unnumbered paragraph, p. 3.

⁴ *Ibid.* §3.4, third unnumbered paragraph, p. 4.

⁵ *Ibid.* §3.4, fourth unnumbered paragraph, p. 4.

- d. To boldly assert, as Plan Active does in the portion of its Motivation Report that I have quoted and emphasised in paragraph 5(c)(iii) above, that the proposed land use arising from the operation of a *sub-acute medical care facility* on the subject property is or would be similar to that of a guesthouse being operated thereon, is not only misleading and deceptive, but it also betrays precisely how ill-conceived the application is. This is so for at least, but it is by no means necessarily only limited to, the following reasons:
- (i) First, the generation of *medical waste*, which only receives fleeting mention in Plan Active's Motivation Report,⁶ an activity that certainly does not take place in a guesthouse;
 - (ii) Second, the nature of the business of such *sub-acute medical care facility*, where it is envisaged that patients will receive medical services, such as post operation care and support, mobile therapy and other relevant medical therapy, all being services that are not associated and indeed cannot be associated, by any stretch of the human imagination, with the operation of a guesthouse; and
 - (iii) Third, given the envisaged medical status of the patients sought to be cared for in such *sub-acute medical care facility* – i.e. persons that have undergone operative treatment (which in the present context can only mean surgical treatment) or some other hospital treatment, and who, although perhaps out of the so-called danger zone, are simply still too weak to take care of themselves – it is not inconceivable that they would have to be brought to the *sub-acute medical care facility* by ambulance, or to be taken from it by the same means on occasions that relapses are suffered and they have to be rushed back to hospital.
- e. The first fundamental objection: Generation and management of medical waste
- (i) The *first fundamental objection* pertains to the generation of medical waste. As previously indicated, this issue receives fleeting mention in the Motivation Report and then only in a throwaway line under the somewhat obscure heading "*Solid waste*",⁷ where it is stated that it will be "*removed regularly by the same company used by the local hospitals*".

⁶ *Ibid.* §3.7.1, p. 8, under the heading "*Solid waste*", where, in the second subparagraph, it is merely asserted that: "*Medical waste will be removed regularly by the same company used by the local hospitals.*"

⁷ See. in this regard, footnote 6 above.

- (ii) What this reveals is a surprising lack of appreciation and awareness of the nature and categories of medical waste, as well as the vital need to properly monitor and manage all such categories of waste after same has been generated. This requires not only suitably trained personnel to undertake this process, but also the wherewithal to ensure its safe and secure storage *prior* to its removal for safe disposal. Not a single word about any of these crucial matters is uttered in the Motivation Report and, on this ground alone, the application should be refused by the Municipality.
- (iii) What is medical waste? It is commonly also referred to as healthcare waste. For the sake of consistency, I will continue to use the expression "*medical waste*". There are different types of medical waste and it is appropriate that I should just mention a few of them. It would include for example:⁸
- *Infectious waste*, i.e. waste that is contaminated with blood and other bodily fluids, such as bandages;
 - *Sharps*, such as syringes and needles;
 - *Chemicals*, such as disinfectants, mercury in broken thermometers and batteries; and
 - *Pharmaceuticals*, such as expired, unused and/or contaminated drugs.
- (iv) By mentioning only these few examples, it can readily be appreciated why it is vital that emphasis also has to be placed on the *proper monitoring, management and storage of medical waste prior to its removal for disposal*. It can equally be appreciated why properly trained and skilled personnel are needed to ensure that nothing goes awry in this process.
- (v) In an area, such as Hermanus Heights, which lies at the foot of the Raed-na-Gael Mountain and immediately adjacent to the Fernkloof Nature Reserve (FNR), any aberrant treatment and disposal of medical waste presents a threat not only to the neighbouring properties and residents of the area, but also to the wildlife that is encountered there, e.g. small deer, birdlife (including Owls and Francolin), baboons and others scavengers roaming the area. The identified risk is therefore real, it is self-evidently also material, which is further underscored by the lack

⁸ See, in this regard, the World Health Organisation's website: <http://www.healthcare->

awareness on the proper management of medical waste revealed in and by the content of the Motivation Report. In all the circumstances, rationality dictates that the Municipality is duty-bound to follow a risk averse approach and to refuse the application for the proposed consent use.

- (vi) In any event, all legislation, whether at the national, provincial and local government level, concerning the proper disposal of waste, including medical waste, has to be complied with. This legislation includes, but is not limited to, the provisions of the National Environmental Management: Waste Act, 2008 (Act No. 59 of 2008). Accompanying this letter of objection, is an article extracted from the *South African Medical Journal*, January 2014, Volume 104, No. 1 - it is attached hereto as Appendix 1 - which draws attention to the harmful nature of medical waste and the vital need to ensure that it is properly managed. The viewpoints expressed in the article are apposite to the application.

f. The second fundamental objection: Major and undesirable impact on the tranquility of the area – and Raed-na-Gael Street in particular

- (i) In the preceding paragraph, I referred to the proximity of the Raed-na-Gael Mountain and the FNR. The subject property and my stand, i.e. Erf 5850, are both located in Raed-na-Gael Street, which is the very last road nearest to this Mountain and the FNR.
- (ii) After visiting Hermanus for vacation purposes over the course of many years, my husband and I developed a deep affinity for the town and the local citizenry - the former, because it was well-managed and clean, and the latter, because the people were friendly and unpretentious. In 2012 we decided to purchase a property in Hermanus with the objective of eventually residing there permanently as soon as my husband, Adv EW Dunn, SC, decides to retire from his legal practice at the Pretoria Bar. In this regard, having become well acquainted with the various areas of Hermanus and its immediate surroundings, we decided to purchase Erf 5850 - specifically because of the tranquil location it was in and that we were attracted to. We decided to appoint Mrs Nicolette Lloyd, a well-known local architect, to design and cause to be developed our retirement home consistent with the vernacular of the local building style, as well as a garden completely populated with *Fynbos*.

