STELLENBOSCH
STELLENBOSCH • PNIEL • FRANSCHHOEK
MUNISIPALITEIT • UMASIPALA • MUNICIPALITY

BUILDING DEVELOPMENT MANAGEMENT

Please submit this application to
Building.Development@stellenbosch.gov.za

APPLICATION FOR PERMISSION TO OBTAIN COPIES OF APPROVED BUILDING PLANS

I, the undersigned, certify that the information provided is correct to the best of my knowledge and belief. Misleading, false or inaccurate information is a criminal offence s62(2), Criminal Procedure Act no. 51 of 1997 and can lead to a fine being applied.

NOTE: Although the Municipality endevours to maintain copies of approved building plans, if for some reason plans of a specific property are not available, the onus is on the registered owner to have the existing structures measured and drawn up by a SACAP registered person, and assisted by a professional land surveyor, to ensure correct siting in terms of it's legal boundaries.

PROPERTY DETAILS

Company Registration No:		
Erf Number:	Portion:	Suburb:
Property Address:		
Description of specific plans required:		

Allow for **5-7 working days for processing time** (from date of complete submission) and copies of requested approved plans will be corresponded to the applicant/owner via **email only OR via schedule**

Section A - REGISTERED OWNER'S DETAILS

If applicable, please attach a POA/resolution to nominate a specific person/s to act on behalf registered company

Owner name:		Date:
Owner's email address:		
Mobile no:	Tel:	ID:

Section B - APPLICANT'S DETAILS (Authorized person)

If applicable, please attach a Power of Attorney (POA) to nominate a person to act on behalf registered company OR owner

Applicant name:		Date:
Correspondence email address:		
Mobile no:	Tel:	ID:

Where the owner is a Company, Close Corporation or Trust, the relevant sections of this form must be completed by an legal authorized representative thereof and/or a letter of authority is to be provided in this application. Should the owner be a Body Corporate, the relevant sections of this form must be completed by a Chairperson or Managing Agent and/or a **letter of authority (POA), copy of your ID & Municipal account is to be attached.**

Registered Owner/Authorized person signature: Date:

For office use only

1	All document (inc. Attachments) supplied by applicant?	Y	N
2	Application received date:	Date	
3	Received & checked by:	C/I name & signature	Date
4	Allocated to Archive staff:	Name	Date
5	Receipt no.(if applicable):	Receipt no.	Date
6	Copies of Building Plans sullied to applicant?	Y	N

** **DO NOT CHANGE THIS FORM IN ANY WAY**. This application will only be valid on full payment of Admin. Fee, if applicable**