

GPS CO-ORDINATES: (Decimal format only)	
SOUTH: - 29.873634	EAST: 30.827098
1:50 000 SHEET no: 2930DD	1:10 000 SHEET no: 12

B. PROPERTY DESCRIPTION:	
Name of property:	Title Deed No. T12782/1982
Erf/Lot/Farm No: SUB 108 OF FARM 951, FT	GPS Co-ordinates -29.873634S; 30.827098E
Street Address, Suburb, Town: CORNER OF NSINGIZI STREET 9 IMPANGELE RD, PINETOWN	
Local Municipality ETHEKWINI METRO	District Municipality
Traditional Authority Area	
Current zoning SPECIAL RESIDENTIAL 1	Present use TELKOM WORKSHOP

C. DEVELOPMENT TYPE:		
1. DECISION REQUIRED IN TERMS OF SECTION s41(1) (tick the appropriate box/boxes)		
Linear Development/Barrier exceeding 300m in length e.g. road, pipe/power line, trench, canal or wall		
Other similar form of linear development/barrier exceeding 300m in length		
Construction of a bridge or similar structure exceeding 50m in length		
Any development exceeding 5 000m ² in extent or any other category of development provided for in regulations	✓	
Any other activity which would change the character of an area of land or water exceeding 10 000m ² in extent		
Any development involving three or more existing erven or sub-divisions thereof		
Any other activity involving three or more existing erven or sub-divisions thereof		
Any development or other activity involving three or more existing erven or sub-divisions thereof which have been consolidated within the past 5 years		
Any development or other activity the costs of which will exceed a sum set out in the regulations		
Re-zoning of a site exceeding 10 000m ²		
2. DEVELOPMENTS THAT TRIGGER OTHER LEGISLATION (NEMA, ENVIRONMENTAL CONSERVATION ACT, MINERALS ACT, ETC)		
RESPONSE REQUIRED IN TERMS OF s41(8) (tick the appropriate box/boxes)		
BID	BAR	EIA
EMP	WULA	MPRDA
OTHER (describe)		

D. IMPACT ON HERITAGE RESOURCES: To your knowledge would the Development impact on any known heritage resources protected in
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terms of the KZN Amafa and Research Institute Act (5/2018), or is the development located in the vicinity of any of the above? If yes, the Heritage Practitioner must create a site on sahris pinpointing the position of the heritage resource/s discovered. (tick the appropriate box/boxes below)	
s37 - Structures or part thereof that can reasonably be expected to be over 60 years of age	NO
s38 - Graves of victims of conflict,	NO
s39 - Informal and private burial grounds (traditional graves or graves outside of a formal cemetery e.g. a farm cemetery that are over 60 years of age).	NO

s40 - Battlefield sites , archaeological sites, rock art sites, palaeontological sites, historic fortifications, ruins over 100 years old, meteorite or meteorite impact sites and any objects or ecofacts associated therewith	NO
s42 - Protected areas (is the site within a known protected area?)	NO
s43 - Specially protected heritage resources are listed in Schedule of Heritage Resources	NO
s44 - Heritage Landmarks including the site on which they are situated	NO
s45 - Provincial Landmarks and the site on which they are situated (state owned)	NO
s46 - Graves of members of the Royal Family listed in Schedule of Heritage Resources	NO
s47 - Battlefield site, public monument or memorial listed in the Schedule of Heritage Resources and any public monument defined in the NHRA and protected in terms of Section 37 of the NHRA, & Section 47 of the KZN Amafa and Research Institute Act (5/2018)	NO
s49 - Artefacts, or collections thereof on which Heritage Object status has been conferred	NO

E. CONTACT DETAILS

1. APPLICANT'S DETAILS (OWNER OF PROPERTY)	
NAME <u>TELKOM SA / GYRO GROUP</u>	
POSTAL ADDRESS <u>61 OAK AVENUE , HIGHVELD</u>	
<u>CENTURION</u>	POST CODE <u>0157</u>
TEL _____	FAX/EMAIL <u>digital@gyrogroup.co.za</u>
DECLARATION BY OWNER <u>PLEASE REFER TO ATTACHED POWER OF ATTORNEY</u>	
I, _____	
(full names of owner/person authorized to sign on behalf of the owner)	
undertake strictly to observe the terms, conditions, restrictions, by-laws and directions under which the KZN Amafa and Research Institute may issue the comment to me.)	
Signature _____	
Place _____	Date _____

