



Meld asb. in u antwoord / In your reply please quote

Verwysing / Reference: BUILDING PLAN APPLICATION FORM

Navrae / Enquiries: BUILDING CONTROL

MUNISIPALITEIT MUNICIPALITY UMASIPALA

(027) 482 8000

(027) 482 1933

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CLANWILLIAM

8135

APPLICATION IN TERMS OF SECTION 4(2) OF THE ACT NO 103 OF 1977

I, the registered owner of the undermentioned property, hereby apply, in terms of Section 4(2)/ Regulation A1(5) of Act No 103 of 1977 for approval to undertake building work, as depicted on the building plans(s) submitted herewith, on the undermentioned property. I herewith certify that all the answers given by me on the following pages are correct to the best of my knowledge.

SECTION A:

OWNER: _____ DATE: ____/____/20____

COMPANY REGISTRATION NO(IF APPLICABLE): _____

POSTAL ADDRESS: _____
_____ POSTAL CODE: _____

CELL NUMBER: _____ ID NUMBER: _____

TEL NUMBER : _____ TEL WORK: _____

CORRESPONDENCE ADDRESS: _____
_____ POSTAL CODE: _____

EMAIL ADDRESS: _____ FAX NUMBER: _____

AGENT/CONTACT PERSON: _____ TEL NUMBER: _____

LOCALITY OF PROPERTY:

STAND/FARM NUMBER: _____ AREA(m²): _____ ZONING: _____

SECTION B:

DESCRIPTION OF BUILDING WORK: _____

AREA(m²) OF NEW WORK: _____ AREA(m²) OF CARPORT: _____ BOUNDARY WALL (m): _____

TOTAL COST OF NEW WORK (R): _____

ARE ANY TELEPHONE POLES AFFECTED: YES/NO ARE ANY TREES AFFECTED BY THE PROPOSED WORK: YES/NO

IS THE ORIGINAL BUILDING OLDER THAN 60 YEARS OLD: YES NO

IS ANY UNDERGROUND MUNICIPAL ELECTRICAL CONNECTION OR ANY ELECTRICAL OVERHEAD WIRE WITHIN A RADIUS OF 3m FROM THE PROPOSED WORK AFFECTED: YES NO

Rig alle korrespondensie aan die Munisipale Bestuurder / Address all correspondence to the Municipal Manager

Clanwilliam Tel: (027) 482 8000 | Citrusdal Tel: (022) 921 2181 | Lambert's Bay Tel: (027) 432 1112

Elands Bay Tel: (022) 972 1745 | Graafwater Tel: (027) 422 1108 | Algeria Tel: (027) 482 2082

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 THAT THE PROPOSED WORK IS NOT CONTRARY TO ANY RESTRICTIVE CONDITIONS OR SERVITUDES APPLICABLE THERETO, AND IN THE EVENT OF SUCH CONTRAVENTIONS WILL BEAR SOLE RESPONSIBILITY FOR RECTIFYING AFORESAID CONTRAVENTIONS. I HEREBY UNDERTAKE TO COMPLETE THE BUILDING WORK IN ACCORDANCE WITH THE APPROVED BUILDING PLANS, INCLUDING ALL ENDORSEMENTS AND ATTACHMENTS AND THE NATIONAL BUILDING REGULATIONS. I AM FULLY AWARE OF THE FACT THAT A CERTIFICATE OF OCCUPANCY MUST BE OBTAINED FROM THE MUNICIPALITY PRIOR TO THE PREMISES BEING OCCUPIED

SIGNATURE OF OWNER: _____

DATE : ____/____/20____

SECTION C

BUILDING PLAN PROPOSAL DOCUMENTATION (UNDERLINE)

1. THREE (3) COLOUR COPIES OF BUILDING PLANS (A3 MINIMUM)	YES	NO
2. TITLE DEED	YES	NO
3. LOCALITY PLAN	YES	NO
4. SANS 10400-A FORM 1 AND 2	YES	NO
5. SACAP REGISTRATION OF PROFESSIONAL	YES	NO
6. A19 INSPECTION CERTIFICATE FOR ENGINEERS DRAWINGS	YES	NO
7. FIRE PLAN/EVACUATION PLAN (IF APPLICABLE)	YES	NO
8. SEPTIC TANK/CONCERNANCY TANK DESIGN (IF APPLICABLE)	YES	NO
9. BUILDING PLAN SUBMITTAL FORM	YES	NO
10. APPLICATION FOR BUILDING PLAN APPROVAL	YES	NO

NOTE: BUILDING PLAN APPROVAL OR REFUSAL CAN TAKE UP TO 30 DAYS WHERE THE ARCHITECTURAL AREA OF THE BUILDING IS LESS THAN 500m² AND UP TO 60 DAYS WHERE THE ARCHITECTURAL AREA OF THE BUILDING IS MORE THAN 500m² AFTER RECEIPT OF THE BUILDING PLAN APPLICATION. NBR 103/1977 SECTION 7(1)

SECTION D

FOR OFFICE USE

DATE SUBMITTED : ____/____/20____

DATE PAID: : ____/____/20____

BUILDING PLAN FEE (R) : _____

RECEIPT NUMBER: _____

LATE SUBMISSION FEE (R) : _____

RECEIPT NUMBER: _____

OCCUPATION CERTIFICATE : _____

RECEIPT NUMBER: _____

DEMOLITION CERTIFICATE : _____

RECEIPT NUMBER: _____

TOTAL FEE (R) : _____

BANKING DETAILS:

ABSA; BRANCH CODE: 632005; ACCOUNT HOLDER: CEDERBERG MUNICIPALITY; ACC. NO.: 4053578397

BTW NO : 4000846164 : CEDERBERG MUNICIPALITY - REF NO: 02-6695-1715-00, ERF, TOWN

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