- (iii) I specifically mention our attraction to the tranquillity of the area, because it is simply inconceivable that anyone can realistically think of using a property in that area for the purpose of carrying on business as a *sub-acute medical care facility*. It is no doubt for this reason that Plan Active is intent on portraying the application as if such business is akin to the running of a guesthouse. The only commonality between a guesthouse and the proposed consent use, is the fact that persons will be accommodated therein. But people are also accommodated in prisons and other types of correctional facilities, and it would be a complete misnomer to liken these latter types of accommodation with a guesthouse or, for that matter, a *sub-acute medical care facility*. To do so would be disingenuous in the extreme. And the same applies equally in the present instance where Plan Active seeks to dress up the application as an innocuous one akin to a guesthouse. This, perhaps, also explains why only passing reference is made by it to the “*removal of medical waste*”, but no mention whatever is made of the vital *prior* management and storage of it by suitably skilled personnel.
- (iv) Moreover, with the routine accommodation of guests in a guesthouse, it can be appreciated that the normal comings and goings of guests could possibly be likened to that of the different members of a family. Visitors to a guesthouse would mostly spend their days in the outdoors, on a variety of extramural activities to be found in and around Hermanus. But in the present case, with the operation of a *sub-acute medical care facility*, it can readily be expected that there will be an appreciable increase in traffic up and down the ordinarily very quiet Raed-na-Gael Street. Such traffic will consist of –
- visitors to the patients accommodated in such facility at all hours of the day;
 - vehicular traffic for the delivery of victuals and medical supplies on an ongoing basis;
 - the comings and goings of the proposed facility’s personnel at all hours of the day and night;
 - inspections by governmental authorities, concerned with healthcare; from time to time; and

- as mentioned earlier, also by ambulances that are required for the proper conveyance of patients to and from the proposed facility whenever this is required.
- (v) It can be accepted, I consider, that the sound of vehicular traffic in Raed-na-Gael reverberates off the side of the Mountain. This in itself constitutes an increase in noise pollution in this tranquil area, which is quite different to other, busier, residential areas in Hermanus. The envisaged increase in traffic is further underscored by the proposed *permanent departure* from the provisions of the zoning scheme in terms of section 16(2)(b) of the Bylaw for increased parking at the subject property.
- (vi) The simple truth of the matter is that the proposed *consent use* and *permanent departure* applied for is simply ill-conceived for the area in question. It is not necessarily aimed at assisting the citizenry of Hermanus either, but rather out-of-townners, who are not close to their customary support base, and perceived “tourists” on so-called “*medical safaris*”.⁹ If the applicant/owner of the subject property is truly intent on operating a *sub-acute medical care facility*,¹⁰ it should find other more suitable, more accessible, premises elsewhere in Hermanus where such a facility can appropriately be operated and accommodated, e.g. in the precinct of the Hermanus Provincial Hospital. In any event, my enquiries reveal that there are already four (4) such facilities in Hermanus and its surrounds. These facilities are located in the Kidbrook and Manor Estates, respectively, where they form an integral part of the structures developed in those estates. In addition, there are also two facilities in close proximity to, or rather adjacent to, the Hermanus Provincial Hospital and MediClinic. They are Huis Lettie Theron and SOFCA. Apart from serving the community, these facilities are also open to any person requiring healthcare in a *sub-acute medical care facility*. The location of the other four facilities are far more appropriate to the area or areas in which they are situated, and this in itself demonstrates the lack of justification for the establishment of such a facility on the subject property which admittedly lies in an area “... *generally seen as a tranquil and quiet neighbourhood*”.¹¹

⁹ Plan Active’s Motivation Report: §4, last bullet point, p. 13.

¹⁰ Apart from the alleged “*gap in the nursing industry*”, which is baldly asserted in the Motivation Report: §3.4, third unnumbered paragraph, p. 3, no credible evidence, whether in the form of market research or otherwise, has been produced to demonstrate any such “*gap*” in Hermanus and its precinct.

¹¹ Plan Active’s Motivation Report: §3.5, p. 6.

particular issue, I am obliged to reserve my rights to fair administrative justice in full and expect the Municipality to also respect this by ensuring that this issue is properly investigated to its complete satisfaction.

6 **Reservation of rights, as well as the right to supplement this objection**

Should the need for this arise, I reserve my rights to supplement this objection whenever necessary, including in circumstances where new material is sought to be placed before the Municipality and its designated decision-maker(s) by the applicant and/or Plan Active.

7 **Conclusion**

In view of all the foregoing, I request that my objections be upheld, for the reasons and the accompanying comments and representations contained herein; and that the applications for *consent use* and for the *permanent departure* from the provisions of the zoning scheme in respect of the subject property be refused.

Yours sincerely



Adv M Joubert

¹⁶ Plan Active's Motivation Report: §3.4, first unnumbered paragraph, p. 3.

- g. As indicated earlier, there are some *preliminary objections* to the application too. Until they are clarified and resolved to the satisfaction of the Municipality, they are to be treated with equal force as the *fundamental objections* I have outlined above.
- h. The *first preliminary objection* is concerned with the true applicant's identity. A perusal of documents reveals uncertainty, if not plain confusion, on this issue. For instance, in the Notice¹² it appears to be a close corporation called "*Hermanus Property Holding CC*", while Plan Active's Motivation Report refers to "*Stand 5788 Hermanus (Pty) Ltd*".¹³ In both cases, the reference is to a single corporate entity, albeit in the one instance to a close corporation and in the other to a private company with share capital, each having a different name. Elsewhere in the Motivation Report, Plan Active refers to "*Our client ... [who] ... is a sinologist based in Hermanus*" indicating that the owner is not a corporate entity, but rather an *individual* natural person; and later on reference is made to the "*owners*", suggesting not a single corporate entity or an individual natural person, but more than one such owner, whatever the correct designation of such owners may be. It would be folly for the Municipality to consider the application without knowing who the true applicant is and whether or not the correct person actually has authorised Plan Active to process the application on its behalf.
- i. The *second preliminary objection* is concerned with the so-called "*pre-application discussions*" Plan Active apparently had with a certain Mrs Hanneen van der Stoep, Mr Petrus Roux and Mr Dennis Hendriks, all of whom, I assume, are officials in the employ of the Municipality.¹⁴ It is not clear from the Motivation Report whether these "*discussions*" were ordained in terms of section 38 of the Bylaw. Should the Municipality establish to its satisfaction that such discussions were indeed held in terms of that section, that is one thing. However, the purpose of any such consultation must be "*in order to determine the information that must be submitted together with the application*"¹⁵ (Emphasis added). Plan Active says in the Motivation Report that the officials in question seemingly expressed the view that: "*The general feel from the municipality was that the proposed land use can be accommodated in this area*",¹⁶ which, in my considered view, is quite another thing. It serves to taint the process, which must be conducted fairly and legally in accordance with constitutional precepts, by introducing pre-conceived notions on the success of the merits of the application. As I have no further information on this

¹² Overstrand Municipality's Municipal Notice No 87/2016.

