



## APPLICATION FORM A (for Official Use)

|                 |               |
|-----------------|---------------|
| Ref:            |               |
| Date Received:  |               |
| Application no: |               |
| Approved:       | Not Approved: |
| Date of Permit: |               |
| Permit No:      |               |
|                 |               |

### APPLICATION IN TERMS OF SECTION 37(1)(a) OF THE KWAZULU-NATAL AMAFA AND RESEARCH INSTITUTE ACT (5/2018,) FOR A PERMIT TO DEMOLISH, ALTER OR ADD TO A STRUCTURE WHICH IS, OR WHICH MAY REASONABLY BE EXPECTED TO BE OLDER THAN 60 YEARS

THE ONUS IS ON THE APPLICANT TO ENSURE THAT THE CURRENT APPLICATION FORM IS USED. APPLICATIONS ON NON-COMPLIANT FORMS WILL NOT BE PROCESSED  
Application Form H must be used for alteration to structures permanently protected in terms of Sections 42-46 (Heritage Landmarks). Form H(a) must be used for applications for alterations to memorials/statues. If work has commenced/been completed without a permit, Form I must be used.

**NB: IT IS AN OFFENCE IN TERMS OF THE KWAZULU-NATAL AMAFA AND RESEARCH INSTITUTE ACT (5/2018) TO MAKE FALSE STATEMENTS OR FAIL TO PROVIDE REQUIRED INFORMATION IN THIS APPLICATION (see guidelines before completing this form)**

**ALL APPLICATION FORMS, REQUIRED SUPPORTING DOCUMENTATION (as per attached guidelines), AND PROOF OF PAYMENT must be delivered to: KWAZULU-NATAL AMAFA AND RESEARCH INSTITUTE, via email to [beadmin@amafapmb.co.za](mailto:beadmin@amafapmb.co.za) (hard copy applications cannot be accepted during the COVID-19 pandemic)**

#### A. DECLARATION BY OWNER (The owner of the property must fill in these details and those in Section E: 3 and sign this document and any plans or other documents submitted in support of this application)

I, DEVAN CHETTY (full names of owner/person authorized to sign)

undertake strictly to observe the terms, conditions, restrictions, by-laws and directions under which the KWAZULU-NATAL AMAFA AND RESEARCH INSTITUTE may issue the permit to me.

Signature 

Place Durban Date 06/06/2023

#### B. PROPERTY DESCRIPTION (provide all cadastral information pertaining to the site):

|  |       |                                     |
|--|-------|-------------------------------------|
| Name of property:                                  |       | Title Deed No.:                     |
| Erf/Lot/Farm No:                                   | Size: | GPS Co-ordinates:                   |
| ERF 990 QUEENSBURGH                                |       |                                     |
| Street Address<br>10 KNIGHTSWAY ROAD               |       | Suburb<br>QUEENSBURGH               |
| Town/Local Municipality:<br>ETHEKWENI MUNICIPALITY |       | District Municipality:<br>INNERWEST |
| Current zoning:<br>GENERAL COMMERCIAL              |       | Present use:<br>RESTAURANT          |

**C. SIGNIFICANCE:**

|   |
|---|
| <b>1. Original date of construction/plan approval:</b>                                      |
| <b>2. Historical Significance:</b>  |
| The original building was built as a residential dwelling ad as no historical significance. |
|   |
|   |
|   |
|   |
| References  |
|   |

|   |
|---|
| <b>3. Architectural Significance:</b>   |
| The building is built with stand brick & motar and does not lend itsself to any |
| Architectural period.   |
|   |
|   |
|   |
|   |
| References  |
|   |

|   |
|---|
| <b>4. Urban Setting &amp; Adjoining Properties:</b>                             |
| Almost all the adjoining and adjacent propertie have been renovated & upgraded. |
|   |
|   |
|   |
|   |
|   |
| References  |
|   |

**D. PROPOSED WORK**

1. Purpose of Application (Indicate the reason by marking the relevant box)

|                   |                          |                |                          |       |                                     |
|-------------------|--------------------------|----------------|--------------------------|-------|-------------------------------------|
| <b>DEMOLITION</b> |                          |                |                          |       |                                     |
| CONDITION         | <input type="checkbox"/> | HEALTH REASONS | <input type="checkbox"/> | OTHER | <input checked="" type="checkbox"/> |
| <b>ALTERATION</b> |                          |                |                          |       |                                     |
| CONDITION         | <input type="checkbox"/> | HEALTH REASONS | <input type="checkbox"/> | OTHER | <input checked="" type="checkbox"/> |
| <b>ADDITION</b>   |                          |                |                          |       |                                     |

|           |  |                |  |       |   |
|-----------|--|----------------|--|-------|---|
| CONDITION |  | HEALTH REASONS |  | OTHER | ✓ |
|-----------|--|----------------|--|-------|---|

