

Permit Application Form



FOR OFFICIAL USE
Date received
Application no
Permit no

To destroy, damage, deface, excavate, alter, remove from its original position, subdivide or change the planning status of a **Provincial Heritage Site or a Provisionally Protected Place**, or to alter or demolish a **Structure 60 years or older**, as protected in terms of the National Heritage Resources Act (Act No. 25 of 1999).

PLEASE FILL IN ALL SECTIONS RELATING TO YOUR APPLICATION.

1. APPLICANT

Name: ACS NEL.....
Address: PO BOX 28009 DANHOF.....
Postal Code: 9301...
Telephone: 051-4362031..... Fax: 086 688 5271.....
Identity Number: 5101025152084..... E-mail: dries@nbastudio.com.....

2. OWNER OF PROPERTY

Name: DMN FAMILY TRUST (TOMMIE HAYES).....
Address: 96 Raymond Mlhaba Street, Navalsig, Bloemfontein
Postal Code: 9301 Division 10 of 8 and Remainder of erf 486
Telephone: 051-4064950 Fax: 051-4331245
Identity Number: 7508115002086 E-mail: tommie@georgiou.co.za

Signature: [Handwritten Signature] Date: 04/03/2013

3. SITES (indicate by means of a cross in the appropriate space(s) below):

Provincial Heritage Site (previously a National Monument) Gazette No:.....
Provisionally Protected Place
[] Structure older than 60 years - Earliest recorded drawings found indicate the building to be approximately 58 years old (see attached drawings)
Situated within a Heritage Area (previously Conservation Area)
Current use: COMMERCIAL.....

Proposed Use: COMMERCIAL.....

Name of Property : COMP IMPORT.....

Address: CORNER NELSON MANDELA AVE/FIRST AVE BLOEMFONTEIN

Erf/ Stand/ Farm no: DIVISION 10 OF 8 AND REMAINDER OF ERF 486.....

Magisterial District: MANGUANG

Address of Local Authority: MANGAUNG METRO MUNICIPALITY

4. NAME AND ADDRESS OF PRIMARY RESPONSIBLE AGENT (Architect, Designer, etc.)

Name: ACS NEL.....

Qualification:PR. ARCH, B.ARCH (UFS) Professional Reg. number: 5872 (SACAP)

Company: NBA STUDIO cc.....

Address:PO BOX 28009 DANHOF.....

Postal code: 9310..... E-mail: dries@nbastudio.com.....

Telephone: 051-4362031..... Fax:: 0866885271.....

5. PROPOSED WORK

- | | | |
|---|-------------|-------------|
| <input type="checkbox"/> Total Demolition | Alteration | Subdivision |
| Partial demolition | Restoration | Rezoning |
| Excavation | Landscaping | Departure |

Other

Drawing Reference Numbers and their Dates:

.....
.....

Detail the manner in which the proposed work is to be carried out:

Total demolition.....
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.....

Motivation for Proposed work (please motivate fully, with reference to conservation principles where appropriate. This space may also be used for additional details required above.)

1. The existing building has been changed extensively over the year and no longer represents the original design (see attached drawings and photos - 6,7,10,11,13,14,15,17,19,21,23,24)
2. The building is a structural and safety risk (see attached engineers report)
3. It is uneconomical to retain and maintain the existing structure (see photos -1,2,3,4,8,9,12,22)
4. The building no longer complies with the local town planning schedule (parking, building line, vehicle entrance etc.) as well as the latest SANS codes.
5. The proposed new building will uplift the immediate vicinity and will make a positive contribution to the property values, architecture etc.

Approximate value of proposed work: R NOT APPLICABLE

Old buildings require special treatment in terms of specifications, techniques and planning of alterations:

What experience does the Primary Agent have in working with historical sites?

Not applicable.....

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What experience does the contractor working on the site have in working with historical sites?

Not applicable.....

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6. APPLICANT

I, A.C.S NEL.....
fully undertake to observe the terms, conditions, restrictions, regulations, guidelines and directions under which the Free State Heritage Resources Authority may issue the permit to me.

Signature: 

Place: Bloemfontein

Date: 4 March 2013

ITEMS TO ACCOMPANY THIS FORM:

- * **THREE SETS OF DRAWINGS, ONE OF WHICH MUST BE COLOURED**
- * **COLOUR PHOTOGRAPHS OF STRUCTURES IN THEIR PRESENT FORM AND IN CONTEXT**
- * **ANY OTHER INFORMATION REQUESTED BY FSHRA**

PLEASE NOTE:

- **The Permit Committee meets every second Tuesday of the month. Therefore, your application should reach us no later than the 25th of the previous month.**
- **Unless this form is signed, it will not be processed.**
- **It is an offence in terms of the National Heritage Resources Act to make any false statement or representation in this application.**

PERMIT COMMITTEE OF FSHRA
C K LEBONA (CHAIR) - B BRITZ - M MASOOA - L PHILIP - M J SEREKOANE - S TLHOAELE
Tel: 051-410 4805 Fax: 051-410 4805 E-mail: mbatha.npz@sacr.fs.gov.za
Room 225 Business Partners Building, cnr East Burger and Henry Street Bloemfontein
Enquiries: Ntando Mbatha

Department of Sport, Arts and Culture