¹³ Plan Active's Motivation Report: § 1, p. 1.

¹⁴ Plan Active's Motivation Report: §3.4, first unnumbered paragraph, p. 3.

¹⁵ Section 38(1) of the Bylaw.

MEDICINE AND THE LAW

Disposal of medical waste: A legal perspective

K du Toit, J Bodenstein

Karen du Toit is an honorary associate professor in the Discipline of Pharmaceutical Sciences (Pharmaceutical Chemistry), University of KwaZulu-Natal, South Africa and candidate attorney at DMKisch Inc. Johannes Bodenstein is a Senior Lecturer in the Discipline of Pharmaceutical Sciences (Pharmacology), University of KwaZulu-Natal, South Africa.

Corresponding author: K du Toit (karend@dmkisch.com)

The Constitution of the Republic of South Africa provides that everyone has the right to an environment that is not harmful to their health and well-being. The illegal dumping of hazardous waste poses a danger to the environment when pollutants migrate into water sources and ultimately cause widespread infection or toxicity, endangering the health of humans who might become exposed to infection and toxins. To give effect to the Constitution, the safe disposal of hazardous waste is governed by legislation in South Africa. Reports of the illegal disposal of waste suggest a general lack of awareness and training in regard to the safe disposal of medical waste.

S Afr Med J 2014;104(1):14-15. DOI:10.7196/SAMJ.7175



The Constitution of the Republic of South Africa¹¹ provides that everyone has the right to an environment that is not harmful to their health and well-being. However, the illegal dumping of hazardous waste poses a danger, not only to the health of scavengers who are

directly exposed to it, but also to the environment when pollutants migrate into water sources and ultimately cause widespread infection and toxicity. To give effect to the Constitution, the safe disposal of hazardous waste is governed by legislation. However, constant findings of illegal disposal of waste suggest a general lack of awareness and training in this sector.¹²

According to the Hazardous Substances Act,¹³ waste is classified as general or hazardous waste according to the risk it poses. General waste is defined as waste which does not pose a significant threat to public health or the environment. Hazardous waste, however, has the potential, even in low concentrations, to have a significant adverse effect on public health and on the environment. Waste is accepted to be hazardous and toxic until proven otherwise.¹⁴ The Act further provides for the classification and control of hazardous substances, which is provided for in the South Africa Bureau of Standards (SABS) Standard 0228.¹⁵

Nine classes of hazardous substances are identified, of which one or more will certainly be found in retail pharmacies, including: class 2 – compressed gases such as oxygen in gas cylinders; class 3 – flammable liquids such as acetone or alcohol; class 6 – toxic and infectious substances such as drugs, cytotoxic substances and sharps; and class 7 – radioactive substances.

The SABS Standard determines the minimum requirements for the differential disposal of hazardous waste. Neither the Act nor the SABS Standard specifically provide for healthcare waste generated at healthcare facilities.

The management of healthcare waste is envisaged by the draft Health Care Risk Waste Management Regulations of 2008.¹⁶ According to these regulations 'healthcare risk waste' is defined as that hazardous portion of healthcare waste which includes infectious waste, infectious sharps, and pharmaceutical waste. Pharmaceutical waste is defined as expired, unused, spilt or contaminated drugs, medicines and vaccines, and includes their packaging materials.

Good pharmacy practice

A generator of waste *inter alia* refers to a person (including healthcare practitioners and facilities) whose actions or activities result in healthcare risk waste, according to the draft Health Care Risk Waste Management Regulations.¹⁷ Any generator of waste has a 'duty of care' to society to handle, store, transport or dispose of waste in an environmentally sound way.¹⁸ This is referred to as the 'cradle-to-grave' responsibility,¹⁹ since it lasts throughout the whole process of waste disposal. Therefore, pharmacies and responsible pharmacists have a duty to handle waste in a responsible manner. It is important that every pharmacy has a standard operating procedure for disposal of waste.

Waste production should be minimised or avoided where possible, e.g. by checking expiry dates of goods on delivery, supplying older batches first, recycling or re-using packaging materials and returning empty gas bottles to the supplier. Generated waste should be segregated at the point of generation in a pharmacy and healthcare risk waste should not be mixed with general waste or other waste streams.²⁰ This waste should be contained at the point of generation into specifically designated containers. This entails the use of containers specifically intended for sharps (South African National Standards (SANS) 452),²¹ as well as differently colour-coded containers and liners (SANS 10248-1).²² Containers must be rigid, leak-proof and puncture resistant. In addition, containers must be sealed and labelled properly and stored in a secure, designated area until released to the transporters. Pharmaceutical waste may not be stored for longer than 90 days from the date the container is sealed to the date of final disposal.²³

The waste generator must ensure that waste is handled only by companies permitted to transport and dispose of it.²⁴ Disposal must take place through a waste disposal facility that is licensed in terms of the National Environmental Management: Waste Act.²⁵ Chemical waste undergoes physical, chemical or thermal treatment to minimise or eliminate hazardous characteristics before residues are landfilled. Chemical waste is generally incinerated, although care has to be taken with regard to volatile chemicals.²⁶ Infectious waste is incinerated and the residual ash evaluated and given a hazard rating, prior to being disposed of at a designated hazardous-waste landfill.

