

**AMAFA AND RESEARCH
INSTITUTE**

THE KZN PROVINCIAL HERITAGE
RESOURCES AUTHORITY

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. Form I must be used if work has commenced/ been completed without a permit

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

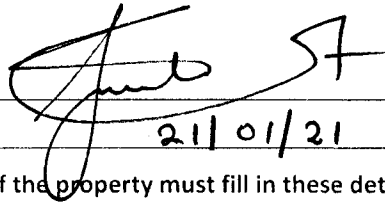
ALL APPLICATION FORMS, REQUIRED SUPPORTING DOCUMENTATION (as per attached guidelines), AND PROOF OF PAYMENT must be delivered to: KWAZULU-NATAL AMAFA AND RESEARCH INSTITUTE, 195 LANGALIBALELE STREET, PIETERMARITZBURG, 3201 OR BOX 2685 PIETERMARITZBURG 3200.

Alternatively, email all documents to beadmin@amafapmb.co.za

A. DECLARATION BY OWNER

I, MERVYN SYDNET TURTON

(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 211 01/21

Date 21/01/21

PM326

(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)

B. PROPERTY DESCRIPTION:

Name of property: NONE	Title Deed No. T 8054 / 94
Erf/Lot/Farm No: PORTION 24 OF ERF 2737 PIETERMARITZBURG	GPS Co-ordinates: 29d36'02.88" S 30D23'12.73"E
Street Address: 25 DAVIS STREET, PIETERMARITZBURG	
Local Municipality MSUNDUZI	District Municipality
Current zoning GENERAL RESIDENTIAL 2	Present use RESIDENTIAL

C. SIGNIFICANCE:

1.	Original date of construction	BEFORE 1926
2.	Historical Significance:	
BUILT BEFORE 1926 (EARLIEST PLANS AVAILABE) AT WHICH TIME A VERANDAH WAS ADDED FOR Mr W.E. LUNDIE. ARCHITECT WAS J.COLLINGWOOD TULLY		
MINOR INTERNAL ALTERATIONS WERE UNDERTAKEN IN 1934 FOR MR R.W. CLAYTON – NO ARCHITECT LISTED		
IN 1962 OWNER MR J.A. BRUNEU ADDED A CARPORT – DRAWN BY ERICH VAN ROOYEN		
NO FURTHER HISTORICAL RECORDS COULD BE TRACED FOR THE SITE		
References		
PMB MUNICIPAL ARCHIVES		

3.	Architectural Significance:
<p>THE HOUSE IS A SINGLE STOREY VERANDAH HOUSE WITH STEEP PITCHED CORRUGATED ROOFS AND CIRCULAR COLUMNS.....SINCE FALLEN INTO DISREPAIR. THE CORRUGATED ROOF SHEET IS PROBABLY STILL IN PLACE UNDER THE HARVEYTILE ROOF. THE HOUSE HAS BEEN RENTED OUT BY ROOM AND MUCH ALTERED TO ACCOMMODATE AS MANY RENTERS AS POSSIBLE. THIS HAS RESULTED IN WINDOWS BRICKED UP/ADDED. THE REAR OF THE HOUSE HAS ALSO BEED EXTENDED AND ALTERED IN A HAPHAZARD WAY WITH DIFFICULT ROOF CONNECTIONS AND STEEL FRAMED AND ALUMINIUM WINDOWS THE ORIGINAL FACEBRICK WALLS HAVE BEEN PAINTED OVER IN SHADES OF GREY THE SITE IS ASSIGNED ONLY CRITERIA 4 IN 'THE GREEN BOOK' – CONTRIBUTING TO THE URBAN ENVIRONMENT</p>	
References	
THE BUILDINGS OF PIETERMARITZBURG – VOLUME 1	

4.	Urban Setting & Adjoining Properties:
<p>SET IN A SMALL SIDE STREET BETWEEN BURGER AND JABU NDLOVU STREET, ONE BLOCK DOWN FROM BOSHOFF STREET. THE STREET COMPRISES SINGLE STOREY BUILDINGS, SOME OF WHICH ARE NOW COMMERCIAL, MEDICAL OR OFFICE SPACES AND ARE GENERALLY WELL MAINTAINED. STREET BOUNDARIES ARE DEFINED BY LOW PRECAST CONCRETE OR STEEL PALLISADE FENCES. SOME OF THE BUILDINGS ARE SET CLOSE OR ON THE TO THE FRONT BOUNDARY. THE SITE ADJACENT TO OURS IS NOW VACANT AND IS USED AS A PARKING LOT.</p>	
References	

D. PROPOSED WORK

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

DEMOLITION				
CONDITION	X	HEALTH REASONS	X	OTHER
ALTERATION				
CONDITION		HEALTH REASONS		OTHER
ADDITION				
CONDITION		HEALTH REASONS		OTHER

2. Motivation for proposed work (Please motivate fully – on a separate sheet if necessary)

(PLEASE SEE ATTACHED SHEET)
THE OWNER APPLICATION IS TO DEMOLISH THE EXISTING BUILDING AND ERECT NEW DOUBLE STOREY DWELLING IN ITS PLACE.
THE BUILDING WAS IN A DILAPIDATED STATE WHEN HE BOUGHT IT AND THE TENENTS HAVE STAYED ON BRINGING FRIENDS AND FAMILY TO SHARE.
THE OWNER WANTS TO GAIN MORE USE OF THE SITE AND TO CONSTRUCT A MORE ATTRACTIVE BUILDING. THE STATE OF THE CURRENT BUILDING AFTER YEARS OF NEGLECT AND INCONSIDERATE ALTERATIONS MEANS THAT HE WILL HAVE TO SPEND LARGE AMOUNTS RENOVATING A DILAPITATED BUILDING WHICH WILL STILL NOT GIVE HIM FULL USE.
HIS ONLY OPTION WILL BE TO DEMOLISH AND RE-CONSTRUCT.

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


THE INTENTION IS TO DEMOLISH THE EXISTING HOUSE AMD CONSTRUCT A NEW DOUBLE STOREY DWELLING THE NEW BUILDING COMPRISES BEDROOMS, OPEN PLAN LOUNGE/DINING, KITCHEN. FAMILIY ROOM UPSTAIRS

E. CONTACT DETAILS

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

NAME – TO BE APPOINTED / OWNER BUILDER	
POSTAL ADDRESS	
	POST CODE
TEL	FAX/EMAIL
CELL	QUALIFICATIONS
REGISTRATION OF INDUSTRY REGULATORY BODY:	

2. ARCHITECT/ARCHITECTURAL TECHNOLOGIST/DESIGNER

NAME RANDHIR GOBIND	
POSTAL ADDRESS 317 BULWER STREET	
PIETERMARITZBURG	POST CODE 3201
TEL 033 345 4569	FAX/EMAIL rga@live.co.za
CELL 078 063 3803	SACAP REG. NO. ST0142
Author's Drawing Nos. 440/100	
SIGNATURE 	DATE 22/1/21

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

NAME MERVYN SYDNEY TURTON	
POSTAL ADDRESS 489 LANGALIBALELE STREET	
PIETERMARITZBURG	POST CODE 3201
TEL 082 776 0436	FAX/EMAIL MTURTON@WEBMAIL.CO.ZA

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 **AMAFA AKWAZULU-NATALI**

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 _____

H. CHECKLIST OF SUPPORTING DOCUMENTATION (*ref to guidelines)

YES NO

	YES	NO
APPLICATION FORM (COMPLETED & SIGNED BY OWNER & PLANS AUTHOR)	X	
MOTIVATION	X	
PHOTOGRAPHS*	X	
ORIGINAL DRAWINGS	X	
PLANS (X2 SETS when in hard copy) - NUMBERED AND COLOURED *	X	
PROOF OF PROFESSIONAL ACCREDITATION (e.g. copy of accreditation card)	X	
PROOF OF PUBLIC PARTICIPATION*		
PAYMENT/PROOF OF PAYMENT (use street address as reference)	X	