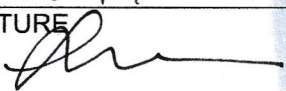
2. DELEGATED AUTHORITY (The name of the person authorized to act on behalf the applicant where the owner is a company, trust, or institution – Power or Attorney/proof of authorization to be attached)

NAME <u>SINDILE BIDLA</u>	
TEL <u>082 340 8538</u>	FAX/EMAIL <u>sindile.bidla@geolocate.co.za</u>

3. DEVELOPER'S DETAILS

NAME(Company/institution/individual)	
POSTAL ADDRESS	
	POST CODE
TEL	FAX
CELL	EMAIL
SIGNATURE	DATE

4. CONSULTANT'S DETAILS

NAME(Company/institution/individual) <i>LIZE MALAN</i>	
POSTAL ADDRESS <i>P O BOX 3421</i>	
<i>MATIELAND</i>	POST CODE <i>7602</i>
TEL	FAX
CELL <i>0834400953</i>	EMAIL <i>lize@lizemalan.co.za</i>
SIGNATURE 	DATE <i>25 NOVEMBER 2021</i>

F. SUBMISSION FEE: R800.00 (subject to annual increment on the 1 April)

The submission fee is payable to the **KZN Amafa and Research Institute** by bank deposit/internet banking (EFT) and proof of payment must be submitted with the application.

ACCOUNT DETAILS:

ABSA BANK: Branch: ULUNDI Bank Code: 630330

Account in the name of the **KZN Amafa and Research Institute**

Account No. 40-5935-6024

USE SAHRIS ID and SHORT TITLE OF DEVELOPMENT AS REFERENCE

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)

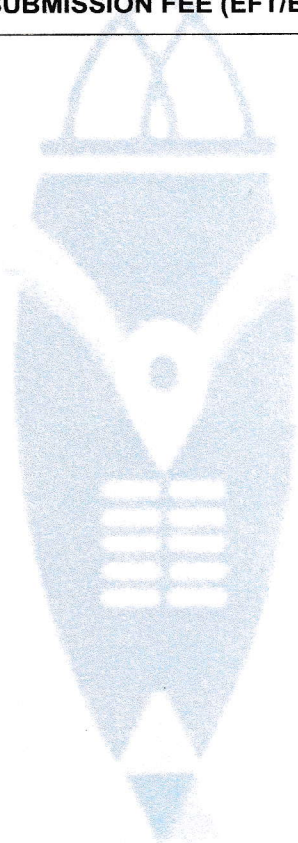
Name _____

Telephone _____ Fax/Email _____

H. CHECKLIST OF DOCUMENTATION SUBMITTED

HARD COPY APPLICATION FORM (COMPLETED & SIGNED BY OWNER, DEVELOPER & CONSULTANT) <i>POA FROM OWNER</i>	✓
APPLICATION FORM UPLOADED TO SAHRIS	✓
MOTIVATION	
SITE PHOTOGRAPHS/CASE IMAGES	✓
1:50 000 MAP & SATELLITE AERIAL VIEW	✓
KML FILE MAP	✓
SITE PLAN SHOWING ALL FEATURES & HERITAGE RESOURCES	✓

DEVELOPMENT PLAN SHOWING ALL FEATURES & HERITAGE RESOURCES SUPERIMPOSED THEREON	✓
PROOF OF PROFESSIONAL ACCREDITATION (e.g. copy of accreditation card/certificate)	✓
PROOF OF PUBLIC PARTICIPATION	N/A
ENVIRONMENTAL IMPACT ASSESSMENT	N/A
HERITAGE IMPACT ASSESSMENT	N/A
CONSENT LETTER FROM THE OWNER	✓
LETTER OF APPOINTMENT OF CONSULTANT	✓
PROOF OF PAYMENT OF SUBMISSION FEE (EFT/BANK DEP/AMAFA CARD)	✓



KWAZULU-NATAL
AMAFA
 & RESEARCH INSTITUTE