According to the draft Rules relating to Good Pharmacy Practice,²⁷ read together with the Medicines and Related Substances Act,²⁸ medicines

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must be disposed of in an irretrievable manner but not into municipal sewerage systems. A pharmacist or other authorised person may destroy medicine containing a schedule 1, 2, 3 or 4 substance. However, medicine containing a schedule 5, 6, 7 or 8 substance may only be destroyed after obtaining approval from a person authorised by the Director General of Health; furthermore, it may only be destroyed in the presence of an inspector, an officer of the South African Police Service (SAPS) or any other person authorised by the Director General. Furthermore, the South African Medicines Control Council may authorise the destruction of a schedule 5 or 6 substance by the manufacturer in the absence of an inspector. In all cases, the persons responsible for destroying the medicines and scheduled substances must issue a certificate to confirm the destruction of the medicine. If the medicines have been destroyed by an officer of the SAPS, the case number must be entered into the register.

According to the draft Rules relating to Good Pharmacy Practice,¹¹ a contractor specialising in the disposal of chemical or medicinal waste may be contracted to destruct medicines and scheduled substances. Two pharmacists must, however, witness the removal from the premises of the correct quantities of medicines and scheduled substances authorised for destruction. The contractor must employ a pharmacist whose task is to ensure irretrievable disposal of the goods. If a contractor is not used, two pharmacists must witness both the removal and destruction of the correct quantities of medicines and scheduled substances.

Failure of pharmacies to comply with the above legislation is a criminal offence. Furthermore, according to the National Environmental Management Act,¹² a generator of healthcare waste may be held liable for the costs of clearing up waste or of rehabilitating any environmental effects, if the process of waste disposal was not dealt with according to sound principles. The Act provides that not only corporate entities, but also their executives in their personal

capacities, may be held liable for failing to prevent pollution. Therefore, it is in the interest of the generator to obtain information regarding waste disposal and to incorporate it as part of standard operational procedures. Appropriate training programmes will be required to provide employees within pharmacies with knowledge regarding waste management to prevent contravention of applicable laws.

Furthermore, according to the Occupational Health and Safety Act,¹³ an employer should maintain a working environment that is safe and without risk to the health of employees as far as is reasonably practicable.

Acknowledgement. We thank Johan Bothma (Executive Director, Pharmaceutical Society of South Africa) for his kind advice regarding waste management in the health sector.

1. South African Government. Constitution of the Republic of South Africa, No. 108 of 1996. Pretoria: Government Printer, 1996.
2. Love P. Hazardous waste has health risks. Reputation Matters, 14 February 2013. <http://www.reputationmatters.co.za/hazardous-waste-has-health-risks/> (accessed 25 November 2013).
3. South African Government. Hazardous Substances Act No. 15 of 1973. Pretoria: Government Printer, 1973.
4. South African Bureau of Standards. SABS 0228-5:2010. Pretoria: SABS, 2010.
5. South African Government. Draft Health Care Risk Waste Management Regulations. Government Notice 153, Government Gazette No. 35405, 1 June 2012.
6. South African Government. National Environmental Management Waste Act No. 59 of 2008. Pretoria: Government Printer, 2008.
7. South African Government. National Environmental Management Act No. 107 of 1998. Pretoria: Government Printer, 1998.
8. South African Government. Framework Document on the Management of Health Care Waste, May 2000. Pretoria: Government Printer, 2000.
9. South African Bureau of Standards. SANS 452:2008. Pretoria: SABS, 2008.
10. South African Bureau of Standards. SANS 10248-1:2008. Pretoria: SABS, 2008.
11. South African Government. Draft Minimum Standards Regarding Destruction and Disposal of Medicines. Government Notice 105 of Government Gazette No. 34530, 27 May 2011.
12. South African Government. Medicines and Related Substances Control Act, No. 101 of 1965. Pretoria: Government Printer, 1965.
13. South African Government. Occupational Health and Safety Act, No. 85 of 1993. Pretoria: Government Printer, 1993.

Accepted 27 June 2013.

206
TP - A Theart
(A Calitz)

Alida Calitz - GESONDHEIDSKLINIEK : Erf 5788 Hermanus Heights

From: "HDW" <herlou@vodamail.co.za>
To: <alida@overstrand.gov.za>
Date: 2016/07/07 08:37 PM
Subject: GESONDHEIDSKLINIEK : Erf 5788 Hermanus Heights



Aan belanghebbende owerheid en amptenare.

Ons het bewus geword van 'n aansoek waarin goedkeuring versoek word om bogenoemde erf vir die bedryf van 'n gesondheidskliniek te laat indeel. In die verband teken ons beswaar aan teen dié indeling soos gemotiveer deur die onderstaande punte.