**2. Motivation for proposed work** (Summarise below and expand on a separate sheet if necessary)

|   |
|---|
| Due to the surrounding area becoming more commercialized, there is a need for upper class   |
| Restaurants as the community around the area is fast expanding.                             |
| Hence the need arises to increase the size of the existing restaurant and to give it a more |
| modern look keeping up with modern trends.  |
|   |
|   |
|   |
|   |
|   |
|   |
|   |
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|   |

**3. Detail the alterations/additions/restorations proposed** (Briefly outline the proposal)

|   |
|---|
| The existing outbuilding & Awning to be demolished. The existing restaurant wooden floors |
| to be removed and replaced with concrete floors. Restaurant size to be increased adding   |
| new and more ablution facilities. Second story PoolHall to be added to service Patrons    |
| from restaurant. Additional parking facilities added.                                     |
|   |
|   |
|   |
|   |
|   |
|   |
|   |


**E. CONTACT DETAILS**

**1. CONTRACTOR (the person who will do the work)**

|                |           |
|----------------|-----------|
| NAME           |           |
| POSTAL ADDRESS |           |
|                | POST CODE |

|   |                |
|---|----------------|
| TEL                                       | FAX/EMAIL      |
| CELL                                      | QUALIFICATIONS |
| REGISTRATION OF INDUSTRY REGULATORY BODY: |                |

**2. ARCHITECT/ARCHITECTURAL TECHNOLOGIST/DESIGNER**

|  |                                   |
|--|-----------------------------------|
| NAME JOASH PERUMAL   |                                   |
| POSTAL ADDRESS 16-24th Avenue  |                                   |
| Umhlatuzana  | POST CODE 4092                    |
| TEL  | FAX/EMAIL vjangovender2@gmail.com |
| CELL 0740246492  | SACAP REG. NO. D1082              |
| Author's Drawing Nos. KW06052023   |                                   |
| In making this application on behalf of the applicant, I declare that I have provided the correct information to the best of my knowledge and I undertake to ensure that the applicant is made aware of all conditions under which a permit may be issued. |                                   |
| SIGNATURE   | DATE 06/06/2023                   |

**3. OWNER OF PROPERTY (Owner or delegated person to sign on the front of this form)**

|                                    |                |
|------------------------------------|----------------|
| NAME DEVAN CHETTY                  |                |
| POSTAL ADDRESS 67 VALLEY VIEW ROAD |                |
| QUEENSBURGH                        | POST CODE 4092 |
| TEL                                | FAX/EMAIL      |

**4. DELEGATED AUTHORITY (The name of the person authorized to act on behalf of a company or institution – Power or Attorney/proof of authorization to be attached)**

|      |           |
|------|-----------|
| NAME |           |
| TEL  | FAX/EMAIL |

**F. SUBMISSION FEE: R800.00 (subject to annual increment on the 1 April)**

The submission fee is payable to the KwaZulu-Natal Amafa And Research Institute by bank deposit/internet banking (EFT) and proof of payment must be submitted with the application.

**ACCOUNT DETAILS:**

**ABSA BANK: Branch: ULUNDI Bank Code: 630330**  
 Account in the name of the **KZN Amafa and Research Institute**  
**Account No. 40-5935-6024**  
USE STREET ADDRESS/FARM NAME AS REFERENCE

**G. PUBLIC PARTICIPATION:** (Contact details of Interested and Affected Parties Consulted - written opinion to be attached to form and drawings to be signed by I & A P. See Guidelines)

