



APPLICATION FORM A (STRUCTURES)

Ref: _____
Date received _____
Application No _____
Application approved ___ not approved ___
Date of permit/notification _____
Permit No _____

PERMIT APPLICATION IN TERMS OF THE KZN HERITAGE ACT (SECTION 33(1)(A) FOR THE DEMOLITION, ALTERATION OR ADDITION TO A STRUCTURE WHICH IS, OR WHICH MAY REASONABLY BE EXPECTED TO BE OLDER THAN 60 YEARS

(Application form H must be used for alteration to structures permanently protected in terms of Section 37, 38, & 39 (Heritage Landmarks))

PLEASE NOTE

IT IS AN OFFENCE IN TERMS OF THE KWAZULU-NATALI HERITAGE ACT, 2008 TO MAKE ANY FALSE STATEMENT OR FAIL TO PROVIDE REQUIRED INFORMATION IN THIS APPLICATION (Detach and 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, DEVELOPMENT PROPOSALS, PHOTOGRAPHS, MOTIVATION, AND PROOF OF PAYMENT ARE TO BE DELIVERED TO: Amafa aKwaZulu-Natali, 195 LANGALIBALELE (LONGMARKET) STREET, PIETERMARITZBURG, 3201 OR POSTED TO: BOX 2685 PIETERMARITZBURG 3200. Enquiries 033-394 6543 or Fax 033-394 6552 (For proof of payment not applications)

A. DECLARATION BY OWNER

I, YOGAPRAGASAN DHARMAJINGUM MDOOLEY

(full names of owner/person authorized to sign) undertake strictly to observe the terms, conditions, restrictions, by-laws and directions under which Amafa aKwaZulu-Natali may issue the permit to me.

Signature [Handwritten Signature]
Place DURBAN Date 11/07/13

(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:

1. Name of property: BRITANNIA HOTEL Title Deed No. T15 828

2. Erf/Lot/Farm No: LOT 49, DURBAN

Street Address: 1299 UMGEN ROAD, DURBAN

Local Municipality _____

District Municipality _____

3. Current zoning SPECIAL ZONE 1 (HOTEL) Present use HOTEL

C. SIGNIFICANCE:

1. Original date of construction ESTABLISHED 1879

2. Historical Significance: ARCHITECTURAL.

THE 124 YEAR OLD BUILDING'S FRONT FACADE DELIGHTFULLY STILL MAINTAINS STRONG COLONIAL STYLE ARCHITECTURE DECORATED WITH ART DECOOR ON THE FACADES WHICH IS PREVALENT IN THE DURBAN AREA.

References _____

3. Architectural Significance: HISTORICAL.

BUILT IN 1879, INITIALLY WAS ONE BLOCK OF A BUILDING DURING THE REIGN OF THE APARTHEID REGIME THE ONLY WHITE SATISFACUS QUO REMAINED IN TERMS OF THE MAIN FACILITIES - SEE ATTACHED MOTIVATION

References LINKEN WOODLEY - OWNER.

4. Urban Setting & Adjoining Properties: _____

THE SITE LIES ON 1299 WINGENI ROAD, THE SOUTH EAST END OF THE BUILDING LAYS ON AN ACCESS ROAD WHICH SERVICES THE HOTEL AND ADJACENT INDUSTRIAL BUILDING. ON THE NORTH WEST END THERE IS VACANT LAND, THE REAR OF THE SITE IS ALSO A VACANT LOT.

D. PROPOSED WORK

1. Purpose of Application (Indicate the reason by marking the relevant box)

DEMOLITION

CONDITION		HEALTH REASONS		OTHER	
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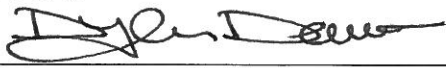
ALTERATION

CONDITION		MAINTENANCE		OTHER	
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ADDITION

EXTENSION	/	CHANGED USE		OTHER	
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2. ARCHITECT/ARCHITECTURAL TECHNOLOGIST/DESIGNER

NAME <u>DYLAN DEVER</u>	
POSTAL ADDRESS <u>P O Box 401088</u>	
<u>REDHILL</u>	POST CODE <u>4071</u>
TEL <u>0861 000 960</u>	FAX <u>0866 2616 02</u>
CELL	SACAP REG. NO. <u>7373</u>
Author's Drawing Nos.	
SIGNATURE 	DATE <u>12 JULY 2013</u>

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

NAME <u>Y. D. MOODLEY</u>	
POSTAL ADDRESS <u>1299 UMGWANI ROAD</u>	
<u>DURBAN</u>	POST CODE <u>4001</u>
TEL <u>031 303 2266</u>	FAX <u>031 303 2417</u>

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 <u>DYLAN DEVER</u>	
TEL <u>0861 000 960</u>	FAX <u>0866 2616 02</u>

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 ATTAINED PREVIOUSLY WITH NO OBJECTION PLEASE SEE ATTACHED

Telephone _____ Fax _____

H. CHECKLIST OF SUPPORTING DOCUMENTATION

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