- 1) Is goedkeuring van die Dept. Gesondheid vir die bedryf daarvan bekom.
- 2) Die beskrywing as "gesondheidskliniek" is baie wyd. Daar word nie behoorlik beskryf watter mediese dienste gelewer gaan word nie. Indien oornag geriewe beskikbaar gestel word, kan die afleiding gemaak word dat chirurgiese prosedures met die moontlike verwydering van menslike weefsel gaan plaasvind. Die menslike afval en ander mediese afval moet volgens spesifieke voorskrifte geberg en daarna verwyder word. Indien nalatigheid hiermee geskied, sal dit 'n gesondheidsgevaar vir die inwoners in die onmiddellike omgewing en selfs die buurt skep.
- 3) Indien oornag geriewe gebied word, sal noodwendig voedsel voorberei en aangebied moet word. So sal ook beddegoed vervanging gedoen moet word. Weens mediese prosedures kan laasgenoemde met bloed en ander vloeistowwe van menslike oorsprong besoedel wees.
- 4) Alle betrokke personeel en diensverskaffers moet na die voorgestelde kliniek vervoer word. Weens die oornag van pasiente sal sekere personeel skofte moet werk en dit sal nog meer motor- en ligte vragmotor verkeer in die buurt tot gevolg hê. Pasiente en hul familie wat besoek bring moet ook van motorvervoer gebruik maak en op die perseel of in die straat parkeer. Selkirkstraat dra reeds oormatig verkeer wat soms teen gevaarlike spoed beweeg. Dit bemoeilik reeds toegang van inwoners uit die straat na die straat. In die verband is die gebrek aan spoedbeheer maatreëls reeds kommerwekkend. Die buurt het juis beleggings gelok weens die relatiewe stil omgewing waar inwoners die rustigheid kan geniet. Heelwat jong gesinne met klein kinders is in die buurt woonagtig. Jong kinders gebruik dikwels die straat vir fietsry of speel langs die straat.
- 5) Hospitale waar mediese prosedures en herstelgeriewe gebied word, hoort nie in 'n woonbuurt nie. Hermanus beskik reeds oor 'n gebied wat met hospitale, verswakte sorg, ouetehuse en binnekort die onkologie hospitaal, ingerig is. Dit is grotendeels binne kort afstand van mekaar geleë. Dit is dus logies dat enige uitbreiding van mediese geriewe in daardie omgewing behoort te geskied. Die vraag is ook of die bestaande geriewe, wat ruimte betref, ten volle benut word.
- 6) In 'n buurt waar mediese dokters reeds praktyke van hul huise bedryf, word die nou strate vir parkering deur pasiente gebruik. Weer eens maak dit die beweging van motors moeilik en gevaarlik. Dit is 'n wanbegrip om te dink dat motors van dokters en personeel die enigste motors op die perseel van die voorgestelde gesondheidskliniek sal wees.

U begrip vir inwoners van Hermanus Heights se ongemaklikheid oor die voorgestelde "gesondheidskliniek", word waardeer.

Die uwe,

H de Wet (Dr) & L S de Wet
Selkirkstraat 20
Hermanus Heights

PO Box 1835

Hermanus
7200

Erf 6344

FILE NO: EL 5788- HM
SCAN NO: 22
COLLABORATOR NO: 918329

13 JUL 2016 TP

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Alida Calitz - Fwd: FW: Overstrand Mun : Afwyking Erf 5788

From: Willie Du Plessis <willieduplessis45@gmail.com>
To: <alida@overstrand.gov.za>
Date: 2016/07/07 11:05 PM
Subject: Fwd: FW: Overstrand Mun : Afwyking Erf 5788



TP - A Theart
(A Calitz)

----- Forwarded message -----
From: "Gonny du Plessis" <gonny@triomfstaal.co.za>
Date: 7 Jul 2016 22:41
Subject: FW: Overstrand Mun : Afwyking Erf 5788
To: <willieduplessis45@gmail.com>
Cc:

Raed na Gael 22

Hermanus Heights

HERMANUS

7200

07-07-2016

Die Munisipale Bestuurder

Overstrand Munisipaliteit

Posbus 20

Hermanus

7200

Geagte Heer,

ERF 5788 Raed Na Gaelstraat 23 : Voorgestelde vergunningsgebruik en afwyking

U skrywe gedateer 2 Junie verwys.

As eienaars van Erf 5853 maak ons beswaar teen die oprigting van 'n gesondheidskliniek en wel om die volgende redes:

1. Sekuriteit gaan ernstig belemmer word deurdat hier onbekende elemente op 'n daaglikse basis die perseel gaan besoek en vanaf die parkeerarea omliggende eiendomme kan besigtig en deeglik beplan om misdaad te pleeg of inbrake uit te voer.
2. Die parkering voor hierdie eiendom is direk oorkant ons woning en met 'n daaglikse toename van pasiente en besoekers gaan dit die waarde van ons eiendom negatief beïnvloed en moontlik parkeerprobleme in die straat vir die omliggende bure veroorsaak.

FILE NO: EL 5788-Hm
SCAN NO: 23
COLLABORATOR NO: 918334

13 JUL 2016 TP

3. Geen melding word gemaak van die verwydering van mediese afval nie en dit alleen gaan 'n gesondheidsrisiko vir die omgewing teweeg bring.
4. Geen melding word gemaak van die opening en sluitings ure van die fasiliteit nie wat beteken dat daar na-ure verhoogde voertuig verkeer en gepaardgaande geraas die huidige rustige voorkoms van die buurt baie nadelig gaan beïnvloed. Daar bestaan sedert onlangs reeds probleme met huis inbraak in hierdie omgewing en die toevloei van addisionele voertuie na-ure gaan die sekuriteit van die omgewing net meer belemmer.
5. Dit kan in die begin rustig gaan maar sodra so 'n kliniek bekend raak het niemand 'n beheer oor hoeveel mense die plek daaglik gaan besoek.

Ons vertrou dat u hierdie beswaar gunstig sal oorweeg.

Die uwe,

Willem Adriaan du Plessis

Kontak no. 0828009379

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Alida Calitz - BEOOGDE GESONDHEIDSKLINIEK IN RAED-NA-GAELSTRAAT
HERMANUS HEIGHTS



From: "Theuns Geldenhuys" <theunsgeldenhuys@telkomsa.net>
To: <alida@overstrand.gov.za>
Date: 2016/07/07 06:33 PM
Subject: BEOOGDE GESONDHEIDSKLINIEK IN RAED-NA-GAELSTRAAT, HERMANUS HEIGHTS

TP - A Theart
(A Calitz)

Geagte Alida

Ek het sopas van 'n buurvrou verneem dat die eienaars van Erf 5788, Raed-na-Gaelstraat 23, Hermanus Heights beoog om 'n Gesondheidskliniek by die voormelde adres op te rig. Dis ongelukkig die eerste woord wat ek daarvan verneem en gevolglik word hierdie e-pos op 'n dringende basis aan u gerig.

Ek is baie ongelukkig oor hierdie voorneme van die huidige eienaars en glo nie die Raad sal so onverantwoordelik wees om so 'n kliniek op hierdie erf goed te keur nie. Indien u bekend is met Raed-na-Gael straat, sal u bewus wees daarvan dat die eiendomme in hierdie straat baie gesog en duur is en dat die Raad dus hoër eiendomsbelasting uit hierdie eiendomme verdien. Indien 'n kliniek hier toegelaat word, sal dit uiteraard die waarde van die huidige eiendomme affekteer en 'n rimpelleffek hê.

