

B. PROPERTY DESCRIPTION:

1. Name of property: T 8518/90 Title Deed No. REM OF ERP 1213 DURBAN

2. Erf/Lot/Farm No: 15 EUBENSTH AVE

Street Address: ELITERKWINI

Local Municipality: ELITERKWINI

District Municipality: MAISONETTE

3. Current zoning: RESIDENTIAL Present use 650

A. DECLARATION BY OWNER

I, _____

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

Signature _____

Place _____

Date _____

(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)

ALL APPLICATION FORMS, DEVELOPMENT PROPOSALS, PHOTOGRAPHS, MOTIVATION, AND PROOF OF PAYMENT ARE TO BE DELIVERED TO: Amata akwazulu-Natali, 195 LANGALBALELE (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)

PLEASE NOTE

IT IS AN OFFENCE IN TERMS OF THE KWAZULU-NATAL 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

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

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 A (STRUCTURES)


Ref: _____

Date received _____

Application No _____ not approved _____

Date of permit/notification _____

Permit No _____



REGISTRATION OF INDUSTRY REGULATORY BODY:	
CELL	QUALIFICATIONS
TEL	FAX
POSTAL ADDRESS	
POSTAL ADDRESS	POST CODE
NAME	NOT APPOINTED

1. CONTRACTOR (the person who will do the work)

E. CONTACT DETAILS

ALL WORK IS TO THE INTERIOR OF THE BUILDING, EXCEPT FOR THE PARTIAL ~~ENCLOSURE~~ ENCLOSURE OF THE SIDE VERANDAH FOR A BATHROOM. WINDOW CHANGES TO NEW SCULLEY & BATH ROOM (ADDITION APR. 1990) AND OLD WINDOW FROM THE CURRENT DINING TO BE BUILT INTO NEW DINING ROOM MAN.

1. Detail the alterations/additions/restorations proposed (Briefly outline the proposal)

THE HOUSE HAS BEEN IN THE DISASSEMBLY FAMILY FOR 3 GENERATIONS. THE NEW GENERATION WISHES TO UPGRADE & MODERNIZE THE INTERIOR

2. Motivation for proposed work (Please motivate fully - on a separate sheet if necessary)

<input checked="" type="checkbox"/>	OTHER		CHANGED USE		EXTENSION
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ADDITION

<input checked="" type="checkbox"/>	OTHER		MAINTENANCE		CONDITION
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ALTERATION

	OTHER		HEALTH REASONS		CONDITION
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DEMOLITION

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

D. PROPOSED WORK

NEIGHBOUR TO RIGHT:- MADE ADDITIONS
 PREVIOUS DESIGNER HOUSE IS NON EXISTANT.

NEIGHBOUR TO LEFT:- HOUSE IS STILL
 AS DESIGN

4. Urban Setting & Adjoining Properties:

References

THE HOUSE IS A TYPICAL SPRAWLING
 BUNGALOW THAT HAS TWO MAIN
 ADDITIONS & ALTERATIONS

3. Architectural Significance:

References

ANY RECORDS

2. Historical Significance:

NONE IS NOTED IN

1. Original date of construction

STAMP NUMBER F 1918

C. SIGNIFICANCE: