



## BUILDING CONTROL

### APPLICATION IN TERMS OF SECTION 4(2) OF ACT 103 OF 1977 FOR BUILDING PLAN APPROVAL

I/We, the undersigned applicant, herewith submit for consideration plans depicting building works which I desire to carry out on the undermentioned site. I undertake to execute these works strictly in accordance with such plans and with the relevant regulations made under and by virtue of the national building regulations and building standards (Act 103 of 1977), and undertake not to commence with construction activities prior to approval.

**PLAN CATEGORY:** STANDARD APPLICATION ☒ MINOR WORKS APPLICATION ☐ GOVERNMENT ☐

#### SECTION A: REGISTERED OWNER

**REGISTERED OWNER:** CORRESPONDENCE TO - OWNER ☒ ARCHITECTURAL PROFESSIONAL ☒

FULL NAMES: Fraser Family Trust SURNAME: -

ID NO: Reg No. IIT237/1996 (E) COMPANY: -

CONTACT NO: 082 708 6480 VAT NO: -

EMAIL: rob@stucken.co.za ADDRESS: 21 Andries Pretorius St, Sedgefield, Western Cape

POSTAL CODE: 6573

To be completed for all buildings other than residential buildings. (Tick whichever is applicable), the undersigned, declare this building to be a  
**NON-SMOKE FREE** ☐ **SMOKE FREE** ☐ building in terms of Act 12 of 1999 read together with Government Notice R975 of 29 September 2000

#### PLEASE FULLY COMPLETE THE BELOW (Please (x) the appropriate block):

Is the original building older than **60 years** ? ☐ Y ☒ N

Are any council infrastructure affected?

☐ Y ☒ N

Are any trees affected by the work?

☐ Y ☒ N

**Oscæ Certificate** required as per areas prescribed in the Environment Conservation Act 73 of 1989?

☐ Y ☒ N

Is any underground municipal electrical connection affected or any electrical overhead wire within a radius of 3m from proposed work?

☐ Y ☒ N

Plans are compliant with the relevant Architectural Design manual and Home Owner's Association/Body Corporate constitution;

☐ Y ☒ N

All affected indigenous forest/thicket/trees occurring on, or in the immediate vicinity of, the property/in the road reserve abutting the property have been indicated on the plans and discussed with Department of Agriculture Forestry and Fisheries?

☐ Y ☒ N

Are all affected servitudes, services, street furniture etc. indicated on plans

☒ Y ☐ N

I am the registered owner of the following property; or that I have the authority of the registered owner/s of the following property in terms of a RESOLUTION of the directors / members / trustees of the owner/s (A certified copy of the Resolution must be attached). That I am fully aware of the contents of this application. That I appoint the person identified below as my **Legal Agent**, who has the required qualification, to submit the application on my behalf. I accept full responsibility for all actions carried out by my agent on my behalf. That I accept communication by email as a legally valid and binding method of communication.

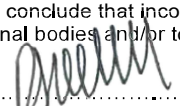
I, the **Registered Owner**, hereby declare that I have personally checked the **Title Deeds** or any other documents relevant to the property concerned and declare the proposed work is not contrary to any restrictive conditions or servitudes applicable thereto and in the event of such contraventions will bear the sole responsibility for rectifying aforesaid contraventions. Verify and confirm that all existing structures and their current uses have been indicated on the plans.

I hereby undertake to complete the building work in accordance with the approved building plans including all endorsements and attachments and I am fully aware of the fact that a **Certificate of Occupancy** must be obtained from the Municipality prior to **OCCUPANCY** of the premises.

I nominate: Dewald Potgieter (Blackhound Architecture & Rendering) to be my lawful representative and to act

on my behalf in the submission of this application in terms Section 4 (2) of Act 103 of 1977 and to do all things lawfully required by the Local Authority to ensure this application complies with the provision of the National Building Regulations and Building Standards Act No. 103 of 1977 and any other applicable law. I certify that the answers on this application are to the best of my knowledge, correct.