Tweedens is daar die probleem met 'n toename in verkeer en behoorlike parkering. Raed-na-Gaelstraat is nie baie breed nie en wanneer daar 'n voertuig teenaan die sypaadjie geparkeer is, kan twee voertuie nie by mekaar verby kom nie. Ons het kinders en troeteldiere asook wilde voëls wat in die straat stap en met 'n toename in verkeer bestaan die weselike gevaar dat 'n kind of dier doodgery kan word.

Derdens moet ek ook noem dat 'n groot bekommernis mediese afval is. Ons vullisdromme word een maal per week verwyder en beteken dit dan dat mediese afval saam met huisafval verwyder moet word een maal 'n week? Dit sal 'n groot gesondheidsgevaar skep vir die inwoners en diere in die omgewing.

Hermanus Heights is 'n rustige woonbuurt en ontwerp om as 'n woonbuurt te dien. Dit is die rede waarom ons hier 'n eiendom gekoop het. Hermanus beskik alreeds oor verskeie klinieke, onder andere die Medi-Kliniek en 'n baie goeie hospitaal (wat terloops nie in 'n woonbuurt geleë is nie). Daar is wat my aanbetref heelwat meer geskikte plekke om so 'n kliniek op te rig as in 'n gevestigde woonbuurt.

Ek vertrou my besware sal die nodige aandag geniet en die Raad help om die regte besluit te neem wat ek vertrou die afkeur van die eienaars se aansoek sal wees.

Vriendelike groete
Theuns Geldenhuys

Theuns & Annatjie Geldenhuys
Raed-na-Gaelstraat 7
Hermanus Heights
Hermanus
Telefoon 028 313 2694
Telefaks 028 313 2694

FILE NO: EL 5788 - HM
SCAN NO: 25
COLLABORATOR NO: 918341

15 Arniston "The Willows"
Kelland
2194

13 JUL 2016

TP-1A Theart
(A Calitz)

Alida Calitz - Beswaar-ontwikkeling erf 5788 Raed na Gaelstr 23

From: "Dutoits" <dutoits@telkomsa.net>
To: <Alida@overstrand.gov.za>
Date: 2016/07/07 07:44 PM
Subject: Beswaar ontwikkeling erf 5788 Raed na Gaelstr 23



Geagte Alida

As permanente inwoners van Hermanus Heights vir die afgelope tien jaar, wil ons ten sterkste beswaar maak teen die voorgestelde Vergunningsgebruik en Afwyking van die plan vir Erf 5788 Raed Na Gael straat 23 Hermanus heights.

Ons is van mening dat so 'n ontwikkeling die basiese karakter van Hermanus Heights as woongebied permanent sal skaad.

Ons het juis hier kom belê omdat Hermanus Heights die unieke eienskap van rustige veilige woongebied met min verkeer vir ons 'n veilige woon bestemming gebied het. Die waarde van eiendom in die woongebied sal heelwaarskynlik ook drasties nadelig beïnvloed word as so 'n ontwikkeling by die betrokke adres toegelaat sal word.

Indien 'n mediese kliniek hier sou ontstaan sal die gevaar van mediese-afval en die hanteering daarvan ook 'n wesenlike gevaar vir die inwoners in die woongebied kan inhou.. Indien pasiënte daar opgeneemen en behandel sou word, mag dit ook groot gevaar vir sulke pasiënte inhou indien hul in 'n noodtoestand verwyder moet word aangesien die nodige nood- ontruimingsprogramme nie van die begin in so 'n kompleks beplan en ingebou is nie.

Aangesien die beplanning vir die woongebied nooit voorsiening gemaak het vir hierdie tipe ontwikkeling nie, pas dit glad nie in, in die huidige woongebied soos dit tans daaruit sien nie.

Die Uwe

C P M en A E Du Toit
 Walkerbay Crescent 16
 Hermanus Heights

Op 5882

FILE NO: EL 5788-HM
SCAN NO: 26
COLLABORATOR NO: 918343

C P M DU TOIT
 Private Bag 15 Suite 80
 HERMANUS
 7200
 Tel: 028 313 2911 Sel : 083 305 9956
Dutoits@telkomsa.net

12 JUL 2016 TP

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Alida Calitz - proposed clinic

Erf 5788, Hermanus Heights

From: <sspanebianco@telkomsa.net>
 To: <alida@overstrand.gov.za>
 Date: 2016/07/07 06:50 PM
 Subject: proposed clinic

TP - A Theart
 (A Calitz)



Re proposed clinic erf 5738 no. 23 Raed na Gael Street Hermanus Heights

Dear Madam,

With Reference to the above matter my husband and I are strongly opposing the proposed clinic in our quiet area.

We moved here to retire in the quiet suburb of Hermanus Heights and as such think that Hermanus already have a clinic as well as excellent hospitals which is quite sufficient for our town. We certainly do not need to turn this area into another business area.

Thanks you

Mr G and Mrs S.S. Panebianco
 Erf no. 5777
 3 Raed na Gael Street, Hermanus Heights



Virus-free. www.avast.com

FILE NO:	EL 5788-Hm
SCAN NO:	
COLLABORATOR NO:	918380

13 JUL 2016 TP

Alida Calitz - Erf 5788 - 23 Raed na Gael Street Health Clinic - Proposed Consent Use and Departure

From: Isolde Lehr <isoldelehr@outlook.com>
To: <alida@overstrand.gov.za>
Date: 2016/07/07 10:05 PM
Subject: Erf 5788 - 23 Raed na Gael Street Health Clinic - Proposed Consent Use and Departure

Dear Sir / Madam

I strongly object against above mentioned consent use and departure.

Hermanus Heights might not be the right suburb for "Medical Safaris" (compare to page 13 of submitted documentation). A big difference to the statements done before.