Name \_\_\_\_\_  
 Telephone \_\_\_\_\_ Fax/Email \_\_\_\_\_

**H. CHECKLIST OF SUPPORTING DOCUMENTATION (\*ref to guidelines) YES NO**

|   |  |  |
|---|--|--|
| APPLICATION FORM (COMPLETED & SIGNED BY OWNER & PLANS AUTHOR) |  |  |
|---|--|--|

|  |  |  |
|--|--|--|
| MOTIVATION   |  |  |
| PHOTOGRAPHS*   |  |  |
| ORIGINAL DRAWINGS  |  |  |
| PLANS ( <del>X2 SETS when in hard copy</del> ) - NUMBERED AND COLOURED * |  |  |
| PROOF OF PROFESSIONAL ACCREDITATION & LETTER OF APPOINTMENT              |  |  |
| PROOF OF PUBLIC PARTICIPATION*   |  |  |
| PAYMENT/PROOF OF PAYMENT ( <u>use street address as reference</u> )      |  |  |



KWAZULU-NATAL  
**AMAFA**  
 & RESEARCH INSTITUTE

# KWAZULU-NATAL AMAFA AND RESEARCH INSTITUTE

THE KZN PROVINCIAL HERITAGE RESOURCES AUTHORITY  
(accredited in terms of the National Heritage Resources Act)

## **GUIDELINES FOR THE PREPARATION OF APPLICATIONS IN TERMS OF SECTION 37(1)(a) OF THE KWAZULU-NATAL AMAFA AND RESEARCH INSTITUTE ACT (5/2018,) FOR PERMITS TO DEMOLISH, ALTER OR ADD TO A STRUCTURE WHICH IS, OR WHICH MAY REASONABLY BE EXPECTED TO BE OLDER THAN 60 YEARS**

Please detach from the form before submission

### **APPLICATION FORMS**

All applications must be made on the relevant official application form and must be accompanied by the relevant supporting documentation.

**Form H** must be used for buildings that are proclaimed Heritage Landmarks (previously National Monuments) and buildings listed in the Heritage Register.

**Form I** must be used for approval of work undertaken on a building over 60 years of age at the time the work was started/completed prior to approval, irrespective of who undertook the work.

- A. DECLARATION:** The owner/or the official representative of a trust/company that owns the property must sign the form and any accompanying documentation and must consent to submissions by a third party/agent (letter of appointment/power of attorney to be submitted).
- B. PROPERTY:** Include the name of the property only where applicable: e.g. Government House. The street address is the key information and is used as a tracking device in the filing system. Where several street numbers apply to the site, include all the numbers. (provide all cadastral information)
- C. SIGNIFICANCE:** All structures over 60 years of age are protected.
1. The original date of construction is significant to the evaluation of the conservation worthiness of the building.
  2. **HISTORICAL REPORT:** a brief history of the occupation of the site and phases of construction, as well as an assessment of historical significance is necessary. Do not assume that there is no significance – proof of such a statement must be provided.
  3. **ARCHITECTURAL REPORT:** An assessment of the condition of the building should be given. Provide an analysis of the styles and phases of construction of the building, including alterations and additions and a statement of its architectural significance.
  4. **URBAN SETTING & ADJOINING PROPERTIES:** It is important to describe the urban context in which the building is situated (supported by photographs of the surrounding buildings).
- D. PROPOSED WORK:** Motivate for the proposed work – give reasons and design considerations behind the proposal. Details all the work to be carried out – do not refer to the plans.
- E. CONTACT DETAILS:** the contractor's details can be left out if unknown. All other fields must be completed. **The architect must complete all fields and sign on the appropriate box. THE OWNERS MUST SIGN THE APPLICATION FORMS!! PERMITS ARE NOT TRANSFERABLE**
- G. \*Public Participation:** the applicant will be notified of the level of public participation required and will have to bear the costs thereof. Neighbours, Ward Councillors, and Heritage Societies should be consulted in the case of demolition & development applications. Owners & residents of properties within 100m must be consulted for demolition applications. All documentation submitted is retained for record purposes and interested and affected parties may apply to view the documentation.
- F. A SUBMISSION FEE** – a processing fee determined by the Council of the Institute in terms of Section 24(1)(e)(i) is payable on submission of all applications. The application will not be registered as submitted if the proof of payment is not attached.

### **SUPPORTING DOCUMENTATION:**

Only SACAP accredited professionals registered with the Institute may author drawings submitted in support of this application. Permits may require their overseeing the work. **N B:** All hard copy documentation must be folded to A4 size, with plans showing the title block containing all details of the

owner, architect/technologist/designer, SACAP registration no., drawing nos. (with all revisions indicated), date of drawings and signatures of the owners and the author.

