

AMAFA AND RESEARCH INSTITUTE

THE KZN PROVINCIAL HERITAGE RESOURCES AUTHORITY

Ref:	
Date Received:	
Application no:	
Approved:	Not Approved:
Date of Permit:	
Permit No:	

APPLICATION IN TERMS OF SECTION 37(1)(a) OF THE KWAZULU-NATAL AMAFA AND RESEARCH INSTITUTE ACT (5/2018,) FOR A PERMIT TO DEMOLISH, ALTER OR ADD TO A STRUCTURE WHICH IS, OR WHICH MAY REASONABLY BE EXPECTED TO BE OLDER THAN 60 YEARS

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 Sections 42-46 (Heritage Landmarks). Form H(a) must be used for applications for alterations to memorials. Form I must be used if work has commenced/ been completed without a permit

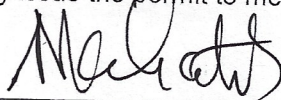
NB: IT IS AN OFFENCE IN TERMS OF THE KWAZULU-NATAL AMAFA AND RESEARCH INSTITUTE ACT (5/2018) TO MAKE ANY FALSE STATEMENT OR FAIL TO PROVIDE REQUIRED INFORMATION IN THIS APPLICATION (Consult the attached guidelines before completing this form)

ALL APPLICATION FORMS, REQUIRED SUPPORTING DOCUMENTATION (as per attached guidelines), AND PROOF OF PAYMENT must be delivered to: KWAZULU-NATAL AMAFA AND RESEARCH INSTITUTE, 195 LANGALIBALELE STREET, PIETERMARITZBURG, 3201 OR BOX 2685 PIETERMARITZBURG 3200. Alternatively, email all documents to beadmin@amafapmb.co.za

A. DECLARATION BY OWNER

I, BRIGHT THOUGHTS INVESTMENTS (PTY) LTD.

(full names of owner/person authorized to sign) undertake strictly to observe the terms, conditions, restrictions, by-laws and directions under which the KWAZULU-NATAL AMAFA AND RESEARCH INSTITUTE may issue the permit to me.

Signature 

Place _____ Date 04.08.2022

(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:

Name of property:	Title Deed No.
Erf/Lot/Farm No: <u>REM OF ERF 756 OF DURBAN</u>	GPS Co-ordinates:
Street Address: <u>319 LIJAN NGOTI ROAD, WINDERMERE, DURBAN</u>	
Local Municipality <u>ETHEKWINI MUNICIPALITY</u>	District Municipality <u>CENTRAL ENTITY</u>
Current zoning <u>RESIDENTIAL-USE AS OFFICE UNDER SPECIAL CONSENT.</u>	Present use <u>OFFICE</u>

C. SIGNIFICANCE:

1.	Original date of construction	1891
2.	Historical Significance:	THE ORIGINAL PLANS WERE FOR A 3 BEDROOM HOUSE WITH A WRAP-AROUND STOEP ON THE EAST & NORTH SIDES. - 1931 - A TANDEM GARAGE WAS ADDED ON THE NORTH SIDE OF THE SITE. 1933 - THE NORTH SIDE OF THE STOEP WAS ENCLOSED AND INCORPORATE INTO THE MAIN DWELLING WITH LITTLE CHANGED TO THE EXTERNAL FACADE OF THE STRUCTURE. 2005 - CONVERSION TO OFFICES WITH AN ADDITION TO THE WEST SIDE & A NEW BOUNDARY WALL ON THE EAST SIDE & A RETAINING WALL ON THE WEST SIDE.
3.	Architectural Significance:	SIGNIFICANT IN THIS STRUCTURE IS THE CONSTRUCTION DATE. THE STYLE OF THE BUILDING HAS NOT CHANGED DRASTICALLY UP UNTIL THE 1933 ADDITION. THERE WERE MAJOR CHANGES DURING THE 2005 ADDITION. THE ROOF SHEETING & MOST OF THE WINDOW FRAMES WERE ALSO CHANGED.
	References	

4.	Urban Setting & Adjoining Properties:
	THE ADJOINING LEFT PROPERTY IS A RESIDENTIAL BLOCK. & ON THE RIGHT IS THE POLICE-DETECTIVE UNIT FOR BEREA. (THE RIGHT NEIGHBOUR IS ALSO QUITE FAR OFF & DOESN'T READ IN A CONTINUOUS FLOW DUE TO THE SHAPE OF OUR SITE. THE PROPERTIES OPPOSITE ARE ALL SINGLE STOREY DWELLINGS THAT ARE ALSO BEING USED AS OFFICES.
	References