Best regards

*TP - A Theart
(A Calitz)*



Isolde Lehr and Peter Findeisen
24 Raed Na Gael Street
P.O.Box 642
7200 Hermanus
isoldelehr@outlook.com

FILE NO:	EL 5788-HM
SCAN NO:	
COLLABORATOR NO:	918396

13 JUL 2016 *TP*



TP - A Theart
(Hollivier)

R & SE-Craythorne
17 Raed-na-Gael Street
Hermanus Heights
Hermanus 7200

Overstrand Municipality

PO Box 20

Hermanus 7200

8th July 2016

Attn: S Müller

Director: Infrastructure and Planning

FILE NO: EL 5788 - Hm
SCAN NO:
COLLABORATOR NO:
917523

NOTICE OF OBJECTION.

PROPOSED USAGE OF ERF 5788, 23 RAED-NA-GAEL STREET, HERMANUS HEIGHTS, HERMANUS.

We have been permanently residing at our abode since 1998 when the suburb was in its infancy with few established, occupied properties. The property in question (erf 5788) was one of those few. Owned by two doctors, the property was used not only for residential purposes but also as a means of generating an income and advancing their professional careers. Two surgeries/doctors rooms were established who's operating hours were similar. From the outset it became clear that the parking facilities were inadequate. Patients were unable to park on the frontage of the building and were forced to seek parking in the street, at times several hundred metres away. We have experienced situations where we

have been unable to gain access to or exit from our property due to parked vehicles. Security and privacy are also a factor with instances of this nature.

That was then, this is now. Greater density with regard to properties. Less available legal parking.

11 JUL 2016

Raed-na-Gael Street is situated on a steep incline with bends and a blind rise. The natural tendency for drivers/riders of powered and unpowered vehicles is to accelerate on the ascent and to freewheel, accelerate or leave their speed unchecked or controlled on the descent.

To facilitate egress from my property I have to reverse into the street. With vehicles parked on the south side of the road (opposite erf 5788) my view of vehicles breaching the brow of the hill and descending is severely impaired, and could eventuate a collision.

Traffic flow in Hermanus Heights, and particularly Raed-na Gael Street, has increased dramatically over the last few years and with a business venture of this nature would increase even further.

With regards to the motivation on page 13:

The establishment of a sub-acute medical care facility in Hermanus will contribute to enhancing the greater Hermanus area as one of the most sought after medical destinations in the Overberg (and in South Africa - so called medical safaris).

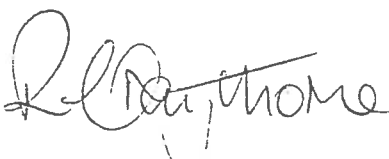
This statement is disingenuous and has no bearing in fact, with other "Step-Down" facilities available in the greater Hermanus area.

In conclusion:

In view of all the foregoing, I request that my objection be upheld, for all the foregoing reasons and in view of the accompanying comments and representations contained herein; and that the applications for *consent use* and for the *permanent departure* from the provisions of the zoning scheme in respect of the subject property be refused.

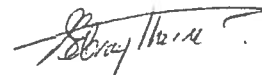
In closing, let me state that we endorse and concur with the sentiment stated in the document submitted by Mr & Mrs Neil P. van Heerden of 19 Raed-na-Gael Street, Hermanus Heights

Yours sincerely,



R Craythorne

(Registered Owners)



S E Craythorne



ATTORNEYS 215 ADRIAN LOUW & ASSOCIATES

TEL: 028 31 21 287
FAX: 028 31 21 287
PO BOX 1707
HERMANUS 7200
HERMANUS LAW CHAMBERS
19 MITCHELL STREET
HERMANUS, 7200
adrianlouw@hermanus.co.za
kecl@hermanus.co.za

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DEBT COLLECTION • DISPUTE RESOLUTION • ESTATE ADMINISTRATION • LITIGATION



8 July 2016

Ms Alida Calitz
Town Planning
Overstrand Municipality
16 Paterson Street
Hermanus

BY HAND

TP-A Theart
(HOLLIER)

Dear Madam

SECTION 52 OBJECTION : ERF 5788 HERMANUS HEIGHTS : CONSENT USE AND DEPARTURE APPLICATION

We are instructed by our client, Mr Gideon Petrus Louw of 5851 [erf number] at 18 Raed Na Gael Street, Hermanus Heights to address this to you. Our client is currently in Romania and cannot address this personally but as his attorney [and brother] I have been instructed and mandated by telephone and e mail to personally bring this objection to your attention.

Our client bought his above property in 2014 and objects to the Application of Erf 5788 as he believes the allowing the proposed business in the area will disturb the peaceful nature of the suburb. Our client chose to buy in that street due to those very characteristics of proximity to nature, low traffic density, quiet neighbours and is frankly shocked that such an application for a medical business can be considered – a type of business that properly belongs near the medical “neighbourhood” of Medi Clinic, the new Provincial hospital and various consulting rooms in Westcliff. There are also health considerations of medical waste and sick people spreading illness.

Our client therefore strongly objects in term of section 52 to the approval of the Application for Consent Use and a Departure of Erf 5788 Hermanus Heights by the Overstrand Municipality. The reasons above will be amplified and are not to be considered exhaustive.

Yours truly
ATTORNEYS ADRIAN LOUW

PER; J ADRIAN W LOUW
[258]

FILE NO: EL 5788- HM
SCAN NO:
COLLABORATOR NO:
917216

8 JUL 2016

TP

11 JUL 2016

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Alida Calitz - Beoogde Gesondheids kliniek te erf no. 5788 Raed Na Gael straat 23
Hernabus Heights

From: "marius nel" <mnelhermanus@vodamail.co.za>
To: <alida@overstrand.gov.za>
Date: 2016/07/08 02:26 PM
Subject: Beoogde Gesondheids kliniek te erf no. 5788 Raed Na Gael straat 23 Hernabus Heights

PO Box 48
Hermanus
7200

Van:
M.Nel
Raed Na Gael Straat 30
Hermanus Heights
Hermanus 7200
Erf no;5857
Tel; 0283130029
Sel; 0824982268
Epos: mnelhermanus@vodamail.co.za

TP - A Theart
(A Calitz)



Aan:
Die Munisipale Bestuurder
Overstrand Munisipaliteit
Hermanus
7200

Vir Aandag Die Stadsbeplanner Mnr.P.Roux

FILE NO: EL 5788-Hm
SCAN NO: 24
COLLABORATOR NO: 918337

Kommentaar tov : Aansoek om die skepping van 'n Gesondheidskliniek te erf 5788 Raed Na Gael straat 23 Hermanus Heights.