Should any of the above be found to be incorrect, the application will be rejected and a new application will have to be made. Notwithstanding the aforesaid, should Council have reason to conclude that incorrect information has been knowingly provided, the Council reserves the right to direct a complaint with the relevant professional bodies and/or to institute criminal proceedings for fraud.

REGISTERED OWNERS SIGNATURE: 

SIGN HERE

DATE: 2 0 2 6 0 7 1 7

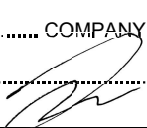


## SECTION B: ARCHITECTURAL PROFESSIONAL

FULL NAMES: Dewald Mathys Potgieter SACAP REG. NO: PAT 30442820 REG. VALID ☒ ☐ N

ADDRESS: Unit 10, 19 Cactus rd, Fairview, PE

POSTAL CODE: 6070 COMPANY: Blackhound Architecture & Rendering EMAIL: dewald@blackhound.co.za

SIGNATURE:  CONTACT NO: 0724186867

## SECTION C: LOCALITY AND DESCRIPTION

ERF/FARM NO: Erf 1609 STREET NAME & NO: 21 Andries Pretorius St.

SUBURB: Sedgfield DEVELOPMENT: Residential

TOWN/AREA: Sedgfield ZONING: Single Residential Zone (Sedgfield)

OCCUPANCY CLASSIFICATION (REGULATION A20): H4

NEW BUILDING (TYPE): N/A

ALTERATIONS / ADDITIONS (TYPE): Brick and mortar addition

NATURE OF MINOR WORK: N/A

ESTIMATED COST OF WORK: R 1 000 000 EXISTING AREA: 192 m<sup>2</sup> NEW AREA: 104 m<sup>2</sup>

TOTAL AREA: 296 m<sup>2</sup> EXISTING FOOTPRINT: 142 m<sup>2</sup> NEW FOOTPRINT: 104 m<sup>2</sup>

