

2. ARCHITECT/ARCHITECTURAL TECHNOLOGIST/DESIGNER

NAME		Urban Architects, Paul Dekker	
POSTAL ADDRESS		PO Box 17181 Congella	
		POST CODE	
TEL	031 2053057	FAX	4013
CELL	083 541 0818	SACAP REG. NO.	5594
Author's Drawing Nos. 38A,40E, 41E, 42E, 43E, 44E, 45E, 46E, 47E, 48E, 50E, 51E,			
SIGNATURE		DATE 53E, 60E, 61E, 62E, 63E 25 Feb 2013	

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

NAME		National Department of Public Works	
POSTAL ADDRESS		Priv Bag X54315	
		POST CODE	
TEL	031 314 7146	FAX	

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		Mr S Mahadeo	
TEL	031 314 7146	FAX	

F. SUBMISSION FEE: R600.00 (subject to annual increment on the 1 April)

The submission fee is payable to **Amafa aKwaZulu-Natali** by cheque 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 **AMAFa AKWAZULU-NATALI**

Account No. 40-5935-6024

NB: Proof of payment to be forwarded (faxed, posted or delivered) to our office

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 _____

H. CHECKLIST OF SUPPORTING DOCUMENTATION YES NO

	YES	NO
APPLICATION FORM (COMPLETED & SIGNED BY OWNER & PLANS AUTHOR)		
MOTIVATION		
PHOTOGRAPHS		
ORIGINAL DRAWINGS		
PLANS (X2 SETS) - NUMBERED AND COLOURED		
PROOF OF PROFESSIONAL ACCREDITATION (e.g. copy of accreditation card)		
PROOF OF PUBLIC PARTICIPATION		
PAYMENT/PROOF OF PAYMENT		