

**KWAZULU-NATAL****AMAFA AND RESEARCH INSTITUTE**

THE KZN PROVINCIAL HERITAGE RESOURCES  
AUTHORITY

**APPLICATION FORM C**

Ref:
Date Received:
Application no:
Approved: <span style="float: right;">Not Approved:</span>
Date of Permit:
Permit No:

**APPLICATION IN TERMS OF SECTION 39 (1) OF THE KWAZULU-NATAL  
AMAFA AND RESEARCH INSTITUTE ACT (5/2018) FOR A PERMIT TO DAMAGE,  
ALTER, EXHUME, INUNDATE, REMOVE FROM ITS ORIGINAL POSITION OR  
OTHERWISE DISTURB A GRAVE/S OLDER THAN 60 YEARS, LOCATED IN A  
INFORMAL/PRIVATE BURIAL GROUND (ARCHAEOLOGICAL GRAVES)**

THE ONUS IS ON THE APPLICANT TO ENSURE THAT THE CURRENT APPLICATION FORM IS USED. APPLICATIONS ON NON-COMPLIANT FORMS WILL NOT BE PROCESSED  
Form B must be used for the graves of victims of conflict. 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. See guidelines for methods of electronic submission.**

**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 the KWAZULU-NATAL AMAFA AND RESEARCH INSTITUTE 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)**

**B. PROPERTY DESCRIPTION:**

Name of property:	Title Deed No.
Erf/Lot/Farm No:	GPS Co-ordinates
Street Address:	
Local Municipality	District Municipality
Traditional Authority Area	
Current zoning	Present use

**C. SIGNIFICANCE:**

**1. Status of the Site:**

Connected to homestead or site of previous homestead		Connected to spiritual site		Site earmarked for development (rescue)		Other	
--	--	-----------------------------	--	---	--	-------	--

<b>2. Historical/Military Significance: Original date of grave:</b>
References
<b>3. Archaeological Significance:</b>
References
<b>4. Association with a Rock Art site:</b>
References

**D. PROPOSED WORK**

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

Damage		Alteration	
Exhumation		Removal from original position	

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

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

<b>4. New Location</b> (in the case of removal from original position)	
Name of property:	Title Deed No.
Erf/Lot/Farm No:	GPS Co-ordinates
Street Address:	
Local Municipality	District Municipality
Traditional Authority Area	
Current zoning	Present use

**E. 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. Every effort must be made to contact the descendants of the deceased. Local Historical/Heritage Societies and Museums must be consulted. Approval from the Local Authority must be obtained.

Name	
Tel	Fax/email
Name	
Tel	Fax/email
Name	
Tel	Fax/email
Name	
Tel	Fax/email
Name	
Tel	Fax/email

**F. CONTACT DETAILS**

<b>1. CONTRACTOR/FUNERAL DIRECTOR:</b>	
Name	
Address	
	Postal Code
Telephone	Fax
Qualifications	
Membership of Recognised Professional/Technical Bodies	
Signature:	
<b>2. HERITAGE PRACTITIONER:</b>	
Name	
Address	
	Postal Code
Telephone	Fax
Qualifications	
Membership of Recognised Professional/Technical Bodies	
Signature:	
<b>3. OWNER OF PROPERTY (Owner or delegated person to sign on the front of this form)</b>	
NAME	
POSTAL ADDRESS	
	POST CODE
TEL	FAX/EMAIL
<b>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)</b>	
NAME	
TEL	FAX/EMAIL

**G. 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 **AMAF A AKWAZULU-NATALI**

Account No. 40-5935-6024

**USE STREET ADDRESS/FARM NAME OR NAME OF OCCUPANT AS REFERENCE**

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

APPLICATION FORM (COMPLETED & SIGNED BY OWNER & HERITAGE PRACTITIONER)	
MOTIVATION	
PHOTOGRAPHS*	
1:50 000 MAP & SATELLITE AERIAL VIEW	
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)	

# KWAZULU-NATAL AMAFA AND RESEARCH INSTITUTE

THE KZN PROVINCIAL HERITAGE RESOURCES AUTHORITY  
(accredited in terms of the National Heritage Resources Act)

## **GUIDELINES FOR THE PREPARATION OF APPLICATIONS IN TERMS OF SECTION 39(1) OF THE KWAZULU-NATAL AMAFA AND RESEARCH INSTITUTE ACT (5/2018) FOR PERMITS TO DAMAGE, ALTER, EXHUME, INUNDATE, REMOVE FROM ITS ORIGINAL POSITION OR OTHERWISE DISTURB A GRAVE/S OLDER THAN 60 YEARS, LOCATED IN AN INFORMAL/PRIVATE BURIAL GROUND (ARCHAEOLOGICAL GRAVES).**

Please detach from the form before submission

### **APPLICATION FORMS**

All applications must be made on the relevant official application form and must be accompanied by the relevant supporting documentation.

**Form H** must be used for graves that are proclaimed or on sites protected as Heritage Landmarks (previously National Monuments) and graves listed in the Heritage Register.

**Form H(a)** must be used if the grave contains a memorial.

**Form I** must be used for approval of work undertaken on a building over 60 years of age at the time the work was started/completed prior to approval, irrespective of who undertook the work.

**A. DECLARATION:** The owner must sign the form and any accompanying documentation and must consent to submissions by a third party/agent.

**B. PROPERTY:** Include the name of the property where applicable: e.g. the local village name. Where applicable the street address is the key information and is used as a tracking device in the filing system for those graves that have memorials attached to them. Alternatively, the farm/Trust Reserve name is the key information. Directions to the site should be supplied in the report.

**GPS CO-ORDINATES:** The KZN Amafa and Research Institute only accepts GPS co-ordinates in decimal format. Other formats may be provided in addition to the decimal format but not to the exclusion of the decimal format.

### **C. SIGNIFICANCE:**

1. Status of the grave: tick the applicable box.
2. Historical/Military Significance: Original date of the grave: this will confirm the event attached to the grave. Also give a brief history of the occupant and the event that led to the death.
3. Archaeological Significance: estimate the date to place the grave or place it in its archaeological context.
4. Association with a Rock Art Site: briefly describe its association with the rock art site.

**D. PROPOSED WORK:** Motivate and give full details of the proposed work. Details must be given of the work to be carried out – do not merely refer to the plans/reports submitted.

**E. 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. Every effort must be made to ensure that descendants of the deceased are contacted and their approval obtained. Proof of the consultation must be submitted with the application.

Local Historical/Heritage Societies and Museums must be consulted where possible.

Approval from the Local Authority must be obtained.

**F. CONTACT DETAILS:** the contractor's details can be left out if unknown but will need to be confirmed prior to the work being undertaken. All other fields must be completed. **THE OWNERS MUST SIGN THE APPLICATION FORMS!! PERMITS ARE NOT TRANSFERABLE**

**G. A SUBMISSION FEE** – a processing fee determined by the Council of the Institute in terms of Section 24(1)(e)(i) is payable on submission of all applications. The application will not be registered as submitted if the proof of payment is not attached.

**1. SUPPORTING DOCUMENTATION: SUPPORTING DOCUMENTATION: Only Heritage Practitioners registered with the Institute may compile the application and related supporting documentation. Permits will require their overseeing the work. Where architectural drawings are required, they must be authored by SACAP registered professionals.**

**1.1. HERITAGE PRACTITIONER'S REPORT:** The report must provide background research of the site and make recommendations as to its significance and research potential. It must assess all heritage resources found in the area that could relate to the site that will be impacted on. The report must meet standards acceptable to both ASAPA and SAHRA. GPS CO-ORDINATES FOR ALL THE HERITAGE RESOURCES IMPACTED ON MUST BE INCLUDED IN THE REPORT. The KZN Amafa and Research Institute only accepts GPS co-ordinates in decimal format. Other formats may be provided in addition to the decimal format but not to the exclusion of the decimal format.

**1.2. PHOTOGRAPHS OF EXISTING FEATURES, STRUCTURE/S ARCHAEOLOGICAL REMAINS, GRAVES, ETC AND THEIR SURROUNDINGS:**

Photographs that clearly illustrate the features of the affected grave and site relevant to the application must be submitted.

**1.3. SITE PLAN:** The site plan must be drawn in accordance with the approved surveyor's diagram of the site and must show: scale; the north point; the erf/property/farm number of the site; the location of the site and any structures on it in relation to surrounding roads, buildings and other features; existing buildings, and structures on the site (coloured grey or uncoloured); and the extent of the declared area (in the case of a proclaimed property). Heritage resources must be clearly marked on the plan.

**1.4. KML MAP FILE AND AERIAL OR SATELLITE VIEWS OF THE SITE** that clearly illustrate the features of the affected site relevant to the application must be submitted.

**1.5. 1:50 000 MAP OF THE SITE** that clearly illustrates the features of the affected site relevant to the application must be submitted

**2. SUBMISSION OF APPLICATIONS:** Application forms can be downloaded from [www.heritagekzn.co.za](http://www.heritagekzn.co.za) – look under the “Permits” tab - download forms – Form B. Electronic submissions can be uploaded to the sahris system operated by the South African Heritage Resources Agency [www.sahra.org.za](http://www.sahra.org.za). In the case of a failure of the sahris system the application can be emailed to [archaeology@amafapmb.co.za](mailto:archaeology@amafapmb.co.za) and [bernadetp@amafapmb.co.za](mailto:bernadetp@amafapmb.co.za). If the grave contains a memorial the application must be emailed to [beadmin@amafapmb.co.za](mailto:beadmin@amafapmb.co.za) as it will be processed by the Built Environment Section. The application must also be submitted in hard copy delivered to 195 Langalibalele Street, Pietermaritzburg, 3201 OR posted to Box 2685, Pietermaritzburg, 3200. **When submitting on sahris note that you must still check “Permits” under the case type and KZN – Amafa** for the Provincial Heritage Resources Authority.

The applicant is the “owner” and the Assessor is the “Consultant” and the correct fields must be completed. “

The Consent Letters allowing a Consultant to act on behalf of the owner and/or to upload the case to sahris must be placed in the correct boxes which are blocked from public view.

The proof of payment must also be loaded to the designated box to prevent members of the public obtaining banking details, etc from the document.

**3. PROCESSING OF APPLICATIONS:** applications are processed in the order in which they are received, except during the December/January holiday break. The Institute will receipt the application and alert the applicant to any missing information within 2 weeks of submission. Allow 90 days for processing of complex applications as these may be submitted to external reviewers. Lobbying of external reviewers will disqualify the application. Written responses to applications will be uploaded to Sahrís. Telephonic or e-mails enquiries will not be responded to.

**\*PLEASE NOTE: INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED. Allow 90 days from the receipt of all required documentation**