

**EMERGENCY PERMIT APPLICATION**  
**Section 27/ Section 29/Section 31/Section 34**

**EMERGENCY APPLICATIONS ARE ACCEPTED AT THE DISCRETION OF HERITAGE WESTERN CAPE IN TERMS OF REGULATION NO. 3 (8) OF REGULATIONS PUBLISHED ON 29 AUGUST 2003**

**Heritage Western Cape Reference No:**

To be completed by applicant \_\_\_\_\_

FOR OFFICE USE ONLY
GRADING

**PRESCRIBED FEE PAID: PROOF OF PAYMENT**  YES

**DETAILS OF SITE, PLACE OR STRUCTURE**

Physical address of site: \_\_\_\_\_

Erf/Stand/Farm name and number: \_\_\_\_\_

Type of site, place or structure (indicate by means of a cross in the appropriate space(s) below):

- Provincial heritage site (or a previously declared national monument in terms of the National Monuments Act, 1969) or a provisionally protected place (previously a provisionally declared national monument in terms of the National Monuments Act, 1969 (section 27) or a provisionally protected heritage site in terms of Section 29 of the National Heritage Resources Act (1999).
- Structure within a Heritage Area (Section 31)
- Structure older than 60 years (Section 34)

**NAME AND ADDRESS OF APPLICANT/ AUTHORISED AGENT**

Name and Surname: \_\_\_\_\_

Identity number of applicant: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_ Postal code: \_\_\_\_\_

Cellular phone number: \_\_\_\_\_ Alternative phone number: \_\_\_\_\_

E-mail: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

(Applicants/ agents must attach copy of power of attorney)

**REGISTERED OWNER OF PROPERTY:** (if the applicant is not the registered owner of the property; or if the application is made on behalf of the registered owner, a power of attorney must be attached)

Name and Surname: \_\_\_\_\_

Identity number of applicant: \_\_\_\_\_

Address: \_\_\_\_\_ Postal code: \_\_\_\_\_

Cellular phone number: \_\_\_\_\_

E-mail: \_\_\_\_\_

Declaration: I, \_\_\_\_\_ am fully aware of this application and accept its contents and declare that I intend to undertake to the actions as proposed in this application.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**PRIMARY RESPONSIBLE AGENT:** (Depending on the significance of the structure/ site. HWC reserves the right to insist that the person undertaking the work to be performed, has the requisite skills to perform to over see such work)

Name and Surname: \_\_\_\_\_

Identity number of applicant: \_\_\_\_\_

Address: \_\_\_\_\_ Postal code: \_\_\_\_\_

Cellular phone number: \_\_\_\_\_

E-mail: \_\_\_\_\_

Qualifications and/or relevant experience of primary responsible agent:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Will this agent oversee the action to completion:

Yes

No

If not, who will be responsible to oversee the completion of the proposed action:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Declaration: I, \_\_\_\_\_ am fully aware of this application and accept its contents and undertake to submit a close out report to HWC within 30 days of practical completion of the action undertaken.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**NATURE OF EMERGENCY AND DETAIL OF THE ACTION PROPOSED** (Provide a short description of the proposed action which must be supported by accompanying documentation)

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**ILLUSTRATIVE MATERIAL TO BE INCLUDED:**

1. Photographs
2. Drawing reference numbers and dates: (Please list all drawing reference numbers, including revision numbers, and the dates of the drawings.)

Drawing reference number	Date of drawing	Version	Title of drawing

**PLEASE NOTE**

Unless the applicant and the registered owner sign the application form, the form will not be processed by HWC. Dependent on the nature of the emergency, if for any reason the registered owner is unable to sign the application form, the applicant is required to notify HWC and undertake full responsibility for any action arising out of consideration of this application

Applications are considered to be public documents and are open to public scrutiny. Should you wish your application to be kept confidential, please motivate your request on a separate sheet attached to your application form. For applications that are granted confidentiality, this confidentiality will be limited to one year (12 months).

PLEASE ENSURE THAT ALL ADDITIONAL DOCUMENTS REQUIRED ARE ATTACHED TO THIS APPLICATION FORM PRIOR TO SUBMISSION (see *HWC Checklist for Applications*). Please visit [www.hwc.org.za](http://www.hwc.org.za) for more information.

