

**OFFICIAL USE:**

Received by : .....  
Application No: .....  
Receipt No : .....  
Amount : .....  
Date : .....

:

The Municipal Manager  
City of uMhlathuze  
Private Bag X1004  
**RICHARDS BAY**  
3900

Sir,

**APPLICATION IN TERMS OF SECTION 27(1) (b) OF THE UMHLATHUZE SPATIAL PLANNING AND LAND USE MANAGEMENT BYLAW READ IN CONJUNCTION WITH CLAUSES 3.2.1.1.1 AND/OR 6.4.1 OF THE uMHLATHUZE LAND USE SCHEME- PARKING AND/OR LOADING BAY RELAXATION**

PARKING AND/OR RELAXATION APPLICATION FROM:

REQUIRED PARKING I.T.O SCHEME	ACTUAL PROVIDED PARKING I.T.O THE PROPOSED DEVELOPMENT
REQUIRED LOADING BAYS I.T.O SCHEME	ACTUAL PROVIDED LOADING BAYS I.T.O THE PROPOSED DEVELOPMENT

**A. PROPERTY DETAILS**

REGISTERED PROPERTY DESCRIPTION/ERF NUMBER:

PHYSICAL ADDRESS:

TITLE DEED NUMBER:

**B. APPLICANT'S DETAILS - DULY AUTHORISED WITH A VALID POWER OF ATTORNEY**

NAME OF APPLICANT:

POSTAL ADDRESS:
TELEPHONE/CELLPHONE NO.:
EMAIL ADDRESS:

### C. REGISTERED PROPERTY OWNER'S DETAILS

REGISTERED PROPERTY OWNER:
TELEPHONE NUMBER/CELLPHONE NUMBER:
EMAIL ADDRESS:

### D. PARKING RELAXATION APPLICATION CHECKLIST

I, herein submitting the application, hereby declare that all of the below mentioned requirements have been included as part of the application.

	✓
COMPLETED APPLICATION FORM	
PROOF OF PAYMENT	
1 HARD COPY AND 1 SOFT COPY (PDF) OF SETS OF PLANS – SITE PLAN, FLOOR PLANS & ELEVATIONS	
AFFECTED ADJACENT OWNER'S CONSENT (IF APPLICABLE)	
MOTIVATION LETTER	
COPY OF TITLE DEED Certified copy of the resolution by the Board of Directors, members or trustees if the applicant is a company, closed corporation or trust (if applicable)	
POWER OF ATTORNEY (if the applicant is not the property owner)	
SG DIAGRAM OR SECTIONAL TITLE PLAN (if applicable and required)	

.....  
APPLICANT'S SIGNATURE

.....  
DATE

DMS1477495