NEW COVERAGE (E/GX100): 11.2 % SITE AREA: 929.29 m<sup>2</sup> AREA CARPORT: N/A

SWIMMING POOL AREA: N/A m<sup>2</sup> WALL LENGHT: N/A mm WALL HEIGHT: N/A mm

### THE FOLLOWING MUST BE SUBMITTED WITH THIS APPLICATION (Please tick the appropriate block)

|                                                                                                                                                               |                                     |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|
| TOWN PLANNING APPROVALS / COMPLIANCE eg. Departure, Consent Use, SDP, Rezoning etc. (if applicable)                                                           | <input type="checkbox"/>            |
| A COPY OF DEMOLITION ORDER (if applicable)                                                                                                                    | <input type="checkbox"/>            |
| APPROVAL/COMMENTS FROM SAHRA/HERITAGE WESTERN CAPE (if applicable)                                                                                            | <input type="checkbox"/>            |
| ALL BUILDING PLANS TO BE SIGNED BY OWNER(S) AND ARCHITECTURAL PROFESSIONAL                                                                                    | <input checked="" type="checkbox"/> |
| COUNCIL APPROVED ENCROACHMENT AGREEMENTS (if applicable)                                                                                                      | <input type="checkbox"/>            |
| PROOF OF COMPLIANCE WITH DEVELOPMENT CONDITIONS AS STIPULATED BY COUNCIL                                                                                      | <input type="checkbox"/>            |
| A LETTER OF SUPPORT FROM THE DEPARTMENT OF AGRICULTURE, FORESTRY AND FISHERIES IF THERE IS ANY THICKET, FOREST OR PROTECTED TREE ON THE SITE. (if applicable) | <input type="checkbox"/>            |
| KNYSNA MUNICIPALITY AESTHETICS & HERITAGE REVIEW COMMITTEE APPROVAL (if applicable)                                                                           | <input type="checkbox"/>            |
| HOME OWNER'S ASSOCIATION/DESIGN REVIEW PANEL'S STAMPS AND ENDORSEMENT SIGNATURES IN BLUE INK (if applicable)                                                  | <input type="checkbox"/>            |
| OSCAER CERTIFICATE IN AREAS AS PRESCRIBED IN THE ENVIRONMENT CONSERVATION ACT 73 OF 1989. (if applicable)                                                     | <input type="checkbox"/>            |
| COPY OF TITLE DEED                                                                                                                                            | <input checked="" type="checkbox"/> |
| ERF DIAGRAM/ SURVEYOR GENERAL DIAGRAM                                                                                                                         | <input checked="" type="checkbox"/> |
| HSS DOCUMENT (if applicable)                                                                                                                                  | <input type="checkbox"/>            |
| POWER OF ATTORNEY TO SUBMIT ON BEHALF OF REGISTERED OWNER                                                                                                     | <input checked="" type="checkbox"/> |
| COPIES OF COUNCIL RESOLUTIONS AND CONDITIONS (if applicable)                                                                                                  | <input checked="" type="checkbox"/> |
| CORPORATE APPLICATIONS ARE TO BE ACCOMPANIED BY A CORPORATE AUTHORISATION RESOLUTION.                                                                         | <input checked="" type="checkbox"/> |
| BUILDING PLANS COLOURED AS PER ACT 103 OF 1977                                                                                                                | <input checked="" type="checkbox"/> |
| SANS FORM 1 & 2 - FULLY COMPLETED AND SIGNED                                                                                                                  | <input checked="" type="checkbox"/> |
| SANS FORM 2 - FULLY COMPLETED AND SIGNED (Competent Person appointment(s) eg Engineer etc. if applicable)                                                     | <input checked="" type="checkbox"/> |
| SACAP REGISTRATION CERTIFICATE                                                                                                                                | <input checked="" type="checkbox"/> |
| SACAP - ARCHITECTURAL COMPLIANCE CERTIFICATE                                                                                                                  | <input checked="" type="checkbox"/> |
| SWIMMING POOL AND SWIMMING BATHS APPLICATION FORM (if applicable)                                                                                             | <input type="checkbox"/>            |
| DRAINAGE LAYOUT AND SECTION (where applicable)                                                                                                                | <input checked="" type="checkbox"/> |
| REGULATION XA REQUIREMENTS AS PER SANS 10400 (PLANS & CALCULATIONS):                                                                                          |                                     |
| ENERGY CONSUMPTION AND DEMAND                                                                                                                                 | <input checked="" type="checkbox"/> |
| DOOR and WINDOWS SCHEDULE                                                                                                                                     | <input checked="" type="checkbox"/> |
| WATER RETICULATION                                                                                                                                            | <input checked="" type="checkbox"/> |
| FENESTRATION                                                                                                                                                  | <input checked="" type="checkbox"/> |
| SANS FORM 2 (if applicable)                                                                                                                                   | <input type="checkbox"/>            |
| ADDITIONAL INFORMATION                                                                                                                                        |                                     |
| STRUCTURAL DRAWINGS (if applicable)                                                                                                                           | <input type="checkbox"/>            |
| FIRE PLAN (if applicable)                                                                                                                                     | <input type="checkbox"/>            |
| SANS FORM 3 (if applicable)                                                                                                                                   | <input type="checkbox"/>            |
| SANS FORM 4 (if applicable)                                                                                                                                   | <input type="checkbox"/>            |
| CONTOUR PLAN (where applicable)                                                                                                                               | <input type="checkbox"/>            |

NOTE: Please note that the municipality reserves the right to ask for any additional documentation, as it may be necessary to process this application. This application will only be valid on full payment of fees and processed on proof of receipt not on notice of payment. Corporate applications are to be accompanied by a corporate authorisation resolution.

For queries you may contact the Plans Receiver at the Building Control Office at Tel: (044) 302 6533 or (044) 302 6325