	APPLICATION FORM I (for Official Use)
	Ref:
	Date Received:
	Application no:
	Approved: Not Approved:
	Date of Permit:
	Permit No:
& RESEARCH INSTITUTE	
INSTITUTE ACT (5/2	HE KWAZULU-NATAL AMAFA AND RESEARCH 018) FOR THE CONDONATION/

INSTITUTE ACT (5/2018) FOR THE CONDONATION/ APPROVAL/RECTIFICATION OF THE UNLAWFUL COMMENCEMENT OR CONTINUATION OF WORK ON, OR DAMAGE TO, HERITAGE RESOURCES PROTECTED IN TERMS OF CHAPTERS 8 & 9 (sections 37 to 50, including both generally and specially protected heritage resources).

This form is to be used for applications where work was commenced, alternatively completed without the prior written approval of the Institute in its capacity as the Provincial Heritage Resources Authority. If no work has been undertaken select the appropriate form from the website <u>www.heritagekzn.co.za</u>.

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) 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, REQUIRED SUPPORTING DOCUMENTATION AND PROOF OF PAYMENT MUST BE SUBMITTED TO THE KWAZULU-NATAL AMAFA AND RESEARCH INSTITUTE AS PER THE GUIDELINES ATTACHED, THE TYPE OF CONTRAVENTION WILL DETERMINE THE METHOD OF SUBMISSION.

A. DECLARATION BY OWNER I, SUMOTE HOLDINGS (PTY) LTD						
(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 written approval of the work to me.						
Place ISIPINGO	Date 27/01/2023					
(The owner of the property must fill in these document and any plans or other documents su	details and those in Section E: 3 and sign this ubmitted in support of this application)					
B. PROPERTY DESCRIPTION:	Title Deed No. T 19636 21					
Name of property/Project title:						
22 INWABI ROAD						
Erf/Lot/Farm No: ERF 41 PARUKVILLE	GPS Co-ordinates					
Street Address, Suburb, Town:	•					
22 INWABI ROAD						
Local Municipality	District Municipality eTHIKWINI					
eTHEKWINI MUNICIPALITY	Traditional Authority Area					

Current zoning	Present use
LIGHT INDUSTRY	WAREHOUSING

C. HERITAGE SIGNIFICANCE: (complete sections appropriate to site)

1. Status of Heritage Resources on the Site:

Permanent Protection:	Heritage Landmark/ Provincial HL		Listed on the Heritage Register	Pro	visionally tected ued)	/ (notice		Site i Area	n a	Protected	
Generally Protected site containing:	Structures 60 years +	\checkmark	Graves		Archaeological site Battlefield or rock art		Palaeo materia Meteor	al			

2.	Historical/Military Significance:						
There	here is no Historical significance to this property.						
Refere	ences						

3. Architectural Significance:	Original date of construction:
Significance:	
There is no Architectural Significance to this prop	perty.
References	

4. Archaeological Significance:

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There is no Archeological significance to this property.

References

5. Pala	aeontological Significance:
None	
	& RESEARCH INSTITUTE
References	

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D. WORK CARRIED OUT WITHOUT PRIOR APPROVAL

1. Purpose of Application:	Damage/destruction/demolition	Alterations/Additions	\checkmark
Redecoration	Disfigured Written/drawn on	Excavation	

Exhumation	Inundation	Development						
Collection/Removal from original site	Trade/export (heritage objects)	Restricted use of equipment s40(5)						
Consolidation/Subdivision	Amendment of Plan	Other						
2. Existing Improvements made on site:								
On purchase of this property in 2021, the Owner's added a Warehouse Showroom & Offices								
and made a small addition to the existing original warehouse.								
There was also the addition of an open awning for storage of goods and a small staff Toilet.								

3. Detail the work commenced/carried out

As of the work explained above has been completed.

4. Motivation for work (Please	se motivate fully why work was comn	nenced without approval)				
This property was bought at the r	mids <mark>of</mark> the Covid Pandemic. A	At the time very little o	f the processes			
at Local Authorities were working	g a <mark>nd</mark> if working the delays on	the approval process	were extreme.			
The Owners needed to get the	e <mark>bus</mark> iness settled and ready	y for trade in the mir	nimum possible			
time. For this reason, they proce	eded with building work, with E	Engineer's certificatior	n even before			
plans got approved.						
Being a Warehouse, even over 6	0 years, the Owners were und	der the impression tha	at the Amafa			
permit was not required. This onl	y came to light once the Muni	cipality referred the P	lan and			
requested Amafa approval.		A				
Status of work Commenced	Stopped	Completed	\checkmark			
Date commenced Date stopped Completion date						
A VELEN	KCH INDITIC	7 T C				

E. CONTACT DETAILS

1. CONTRACTOR (the person who has done or who will complete the work)

NAME	
POSTAL ADDRESS	

		POST CODE		
TEL	FAX/EMAIL			
CELL	QUALIFICATIONS			
REGISTRATION OF INDUSTRY REGULATORY BODY:				

2. ARCHITECTURAL PROFESSIONAL/ HERITAGE PRACTITIONER

NAME JORGE NICOLAU					
POSTAL ADDRESS P.O.Box 2494					
MOUNT EDGECOMBE	MOUNT EDGECOMBE				
TEL	FAX/EMAIL				
CELL 0832266044	PROFESSIONAL REG. NO. PAD43018738				
Author's Drawing Nos. 21-363/01 & /02					
SIGNATURE	DATE 27/01/2023				
3. OWNER OF PROPERTY (Owner or delega	ated person to si	gn on the front of this form)			
NAME SUMOTE HOLDINGS (PTY) LTD 2017/396226/07					
POSTAL ADDRESS 22 ISIPINGO ROAD					
ISIPINGO		POST CODE			
TEL 0616861234	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: R4000.00 (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. <u>USE STREET ADDRESS/FARM NAME or DEVELOPMENT/PROJECT TITLE OR SAHRIS ID</u> <u>NUMBER AS REFERENCE</u> **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**

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 (*see guidelines)

APPLICATION FORM (COMPLETED & SIGNED BY OWNER & CONSULTANT)	\checkmark
MOTIVATION/INCEPTION REPORT	\checkmark
PHOTOGRAPHS*	\checkmark
ORIGINAL/PREVIOUS DRAWINGS/REPORTS	\checkmark

PLANS (X2 SETS FOR HARD COPY SUBMISSIONS) - NUMBERED AND COLOURED*			\checkmark
1:50 000 MAP & SATELLITE AERIAL VIEW		KML FILE MAP	
PROOF OF PROFESSIONAL ACCREDITATION (e.g. copy of accreditation card)			
APPOINTMENT LETTERS		CONSENT LETTER	
PAYMENT/PROOF OF PAYMENT			



KWAZULU-NATAL AMAGEARCH INSTITUTE