

RESPONSE REQUIRED IN TERMS OF

**DEVELOPMENT PERMIT FORM  
NID  
(Needs and desirability)**

In terms of the KwaZulu Natal Heritage Act No. 4 of 2008 and the National Heritage Resources Act No.25 of 1999 (Section 38 (1)), a permit is required to carry out certain listed activities.

It is an offence in terms of section 34 of the KwaZulu Natal Heritage Act, to make false statement or fail to provide required information in this application.

**ALL APPLICATION FORMS AND PROOF OF PAYMENT ARE TO BE FORWARDED TO:  
AMAFA KWAZULU NATAL, ARCHAEOLOGY DEPARTMENT, 195 LANGALIBALELE STREET,  
PIETERMARITZBURG, 3201/ BOX 2685 PIETERMARITZBURG 3200.**

Kindly note that:

1. The Audit process requires that hard copies of this and all subsequent documentation be submitted
2. Kindly note that with effect from 1<sup>st</sup> of April 2010 an application fee will be charged for Needs & Desirability applications and Permit applications. This fee may be reviewed annually.
3. Incomplete applications will not be processed.
4. All information filled in on this form will become public information on receipt by this department. Any interested and affected party can be provided with information contained in this application on request, during any stage of the application process.
5. One Printed Copy (not faxed) and one electronic copy is required to be submitted

**SUBMISSION FEES**

Regulations make provision for the agency to charge a submission fee. A administration fee of **R600.00** is payable to **Amafa aKwaZulu Natali** by postal order or bank deposit / EFT 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 Amafa, to be referenced **Applicants Name, Project, Date.** Eg Smith. Beach Sands1, 12/05/2011.

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<b>OFFICE USE.</b>
<b>AMAFA ID</b> _____
<b>FILE REFERENCE</b> _____
<b>EIA NUMBER (if applicable)</b> _____
<b>DATE RECEIVED</b> _____
<b>DATE ONSIDERED</b> _____
<b>FILTER COMMITTEE RECOMMENDATION</b>
<b>APPLICATION PAYMENT CONFIRMATION</b>

**APPLICANTS DETAILS**

Applicant Name (Company/institution/individual):
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Contact Person:
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Telephone/Fax No.:
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Email:
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**DEVELOPMENT DETAILS**

Project Title:
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Project Description:
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Extent of Development Footprint (in m <sup>2</sup> ):
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**RESPONSE REQUIRED IN TERMS OF**

BID	SCOPING (d)	SCOPING(f)	BAR	EMP	ROD
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Nature of Development: (please tick the appropriate box)**

1	Construction of a <b>road exceeding 300 m</b> in length	<input type="checkbox"/>
2	Construction of a <b>wall exceeding 300 m</b> in length	<input type="checkbox"/>
3	Construction of a <b>power line exceeding 300 m</b> in length	<input type="checkbox"/>
4	Construction of a <b>pipeline or trench exceeding 300 m</b> in length	<input type="checkbox"/>
5	Construction of a <b>canal exceeding 300 m</b> in length	<input type="checkbox"/>
6	other similar form of <b>linear development exceeding 300 m</b> in length	<input type="checkbox"/>
7	Construction of a <b>bridge or similar structure exceeding 50 m</b> in length	<input type="checkbox"/>
8	Any development <b>exceeding 5 000 m<sup>2</sup></b> in extent any other category of development provided for in regulations	<input type="checkbox"/>
9	Other activity which will <b>change the character of an area of land, or water exceeding 10 000 m<sup>2</sup></b> in extent	<input type="checkbox"/>
10	Any development involving <b>three or more existing erven</b> or subdivisions thereof	<input type="checkbox"/>
11	any development, or other activity involving <b>three or more existing erven or subdivisions</b>	<input type="checkbox"/>
12	any development, or other activity involving <b>three or more existing erven or subdivisions which have been consolidated within the past five years</b>	<input type="checkbox"/>
13	any development, or other activity the costs of which will exceed a sum set in terms of regulations	<input type="checkbox"/>
14	Rezoning of a site exceeding 10 000 m <sup>2</sup>	<input type="checkbox"/>

To your knowledge, will the Development impact on a heritage resource protected in terms of Sections 33,34,35,36, 37, 38, 39, 40, 41, 42, 43 of the KZN Heritage Act, or is the development located in the vicinity of any of the above. If yes, explain.

District Municipality / Metro	
Local Municipality	
Traditional authority (if applicable)	
Town / Area	

**RESPONSE REQUIRED IN TERMS OF**

Property Description (Erf, Lot, Portion, Farm)	
Co-ordinates . (Provide either Decimal or DD MM SS ss)  Decimal eg 28,5075 S 31, 23456 E  DDMMSSss 28.30 ' 45,12"	<b>SOUTH (X)</b>
	Decimal Degrees
	Or Degrees ..... Minutes..... Seconds.....
	<b>EAST (Y)</b>
	Decimal Degrees
	Or Degrees ..... Minutes..... Seconds.....
1: 50 000 sheet	
1: 10 000 orthosheet (if applicable)	

<b>APPLICANT'S CHECKLIST</b>	<b>Y</b>	<b>N</b>
Completed & Signed Application Forms	<input type="checkbox"/>	<input type="checkbox"/>
Site Photographs	<input type="checkbox"/>	<input type="checkbox"/>
1:50 000 Topographical / Aerial Photo Map	<input type="checkbox"/>	<input type="checkbox"/>
Payment/ Proof of Payment	<input type="checkbox"/>	<input type="checkbox"/>

Payment - postal order ..... bank dep ..... Internet banking/EFT.....:

**Declaration**

I, \_\_\_\_\_ undertake strictly to observe the terms, conditions, restrictions, by-laws and directions under which the Council of *Amafa aKwaZulu-Natali* may issue the permit.

Signature	Place	
	Date	

**NB:**

**APPLICATIONS SUBMITTED WITH INCOMPLETE FORMS WILL NOT BE CONSIDERED**