KWAZULU-NATAL

AMAFA AND RESEARCH INSTITUTE

THE KZN PROVINCIAL HERITAGE RESOURCES AUTHORITY

DECLARATION BY OWNER

Ref:	
Date Received:	
Application no:	

Not Approved:

APPLICATION FORM I

Approved: Date of Permit:

Permit No:

APPLICATION IN TERMS OF THE KWAZULU-NATAL AMAFA AND RESEARCH 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.

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.

MOUIS DOS JANTOS - (ZE	LPY 1172) PTY LTD JOWNER 2017					
(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 Place Date Date 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:	Title Deed No. 104 43380					
Name of property/Project title:						
SPORT SCENE - INTERNAL SHOP FITTING - DOIT APPROVED PLAND						
REM OF ERF 11036, DURBAN	GPS Co-ordinates LNO AMAR SUBMISSION					
Street Address: 393 DR PIXLEY KASEME ST, DURBAN						
Local Municipality ETHEKWIN	District Municipality Traditional Authority Area					
Current zoning RETAIL	Present use Present use					

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 +	1	Graves	Archaeological site Battlefield or rock art	Palaeontological material Meteor impact site

-		
2.	Historical/Military Significance:	
NO	APPARENT ARCHITECTURES:	SIGNIFICANE.
		*
Refere	ences	
3.		Original date of construction:
Signific	cance JONE	
Refere	ences	
4.	Archaeological Significance:	
	NONE.	
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5.	Palaeontological Significance:	
	Nave	
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		1000
Refere	ences	

D. WORK CARRIED OUT WITHOUT PRIOR APPROVAL

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

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	Detail the work commer	nced/carried out				
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i.	Motivation for work (Ple	ase motivate fully	why work was	commenced	l without approval)	
	ASDITIONAL O	TORKAGE	e*•			
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		4				
tatus o	f work Commenced	Stop			Completed	
	f work Commenced				Completed Completion date	2011

2. ARCHITECTURAL PROFESSIONAL/ HERITAGE PRACTITIONER

NAME CRAIG MUNNIK						
POSTAL ADDRESS P.O. BOX 225, PAARDEN EILAND						
		POST CODE 7405				
TEL 021 510 3912	FAX/EMAIL council@designcompany.co.z					
CELL	PROFESSION	IAL REG. NO. ST2323				
Author's Drawing Nos.						
SIGNATURE /	DATE					
L	08 JUI	LY 2022				
3. OWNER OF PROPERTY (Owner or delega		- V2				
NAME ZELPY 1172 CPN JETD -,		05 SAW(05-				
POSTAL ADDRESS 13 DR PIXLEY	4SEME ST					
DURBAN		POST CODE 4-00				
TEL NIP	FAX/EMAIL	NIE.				
4. DELEGATED AUTHORITY (The name of the Power or Attorney/proof of authorization to be attached)	person authorized	to act on behalf of a company or insti	tution -			
NAME LJ. AKKEN						
TEL 0837879011	FAX/EMAIL (aryo plansahlad oo	· u			
			*			
F. SUBMISSION FEE: R4000.00 (subject	to annual increr	nent on the 1 April)				
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 NUMBER AS REFERENCE</u> ACCOUNT DETAILS: ABSA BANK: Branch: ULUNDI Bank Code: 630330 Account in the name of AMAFA AKWAZULU-NATALI 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						
H. CHECKLIST OF SUPPORTING DOCUMENTATION (*see guidelines)						
APPLICATION FORM (COMPLETED & SIGNED E	BY OWNER & (CONSULTANT)	/			
MOTIVATION/INCEPTION REPORT			V			
PHOTOGRAPHS*						
ORIGINAL/PREVIOUS DRAWINGS/REPORTS						
PLANS (X2 SETS FOR HARD COPY SUBMISSIO	NS) - NUMBER	ED AND COLOURED*	EMAILE			
1:50 000 MAP & SATELLITE AERIAL VIEW	KML FILE M	IAP	1			
PROOF OF PROFESSIONAL ACCREDITATION (e.g. copy of acc	reditation card) 4(2323				
APPOINTMENT LETTERS NEW OWNER,	CONSENT	LETTER NEW WHAL.	1			
PAYMENT/PROOF OF PAYMENT			-,1			