

3. Present use Residential

Local Municipality eThekweni

Street Address: 23 Princess Alice Avenue

2. Erf/Lot/Farm No: 5246

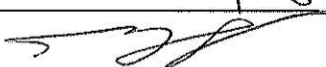
1. Name of property: Erf 5246 of Durban

B. PROPERTY

(The owner of the property must fill in these details and sign the document)

Place Durban

Date 17/11/2009

Signature 

Amafa akwazulu-Natali may issue the permit to me.

undertake strictly to observe the terms, conditions, restrictions, by-laws and directions under which

A. DECLARATION BY OWNER

I, Amand Naidoo

Amafa akwazulu Natali, 195 Langalibalele Street, Pietermaritzburg, 3201/ Box 2685
 Pietermaritzburg 3200.
 Enquiries 033-394 6543 or Fax 033-342 6097(For proof of payment not applications)

PROOF OF PAYMENT ARE TO BE FORWARDED TO:

ALL APPLICATION FORMS, DEVELOPMENT PROPOSALS, PHOTOGRAPHS, MOTIVATION AND

PLEASE NOTE

IT IS AN OFFENCE IN TERMS OF SECTION 34, OF THE KWAZULU-NATAL HERITAGE ACT TO MAKE ANY FALSE STATEMENT OR FAIL TO PROVIDE REQUIRED INFORMATION IN THIS APPLICATION (Consult the guidelines before completing this form)

In terms of the Kwazulu-Natal Heritage Act No. 10 of 1997 (Section 26 (1)(a), a permit is required prior to demolition or alteration and addition of any structure or part thereof that is older than 60 years.

APPLICATION FOR ADDITIONS, ALTERATIONS OR DEMOLITION

Ref: IO _____

Date received _____

Application No _____

Inspected: Y/N _____

Application approved not approved

Date of permit/notification _____

Permit No _____

D. PROPOSED WORK

1. Purpose of Application

DEMOLITION (Indicate the reason for demolition):

CONDITION	<input checked="" type="checkbox"/>	HEALTH REASONS	<input checked="" type="checkbox"/>	OTHER	<input type="checkbox"/>
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ALTERATION (Indicate the reason for alteration):

CONDITION	<input type="checkbox"/>	MAINTENANCE	<input type="checkbox"/>	OTHER	<input checked="" type="checkbox"/>
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ADDITION (Indicate the reason for addition):

EXTENSION	<input checked="" type="checkbox"/>	CHANGED USE	<input type="checkbox"/>	OTHER	<input type="checkbox"/>
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5. Urban Setting & Adjoining Properties: Residential suburb. All adjoining properties have been upgraded.

4. Architectural Significance: None

3. Historical Significance: None

If the site is a landmark, the number and date of the Notice in the Gazette: N/A

Landmark	Provisionally Protected	Heritage Register	Heritage Register	60 Years & older	Listed	Sensitive Site

2. Status of site

C. SIGNIFICANCE:

1. Original date of construction

1935 and additions in 1971

Telephone _____
 Fax _____
 Post code _____
 Address _____
 Name _____

E: CONTACT DETAILS

1. CONTRACTOR (the person who will do the work)

Restorations: Restore existing/original wooden flooring. Retain and restore existing doors and door frames. Restore existing window frames. Replace ceilings with water damage and sagging boards. Restore/re refurbish plumbing and electrical systems.

Reuse/salvage material (bricks, window frames, door frames, roof tiles) for alterations and additions.

3. Detail the alterations/additions/restorations proposed.

Alterations: relocate existing kitchen to existing dining room. Convert bedroom to dining room (open plan with existing lounge). Convert existing kitchen into bedroom with ensuite bathroom. Convert existing bedroom into ensuite bathroom to existing bedroom. Additions: Addition of a master bedroom and ensuite bathroom with walk-in closet. Addition of a double garage attached to the main building with direct access. Addition of a family-room and small balcony.

2. Motivation for proposed work (Please motivate fully)

The current property is in a poor state of dis-repair and has been neglected by the previous owners. The existing property, its present layout and size does not meet my families needs. The existing property has a single garage (attached from the main building), which does not meet my security and personal requirements - as I have two vehicles. The building is in a state of disrepair, has severe bore infection and is unhygienic. The existing home has a single bathroom and one toilet which is not adequate for my family - thus the addition of two bathrooms. The existing home has three bedrooms which do not cater for my family need for a study/plan room for my young children. The present layout (ie. location of the bedrooms, kitchen, dining room and garage, does not adequately meet my families lifestyle needs. Thus the consolidation of the living areas and sleeping areas has been proposed. The master-bedroom has been positioned to take advantage of the city and harbour views.

COMPLETED & SIGNED APPLICATION FORM	<input checked="" type="checkbox"/>	
MOTIVATION	<input checked="" type="checkbox"/>	
PHOTOGRAPHS	<input checked="" type="checkbox"/>	
ORIGINAL DRAWINGS	<input checked="" type="checkbox"/>	
NUMBERED COLOURED PLANS (X2)	<input checked="" type="checkbox"/>	
PAYMENT/PROOF OF PAYMENT	<input checked="" type="checkbox"/>	

G. CHECKLIST YES NO

F. SUBMISSION FEE
 A submission fee of R250.00 is payable to Amata akwazulu Natali in cash, by cheque, postal order 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 **AMATA AKWAZULU-NATALI**
 Account No. 40-5935-6024
NB: Proof of payment to be forwarded (faxed, posted or delivered) to our office

Telephone _____ Fax _____

In the case of a company or institution, the name of the person who may be contacted for further information _____

Telephone 031-2611250 / 0837819890 / 0866742649
 Post code 4001 Fax 0866742649

Postal Address: 4 Park Lane, 172 Chalmersford Rd, Glenwood
 Name: Andri Naidoo
3. OWNER OF PROPERTY

Signature _____ Date _____

Registration No: _____

Drawing Nos. _____

Telephone _____ Fax _____

Post code _____

Postal Address _____

Name _____

2. ARCHITECT/TECHNOLOGIST/DESIGNER