

LETTER OF CONSENT FOR RELAXATION

APPLICATION NO: [Completed by the Department after submission]

Head: Development Planning Environment & Management
166 K.E. Masinga (Old Fort) Road,
DURBAN

Date.....

Dear Sir / Madam

PART A. PARTICULARS OF APPLICATION PROPERTY *(To be completed by applicant)*

APPLICATION FOR THE RELAXATION OF THE eThekweni Municipality **SCHEME/REGULATIONS**
FOR Relaxation of the SE Side space


ON *ERF/PORTION/REM 1507, Westville

SITUATE AT (Street Address)..... 3 Circle Drive

APPLICANT'S NAME: NOLUBABALO SYLVIA & SIPHELELE NOBONGOZA

PART B. RELAXATIONS SOUGHT

(To be completed by the Applicant and signed by the person granting Consent)
SEE REVERSE OF SHEET ON HOW TO COMPLETE FORM

Nature of Relaxation	Extent of Relaxation	Signature
Building Line	From m to m (street) From m to m (street) From m to m (street)	
Side Space	From ..3..... m to ..1.365..... m on the ..East..... boundary From m to m on the..... boundary	
Rear Space	From m to m on the boundary	
Height of Boundary Walls Metres on the boundary	

PART C. CONSENT FROM REGISTERED OWNER OF ADJACENT / OPPOSITE PROPERTY

(To be completed by the person granting consent)

*I/We, Vishnu Govender
, being the **registered owner/s (if in joint ownership both spouses to
 sign)

of (street address) 5 Circle Drive

which is situate on *Erf / Portion / Rem PTN 2 of ERF 1506, Westville

do hereby confirm that *I/we have had sight of the application plan and memorandum of motivation and understand the contents thereof, and hereby **Grant Consent** to the proposed relaxation as stated above.**(Objections raised to be motivated separately)**

Yours faithfully



Vishnu Govender

*Signature of registered owner //
 Chairman of Body Corporate // Trust //
 Managing Director of Company //
 Managing Director of the Share Block Company.

Full names (IN BLOCK CAPITALS)

I.D. Number 7409095122087

Telephone No 083 629 2777

* PLEASE DELETE WHICHEVER IS NOT APPLICABLE

**** ALL REGISTERED OWNERS TO SIGN****(P T O: IMPORTANT INFORMATION)**

IMPORTANT INFORMATION

1. This letter must be delivered to the Land Use Management Branch, by hand to, 166 K.E. Masinga (Old Fort) Road, Durban.
2. Office hours: 08h00 to 12h30 Monday-Friday (excluding Public Holidays)

DEFINITIONS:

1. **BUILDING LINE:** A line parallel to a fixed distance from any street, public right of way, or road reserve.
2. **SIDE SPACE:** Means the area between a line parallel to the side boundary.
3. **REAR SPACE:** Means the area between a line parallel to the rear boundary.
4. **HEIGHT OF DWELLING:** The height of the dwelling must be indicated in number of storeys.
5. **HEIGHT OF WALLS:** Any boundary wall in excess of three (3) metres in height above the existing ground level as viewed from the street or neighbouring property requires the consent of the neighbour. (individual scheme requirements may vary)

The signature of the consenting registered owner is required adjacent to each block indicating the relaxation being sought by the applicant.

IMPORTANT:

1. The purpose of this form is to ensure that you, as the registered owner of the affected property, have had sight of the plan which is to be submitted to the eThekweni Municipality for consideration of the development indicated overleaf and that you understand the implications of the relaxations being sought by the applicant and its potential impact upon your amenities and that you have no objections to the proposal.
2. The affected party being requested to give their consent to the proposed use must complete Part B, by providing their signature in the third column adjacent to the relaxation sought. In addition, the affected party must complete Part C.
3. **In addition to the signing of this form, the Affected Party is also required to sign acceptance on the plan itself.** The Affected Party's name, address, telephone number, and signature is to be inserted in a table which is provided by the Applicant on the Plan as indicated below. This is to ensure that you have had sight of the plan to be submitted to the Municipality.

NAME	ADDRESS	I.D. NO.	TEL/CELL NO	SIGNATURE

4. Any form which includes an objection, comments or conditions under which the consent is given, shall be considered as an objection to the proposal. In this instance, the applicant will be required to submit a Special Consent Application. As an affected party, you will be notified by registered mail of the Applicant's proposal. You will then have an opportunity to raise your objection by notifying the Applicant and the Department in writing, setting out the reasons for your objection.
5. **Please note : Where the owner is a Body Corporate, a member of the Body Corporate, Director or a Member of a Company, Home Owners Association, a Trust or a Close Corporation, an Original signed letter of Authority as attached is required**
6. Should you have any enquiries with respect to this form and the relevant procedure, please contact the Department using one of the following:

Tel: (031) 311-7309

Fax: (031) 311-7859

E-mail: Zethu.Madikizela@durban.gov.za / Bella.Phillips@durban.gov.za / Jenesha.Seeban@durban.gov.za