



KWAZULU-NATAL  
**AMAFA**  
& RESEARCH INSTITUTE

**APPLICATION FORM I (for Official Use)**

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

**APPLICATION IN TERMS OF THE KWAZULU-NATAL AMAFA AND RESEARCH 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 [www.heritagekzn.co.za](http://www.heritagekzn.co.za).

**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, Mrs R Mottai

(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.

Signature *R Mottai*

Place Durban Date 7 October 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>B. PROPERTY DESCRIPTION:</b>	Title Deed No. <u>T42066/2004</u>
Name of property/Project title: <u>Proposed Garage and Ancillary Unit</u>	
Erf/Lot/Farm No: <u>ERF 207 MOBENI</u>	GPS Co-ordinates
Street Address, Suburb, Town: <u>17 Atherston Place, Mobeni</u>	
Local Municipality <u>Ethelwini</u>	District Municipality Traditional Authority Area

Current zoning S.R 400	Present use RESIDENTIAL
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**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	Provisionally Protected (notice issued)	Site in a Protected Area
Generally Protected site containing:	Structures 60 years + ✓	Graves	Archaeological site Battlefield or rock art	Palaeontological material Meteor impact site

**2. Historical/Military Significance:**

There is no historic or Military Significance to the property. The building is merely served as a residential property.

References

**3. Architectural Significance:**

Original date of construction:

Significance: The building is used as a dwelling, and is plaster and painted. The roof consists on concrete tiles, with timber trusses. Windows are aluminum. The style of the building has no great Architectural significance & importance. The Architecture is of an ordinary design. Surrounding buildings are all residential.

References

**4. Archaeological Significance:**

No significance

References

**5. Palaeontological Significance:**

None

References

**D. WORK CARRIED OUT WITHOUT PRIOR APPROVAL**

1. Purpose of Application:	Damage/destruction/demolition	Alterations/Additions
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:**

The ancillary unit and garage will increase the value of the property. Does not hinder with any surroundings.

**3. Detail the work commenced/carried out**

The ancillary unit and garage built with blocks, and is plaster & painted, with concrete roof tiles and aluminium windows & doors. The facades of the building compliments the surrounding properties. All materials used are SABS approved and SANS compliant. The building does not obstruct any surroundings or the property in question.

**4. Motivation for work (Please motivate fully why work was commenced without approval)**

The owner was unaware that the plans for the building was not approved. And she was advised by a professional that she could go ahead and build. Once built did she discover, that the plans were not approved and she needed to do an AMFA application.

Status of work	Commenced		Stopped		Completed	✓
Date commenced			Date stopped		Completion date	

**E. CONTACT DETAILS**

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

NAME	Ironstone Construction
POSTAL ADDRESS	167 Voortrekker Road, Jacobs

		POST CODE
TEL	FAX/EMAIL	
CELL 074 314 1800	QUALIFICATIONS	
REGISTRATION OF INDUSTRY REGULATORY BODY:		

**2. ARCHITECTURAL PROFESSIONAL/ HERITAGE PRACTITIONER**

NAME MRS. N. Sukhral	
POSTAL ADDRESS SI Cannon Road	
Hillary	
POST CODE 4094	
TEL 073 2054645	FAX/EMAIL
CELL	PROFESSIONAL REG. NO. D0872
Author's Drawing Nos. SD 001	
SIGNATURE N. Sukhral	DATE 23/09/2022

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

NAME MRS. R. MOTTAI	
POSTAL ADDRESS 17 Atherstone Place,	
Woodlands, Moleni	
POST CODE	
TEL 011 7650375	FAX/EMAIL rosemottai@icloud.com

**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.  
**USE STREET ADDRESS/FARM NAME or DEVELOPMENT/PROJECT TITLE OR SAHRIS ID NUMBER AS REFERENCE**

**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)	✓
MOTIVATION/INCEPTION REPORT	✓
PHOTOGRAPHS*	✓
ORIGINAL/PREVIOUS DRAWINGS/REPORTS	✓

PLANS (X2 SETS FOR HARD COPY SUBMISSIONS) - NUMBERED AND COLOURED*		✓
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		✓