D. PROPOSED WORK

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

DEMOLITION				
CONDITION		HEALTH REASONS		OTHER
ALTERATION				
CONDITION		HEALTH REASONS		OTHER
ADDITION				
CONDITION		HEALTH REASONS		OTHER

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

THE SITE HAS A GENERAL RESIDENTIAL 2 ZONING, THEREBY ALLOWING THE CONSTRUCTION OF MULTIPLE UNITS. THE EXG DWELLING HAS BEEN CONVERTED FOR USE AS OFFICES UNDER A SPECIAL CONSENT APPLICATION. THIS HAS DICTATED THE NUMBER OF PARKING BAYS REQUIRED ON SITE VIZ. 10 BAYS. MY CLIENT HAS RECENTLY PURCHASED THIS PROPERTY (TRANSFER IS IN THE PROCESS OF OCCURRING) FOR USE AS OFFICES. GIVEN THE ZONING MENTIONED ABOVE IT MADE SENSE TO ADD A FLOOR/FIRST STOREY FOR HIS PRIVATE ABODE ON THE SAME PROPERTY. WE COULD NOT EXTEND FURTHER ON THE GROUND - FIRSTLY DUE TO THE COVERAGE REQUIREMENTS & SECONDLY, DUE TO THE PARKING REQUIREMENTS.

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

- WE HOPE/PROPOSE THE FOLLOWING :-
- THE EXG TIMBER (SUSPENDED) TO BE REMOVED & REPLACED BY A SUSPENDED CONCRETE FLOOR.
 - THE EXISTING TIMBER WINDOWS TO BE REPLACED BY ALUMINIUM FRAMED WINDOWS.
 - THE ORIGINAL PORCH WITH ITS COLUMNS & ENTRANCE STAIRWAY TO BE MAINTAINED
 - THE MAIN ENTRANCE DOOR & SIDELIGHTS TO BE MAINTAINED.
 - THE EXISTING KITCHEN AND PART OF THE ADJACENT OFFICE SPACE IS TO BE USED FOR THE MAIN STAIRCASE LINKING THE EXISTING GROUND STOREY (OFFICE) TO THE PROPOSED FIRST STOREY (DWELLING)

E. CONTACT DETAILS

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

NAME		NOT APPOINTED AS YET.	
POSTAL ADDRESS			
			POST CODE
TEL	FAX/EMAIL		
CELL	QUALIFICATIONS		
REGISTRATION OF INDUSTRY REGULATORY BODY:			

2. ARCHITECT/ARCHITECTURAL TECHNOLOGIST/DESIGNER

NAME N. SHAMOUN	
POSTAL ADDRESS 137 RILEY ROAD, ESSENWOOD, DURBAN	
TEL	POST CODE 4001
FAX/EMAIL nazleen@designdrawing.co.za	
CELL 083 2980646	SACAP REG. NO.
Author's Drawing Nos. n22-12 wdot, n22-12 wd02	
SIGNATURE <i>Shamoun</i>	DATE 04.08.2022

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

NAME BRIGHT THOUGHTS INVESTMENTS (PTY) LTD.	
POSTAL ADDRESS 482 PETER MOKABA RIDGE, ESSENWOOD, DURBAN	
TEL 083 5777865	POST CODE 4001
FAX/EMAIL asif@asiflatiblaw.co.za	

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 ASIF LATIB	
TEL 083 5777865	FAX/EMAIL asif@asiflatiblaw.co.za

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

The submission fee is payable to the KwaZulu-Natal 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 AMAFA AKWAZULU-NATALI

Account No. 40-5935-6024

USE STREET ADDRESS/FARM NAME 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 _____

H. CHECKLIST OF SUPPORTING DOCUMENTATION (*ref to guidelines)

YES NO

APPLICATION FORM (COMPLETED & SIGNED BY OWNER & PLANS AUTHOR)	YES	NO
MOTIVATION	✓	
PHOTOGRAPHS*	✓	
ORIGINAL DRAWINGS	✓	
PLANS (X2 SETS when in hard copy) - NUMBERED AND COLOURED *	✓	
PROOF OF PROFESSIONAL ACCREDITATION (e.g. copy of accreditation card)	✓	
PROOF OF PUBLIC PARTICIPATION*	✓	
PAYMENT/PROOF OF PAYMENT (use street address as reference)	✓	

WE HAVE OBTAINED NEIGHBOURS CONTENT FOR THE LAND USE MANAGEMENT (LUMS) DEPARTMENT OF ETHEKWINI MUNICIPALITY FOR THE RELAXATION OF THE BUILDING LINE & SIDE SPACES.