KWAZULU-NATAL

AMAFA AND RESEARCH INSTITUTE



Date R
Applica
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THE KZN PROVINCIAL HERITAGE RESOURCES AUTHORITY

Ref:	•
Date Received:	
Application no:	
Approved:	Not Approved:
Date of Permit:	
Permit No:	

APPLICATION FORM A

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, CPEARSON (PERRYBARR PROPERTIES cc)		
(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.		
Place DURBAN Date 07.06.2022		
(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:	Title Deed No. 7 11540 1970
Erf/Lot/Farm No: ERF 943 DURBAN	GPS Co-ordinates: 29°50'16.41"S 31°01'03.79"E
Street Address: 38 MONTPELIER PLACE, WINDERMERE	
Local Municipality DURBAN	District Municipality eTHEKWINI
Current zoning GR 2	Present use OFFICES

C. SIG	NIFI	ICA	N	CE	=
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C.	SIGNIFICANCE.				
1.	Original date of construction	30.06.1893			
2.	Historical Significance:				
ORIGIN	ORIGINALLY BUILT AS THE GROUNDS KEEPER HOUSE FOR THE GREYVILLE RACECOURSE GROUNDS				
KEEPER	R AND FEED BARNS				
	3 ,				
Refere	ences				
		•			
3.	Architectural Significance:				
THE P	ROPERTY HAS BEEN SO ALTERED	OVER THE YEARS THAT VERY LITTLE OF THE ORIGINAL			
BUILDI	NG IS RECOGNISABLE, OR IN ITS	ORIGINAL STATE			
***************************************	7				
Refere	ences				
4.	Urban Setting & Adjoining Pr	operties:			
RESIDE	ENTIAL SINGLE DWELLINGS AND	MULTI STOREY RESIDENCES. A SCHOOL IS OVER THE ROAD.			
		•			
Refere	ences				
-					

D. PROPOSED WORK

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

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

2.	Motivation for	proposed work	(Please motivate full	v – on a se	parate sheet if	necessary)

THE EXISTING INTERNAL STAIRCASE IS EXTREMELY STEEP AND SHALLOW AND NO LONGER CONFORMS TO THE
REGULATIONS. THERE IS ALSO NO SPARE SPACE INTERNALLY TO MODIFY THE STAIRS TO CONFORM TO
THE CURRENT SANS REGULATIONS.
IN ORDER TO PROVIDE THE ADDITIONAL SPACE REQUIRED FOR THE BOARD ROOM AND THE TRAINING ROOM,
IT IS PROPOSED TO BUILD A NEW TIMBER DECK ABOVE THE ROOF OF THE BOARD ROOM BUILDING WITH
ACCESS TO THE TRAINING ROOM AND A NEW SET OF EXTERNAL STAIRS TO THE DECK. THIS WILL ALLOW THE
NON CONFORMING INTERNAL STAIRS TO BE DEMOLISHED, THEREBY ALLOWING THE BOARD ROOM TO BE
EXTENDED INTO THE AREA OCCUPIED BY THE PRESENT STAIRCASE AND ALLOW THE TRAINING ROOM TO BE
EXTENDED INTO THE UPPER AREA PRESENTLY OCCUPIED BY THE STAIRCASE.
3. Detail the alterations/additions/restorations proposed (Briefly outline the proposal)
CONSTRUCTION OF A TIMBER DECK ABOVE THE BOARD ROOM BUILDING WITH ACCESS TO THE FIRST FLOOR
TRAINING ROOM AND THE CONSTRUCTION OF A NEW STAIRWAY TO THE DECK.
DEMOLITION OF THE INTERNAL NON CONFORMING STAIRS, AND THE INTERNAL WALL SEPARATING THE BOARD
ROOM FROM THE AREA HOUSING THE STAIRCASE, AS WELL AS DEMOLISHING THE INTERNAL FIRST FLOOR WALL
ROOM FROM THE AREA HOUSING THE STAIRCASE, AS WELL AS DEMOLISHING THE INTERNAL FIRST FLOOR WALL
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ROOM FROM THE AREA HOUSING THE STAIRCASE, AS WELL AS DEMOLISHING THE INTERNAL FIRST FLOOR WALL
ROOM FROM THE AREA HOUSING THE STAIRCASE, AS WELL AS DEMOLISHING THE INTERNAL FIRST FLOOR WALL

E. CONTACT DETAILS

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

NAME TO BE APPOINTED				
POSTAL ADDRESS				
		POST CODE		
TEL	FAX/EMAIL			
CELL	QUALIFICATION	ONS		
REGISTRATION OF INDUSTRY REGULATORY BODY:				

2. ARCHITECT/ARCHITECTURAL TECHNOLOGIST/DESIGNER

NAME M. BACKLER (PLANS & PROJECTS)			
POSTAL ADDRESS 6 WANDSWORTH ROAD, MA	ALVERN, QUEENSBURGH		
	POST CODE 409	3	
TEL	FAX/EMAIL planprop@gmail.com		
CELL 084 513 8079	SACAP REG. NO. ST 0769		
Author's Drawing Nos. 2207-22 Page 1	Accessed a superior and representative and represen		
SIGNATURE	DATE 07.08.2022	,	
OWNER OF PROPERTY (Owner or delegated)	ated person to sign on the front of th	is form)	
NAME PERRYBARR PROPERTIES cc			
POSTAL ADDRESS 38 MONTPELIER PLACE, WI	NDERMERE		
-	POST CODE 400	1	
TEL 083 445 0504	FAX/EMAIL lisa.pearson@remaxa	address.c	o.za
4. DELEGATED AUTHORITY (The name of company or institution – Power or Attorney/pro-			f of a
NAME LISA PEARSON			
TEL 083 445 0504	FAX/EMAIL lisa.pearson@remaxa	address.c	o.za
F. SUBMISSION FEE: R800.00 (subject	to annual increment on the 1 /	April)	
The submission fee is payable to the KwaZul deposit/internet banking (EFT) and proof of paymer DETAILS: ABSA BANK: Branch: ULUNDI Bank Code: 63 Account in the name of AMAFA AKWAZULU-NAT Account No. 40-5935-6024 USE STREET ADDRESS/FARM NAME AS REFER	nt must be submitted with the applicant must be	stitute by ation. AC	bank
G. PUBLIC PARTICIPATION: (Contact de written opinion to be attached to form and drawings Name	to be signed by I & A P. See Guide	elines)	
H. CHECKLIST OF SUPPORTING DOCU	IMENTATION (*ref to guidelines)	YES	NO
APPLICATION FORM (COMPLETED & SIGNED B	Y OWNER & PLANS AUTHOR)	x	
MOTIVATION		X	
PHOTOGRAPHS*		X	
ORIGINAL DRAWINGS		X	
PLANS (X2 SETS when in hard copy) - NUMBERE	D AND COLOURED *	X	
PROOF OF PROFESSIONAL ACCREDITATION (e		X	
PROOF OF PUBLIC PARTICIPATION*			
PAYMENT/PROOF OF PAYMENT (use street addr	ess as reference)	X	
Table of dead			