My belang tov bogenoemde is: Ek woon in dieselde straat te Raed Na Gael straat 30, assulks het genoemde aansoek betrekking op my en my eiendom.
Aspekte van belang vir my is:

- 1) Indien die skep van so 'n fasiliteit nodig is vir Hermanus, hoekom dit skep in 'n bestaande woongebied en nie in die omgewing van die hospitale waar dit baie meer sin sal maak nie ?
- 2) Daar word nie melding gemaak van die kombuis en kombuis personeel wat elke ete aan die pasiente moet voorberei nie, dit is dus 'n ekstra persoon, woon die mense ook op die perseel?
Voldoen die kombuis aan die nodige gesondheids regulasies en vereistes?
- 3) In die aanbeveling word genoem " Impact on traffic and services will be kept to a minimum" Dit is volgens my slegs 'n aanname, daar sal meer verkeer wees soos pasiente wat vervoer word, aflewering van goedere, vervoer van mediese afval, dokters en ander mediese personeel asook besoekers aan die pasiente.
- 4) Die stelling dat die beoogde fasiliteit nie die bestaande karakter en waardes van die omgewing sal beïnvloed nie, is ook slegs 'n stelling wat nie op feite gegrond is nie, wat van ambulanse wat lawaai mag maak met aflaai of oplaai van pasiente (hang saam met die dringendheid van die geval) asook 'n naambord wat aandui gesondheids kliniek in 'n woongebied, dit kan slegs negatief inwerk op die waarde van omliggende eiendomme in die woongebied .

13 JUL 2016

TP

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5) Die toekenning van parkeer ruimtes maak nie voorsiening vir besoekers aan die pasiente nie, as die toegekende 5 parkeer plekke beset is sal besoekers in die straat moet parkeer wat reeds 'n baie nou straat is en uiters ongewens is.

6) Geen melding word gemaak van die vereistes van die Departement van Gesondheid se vereistes en regulasies nie, Is dit reeds gedoen en assuiks goedgekeur, indien nie kan die aansoek nie oorweeg word nie.

7) Die feit dat mediese afval in die middel van 'n woongebied soos Hermanus Heights hanteer gaan word sou ongehoord en angswekkend wees ,

al sou dit deur die bestaande kontrakteur wat die hospitale bedien gedoen word, dit is alom bekend dat van die tipe maatskappye al oral in Suid Afrika nalatig was met mediese afval. Dit skep dus 'n risiko vir die inwoners van die woongebied.

Dankie

Die Uwe

M.Nel

From: Tony de Beer <tony.debeer@yahoo.com>
To: <alida@overstrand.gov.za>
Date: 2016/07/08 10:19 AM
Subject: Clinic

Eif 5188, Hermanus

Dear Sir/Madam

We live in 4 Raed na Gael street Hermanus Heights and have done for some 15 years. It has been wonderful place to live in and the neighbors have been wonderful. The suggestion that a clinic should start up in Hermanus Heights should not even be considered.

Clinics should be placed in areas where people have no transport and and have difficulty in getting medical attention.

The person who is considering starting up a clinic to go elsewhere and enjoy the peace and quiet of the heights.

Yours

Tony and Bridgid de Beer

Sent from my iPad

*TP- A Theart
(A Calitz)*



FILE NO:	<i>EL 5188-HM</i>
SCAN NO:	
COLLABORATOR NO:	<i>918389</i>

13 JUL 2016

Alida Calitz - Objection concerning application Erf 5788 Hermanus Heights

From: Herbert Suess <herb-suess@web.de>
To: <alida@overstrand.gov.za>
Date: 2016/07/09 09:12 PM
Subject: Objection concerning application Erf 5788 Hermanus Heights



TP-A Theart
(A Calitz)

Heide Elisabeth Suess, 21 Raed-Na-Gael Street, Hermanus/Western Cape, 8. July 2016

Overstrand Municipality
-The Municipal Manager-
Hermanus 7200

Objection concerning an application in respect of Erf 5788 (23 Raed-Na-Gael Street) to accommodate a „sub-acute medical care facility“ on that property.

Dear Madam/Sir,

I am, together with my son Philipp Suess, owner of the property 21 Raed-Na-Gael Street, Hermanus Heights, Hermanus Erf 5787.

We bought the property in January 2003 and built our home on this property in 2003/4. My husband, Herbert Suess, is retired and the last ten years we spent and enjoyed most of the year in Hermanus. We are German citizens and we have permanent residence status.

We chose Hermanus Heights and in particular Raed-Na-Gael Street for the tranquility of the area, the beauty of the nature, the fynbos and the mountains. And we were assured that it is according to the planning of the municipality a residential area and we do hope that it remains as it is. A medical care facility is from our point of view a business enterprise and one with particular side effects.

We therefore request the Hermanus Municipality not to approve the above mentioned application by Erf 5788.

As we are at present in Germany please accept this objection by email. A signed copy we will forward to you by airmail.

Sincerely yours

Heide Elisabeth Suess

FILE NO:	EL 5788-Hm
SCAN NO:	
COLLABORATOR NO:	918391

13 JUL 2016

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Alida Calitz

From: "Janet" <0827728685@vodamail.co.za>
To: <alida@overstrand.gov.za>
Date: 2016/07/07 06:28 PM

Dit is onder my aandag gebring dat daar 'n gesondheidskliniek be-oog word in Raed na Gael straat 23, erf 5788, Hermanus Heights

Dit is baie ontstellende nuus en ek wil ten sterkste beswaar maak.

Ek het die kennis bekom deur een van die inwoners van die omgewing wat my geskakel het.

Ek sal dit baie waardeer as u kan laat weet waar en wanneer daar 'n kennisgewing in die verband verskyn het, indien dit wel die geval is.

Beste groete
Janet M Maree