C. SIGNIFICANCE:

1. Original date of construction/date of first approved plan: unknown, no records available.

2. Historical Significance:

The property was first transferred in 1892, the date of the first dwelling is unknown. Site plans of the properties in the area indicate large sloping properties with original dwellings set back on the higher side of the site.

3. Architectural Significance:

Very little of the original fabric of the house remains. The roof form and part of the external walls indicate that it was originally a gabled, veranda house with a raised brick plinth below a corner veranda. (characteristic of the 1920's) The house has been extended to the West and a double-storey building added to the property.

4. Urban Setting & Adjoining Properties:

The house is accessed via a pan-handle driveway between blocks of flats on Silver oak Avenue. It is not viewed from the road.

Neighbours are multi-storey flats and double storey houses, close to the boundaries. The property is sloping towards Silver Oak Avenue, the driveway rises about 1.5 storeys from the road to the entry level.



D. PROPOSED WORK

1. Purpose of Application: DEMOLITION

2. Motivation for proposed work:

The property is zoned General Residential 1.

The owner wishes to develop to it's full potential and build residential units.

3. Detail the work to be carried out:

Proposed demolition of all buildings on the site.

Proposed 4-storey, plus basement parking residential development.

See drawings Nos:

17-044-SUB-01 to SUB-09 (incl)

E. CONTACT DETAILS

1. CONTRACTOR

To be confirmed.

2. ARCHITECT/ARCHITECTURAL TECHNOLOGIST/DESIGNER

Name: Haroon Kader

Postal Address: 81 Ras Dashan St, Shallcross

Post Code 4079

Tel: 031-409 8249 Cell: 084 6087864

Email address: haroonkader@gmail.com

SACAP REG.NO PrSArchT st00327

<u>Application submitted by</u>: (correspondence to be sent to)

Lindsay Napier Architect

P.O.Box 165 Bothas Hill 3660 Tel: 083 6608521

Email: lanapier@mindscope.co.za

SACAP PrArch 5320

3. OWNER OF PROPERTY (Owner or delegated person to sign consent form):

Leo Munsamy Chetty 49 Silver Oak Avenue

4067

Tel: 031-2075101

Email: leo@dezzo.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)

NA

G. PUBLIC PARTICIPATION:

To be confirmed by Amafa

FOR C	OFFICIAL USE:	
Ref:		
Date received:		
Application No:		
Application approved not approved		
Permit No:	Date:	