**Demolition applications must be supported by photographs - including internal views - and a set of concept drawings, including elevations, for the replacement building/s. The existing structures must be shown in dotted lines on the site plan with the new structures superimposed thereon.**

**1. \*PHOTOGRAPHS OF EXISTING STRUCTURE/S AND CONTEXT:**

Submit annotated/captioned photographs that clearly illustrate the features of the structures to be altered/demolished. Also submit photographs showing all the elevations/sides and the structure in its context (streetscape and surrounding buildings – adjacent and across the road, aerial view, etc.). Submit in jpeg. If incorporated into a document or report, photographs must be post card size.

**2. PLANS:**

~~\*Hard copy submission: two copies of the plans, coloured in accordance with the instructions below, must be submitted. One copy will be stamped and sent back to the architect/technologist/designer to submit to the Municipality. Plans should not be smaller than A3 size (210 x 297 mm) and should not be larger than A0 size (841 x 1 189 mm).~~ Electronic submissions: submit one copy and an A4 print will be returned with the permit/approval. Colour plans as follows:

| MATERIALS                 | COLOUR   |
|---------------------------|--|
| all existing              | grey   |
| demolition                | dotted lines   |
| new masonry               | red  |
| new concrete              | green  |
| new iron or steel         | blue   |
| new painting & plastering | yellow   |
| new wood                  | brown  |
| other                     | clearly indicated, using colours other than as above |

**2.1. SITE PLAN**

The site plan must be drawn in accordance with the approved surveyor’s diagram of the site and must show: scale; the north point; the erf/property/farm number of the site; the location of the site and any structures on it in relation to surrounding roads, buildings and other features; existing buildings, structures, and pools on the site (coloured grey or uncoloured); proposed work (coloured red) and buildings or portions of buildings proposed for demolition (in dotted lines). An aerial view obtainable from “Google Earth” or the municipality is also very useful.

**2.2. FLOOR PLANS, ELEVATIONS AND SECTIONS**

Sufficient plans, elevations and sections must be submitted to show the proposed work clearly. These drawings should be at 1:100, 1:50 or 1:20 scale, and must be fully dimensioned. The position of section lines must be indicated on the plan. The elevations should accurately reflect the effect of the proposal on the structure and its relationship to adjacent buildings.

All new materials, including finishes, must be specified. Drawings should be coloured as follows:

**2.3. SCALE PLAN OF EXISTING STRUCTURE(S)**

If it is impossible to distinguish the existing layout from the original plans submitted, a measured floor plan of the structure as it exists is required. It must be at the same scale and orientation as the plans of the proposed work to facilitate comparison.

**2.4. DOOR AND WINDOW SCHEDULES AND DETAILS**

Proposals for changing or replacing doors or windows must include sufficient information about their size, proportion and detail. This may be in the form of manufacturer’s information (for stock windows and doors) or joinery details (for specials).

**3. ORIGINAL/PREVIOUS DRAWINGS:** submit if available.

**SUBMISSION OF APPLICATIONS:** Application forms can be downloaded from [www.heritagekzn.co.za](http://www.heritagekzn.co.za) – look under the “Permits” tab - download forms – Form A. ~~Hard copy applications must be addressed to: The Head – Built Environment Section (not to an official’s name), Kwazulu-Natal Amafa And Research Institute, either delivered to 195 Langalibalele Street, Pietermaritzburg, 3201 or posted to BOX 2685, Pietermaritzburg, 3200.~~

Electronic submissions can be made via email to [beadmin@amafapmb.co.za](mailto:beadmin@amafapmb.co.za) or uploaded to the Sahr’s system operated SAHRA at [www.sahra.org.za](http://www.sahra.org.za) (confirm upload to [beadmin@amafapmb.co.za](mailto:beadmin@amafapmb.co.za))

**PROCESSING OF APPLICATIONS:** applications are processed in the order in which they are received, except during the December/January holiday break. Minor work applications will be fast tracked if submitted by 12:00 on a Thursday. Allow 90 days for processing of complex applications as these may be submitted to external

reviewers. Lobbying of external reviewers will disqualify the application and the matter will be reported to the SACAP and the SAIA-KZN, the SAIBD, or SAIAT. Written responses to applications will be forwarded to applicants by email. Telephonic or e-mails enquiries will not be responded to.

**\*PLEASE NOTE: INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED. Allow 90 days from the receipt of all required documentation**



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