



APPLICATION FORM A (STRUCTURES)

Ref: _____
Date received _____
Application No _____
Application approved ___ not approved ___
Date of permit/notification _____
Permit No _____

PERMIT APPLICATION IN TERMS OF THE KZN HERITAGE ACT (SECTION 33(1)(A) FOR THE DEMOLITION, ALTERATION OR ADDITION TO A STRUCTURE WHICH IS, OR WHICH MAY REASONABLY BE EXPECTED TO BE OLDER THAN 60 YEARS

(Application form H must be used for alteration to structures permanently protected in terms of Section 37, 38, & 39 (Heritage Landmarks))

PLEASE NOTE

IT IS AN OFFENCE IN TERMS OF THE KWAZULU-NATALI HERITAGE ACT, 2008 TO MAKE ANY FALSE STATEMENT OR FAIL TO PROVIDE REQUIRED INFORMATION IN THIS APPLICATION (Detach and Consult the attached guidelines before completing this form)

THE ONUS IS ON THE APPLICANT TO ENSURE THAT THE CURRENT APPLICATION FORM IS USED. APPLICATIONS ON NON-COMPLIANT FORMS WILL NOT BE PROCESSED

ALL APPLICATION FORMS, DEVELOPMENT PROPOSALS, PHOTOGRAPHS, MOTIVATION, AND PROOF OF PAYMENT ARE TO BE DELIVERED TO: Amafa aKwaZulu-Natali, 195 LANGALIBALELE (LONGMARKET) STREET, PIETERMARITZBURG, 3201 OR POSTED TO: BOX 2685 PIETERMARITZBURG 3200. Enquiries 033-394 6543 or Fax 033-394 6552 (For proof of payment not applications)

A. DECLARATION BY OWNER

I, IMRAN SABEL

(full names of owner/person authorized to sign) undertake strictly to observe the terms, conditions, restrictions by-laws and directions under which Amafa aKwaZulu-Natali may issue the permit to me.

Signature [Signature]

Place DURBAN

Date _____

(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:

1. Name of property: GROSVENOR COURT Title Deed No. _____

2. Erf/Lot/Farm No: LOT 12404 OF DURBAN

Street Address: 41 SNEEL PARADE, DURBAN

Local Municipality ETHEKWINI MUNICIPALITY

District Municipality 166 OLD FORT ROAD

3. Current zoning GENERAL RESIDENTIAL 5 Present use RESIDENTIAL

C. SIGNIFICANCE:

1. Original date of construction 1945
2. Historical Significance: RESIDENTIAL USE FOR OVER 60 YEARS.
- USED BY TRAVELLERS AND HOLIDAY MAKERS FOR ALL
THE PAST 60 YEARS. HAS ELEMENTS OF 'ART DECO' ARCHITECTURE
WHICH WAS DOMINANT AT THE TIME.

References _____

3. Architectural Significance: 'ART DECO' ARCHITECTURE WHICH
WAS A POPULAR STYLE DURING THE BUILDING'S
PROPOSAL TO BUILD.

References _____

4. Urban Setting & Adjoining Properties: THERE ARE VACANT SITES
ON 3 SIDES PROPERTIES ADJOINING THE SITE. THE
FORTH SITE IS THE WHITE BUILDING AS SHOWN ON
IMAGES ATTACHED.

D. PROPOSED WORK

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

DEMOLITION

CONDITION		HEALTH REASONS		OTHER	
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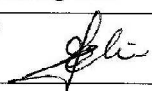
ALTERATION

CONDITION		MAINTENANCE	<input checked="" type="checkbox"/>	OTHER	
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ADDITION

EXTENSION		CHANGED USE		OTHER	
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2. ARCHITECT/ARCHITECTURAL TECHNOLOGIST/DESIGNER

NAME YOUNUS EBRAHIM	
POSTAL ADDRESS 18 REGENT AVENUE, PARKGATE VERULAM	
	POST CODE 4339
TEL 0836109110	FAX -
CELL 0836109110	SACAP REG. NO.
Author's Drawing Nos.	
SIGNATURE 	DATE 15/09/2013

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

NAME IMRAN SABER	
POSTAL ADDRESS P.O. BOX 115 BRAKPAN	
	POST CODE 1540
TEL 083 786 0149	FAX -

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 Y. EBRAHIM	
TEL 0836109110	FAX -

F. SUBMISSION FEE: R600.00 (subject to annual increment on the 1 April)

The submission fee is payable to **Amafa aKwaZulu-Natali** by cheque or bank deposit/internet banking prior to the processing of this application.

Banking details in case of direct deposits:

ABSA BANK: Branch: ULUNDI Bank Code: 630330

Account in the name of **AMAFA AKWAZULU-NATALI**

Account No. 40-5935-6024

NB: Proof of payment to be forwarded (faxed, posted or delivered) to our office

**PAID
SEE RECEIPT ATTACHED
TO THIS APPLICATION**

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 **FBG ARCHITECTS**

Telephone **031 2082272**

Fax **younus@fggarchitects.co.za**

H. CHECKLIST OF SUPPORTING DOCUMENTATION

YES NO

	YES	NO
APPLICATION FORM (COMPLETED & SIGNED BY OWNER & PLANS AUTHOR)	✓	
MOTIVATION	✓	
PHOTOGRAPHS	✓	
ORIGINAL DRAWINGS	✓	
PLANS (X2 SETS) - NUMBERED AND COLOURED	✓	
PROOF OF PROFESSIONAL ACCREDITATION (e.g. copy of accreditation card)	✓	
PROOF OF PUBLIC PARTICIPATION		
PAYMENT/PROOF OF PAYMENT		