Buffalo City Metropolitan Municipality East London | Bhisho | King William's Town Province of the Eastern Cape South Africa

Website: www.buffalocity.gov.za



## BUFFALO CITY METROPOLITAN MUNICIPALITY

Office of the City Manager

PO Box 134, East London, 5200 10th Floor, Trust Centre, East London, 5201

> Tel: 043 705 1045 | Fax: 043 743 1941 Email: thembisas@buffalocity.gov.za

Complete or indicate with a <b>STAND DESCRIP</b>	cross where applicable						
Stand no:		Township:					
Street address:							<del></del>
and size:							<del>-</del>
B. PROJECT DETAI	LS						
Type of work							
Type of building:		***************************************					
rea of building:		Estima	ted Cost				
9			•				
: PROPERTY OWN lame:	ER/AUTHORISED A	GENT		<del></del> -	CC/Trust,	etc No:	
Postal address:	-		<del></del>				<del> </del>
hysical address:		<del></del>		<del></del>		Code:	<u> </u>
elephone:	[ ]	E-mail address:	<u> </u>	-		Code:	
acsimile:	[ ]	Mobile phone:	[ ]				
lo:	ON AUTHORISED IN	Professional title:	RAL PROFESSI PrArch	PrSArchT	OF 2000, S		. <b>8, 26(3) &amp;</b> ArchDraught
Architectural Practice/firm:			<del>-</del>			·	
Postal address:			<del>-</del>	<del></del>	-	Code:	<del>-</del>
hysical address:				-		Code:	· · · · · · · · · · · · · · · · · · ·
Telephone:	[ j	E-mail address:		<del></del>	<del>_</del>		
acsimile:	[ ]	Mobile phone:	[ ]	<del></del>			
urther understand that acknowledge that the Co out of or in any way cont	no refund; except for uncil will not be held nected with the manner	being tubmitted with this application blishment; conditions of sulthe street refundable fees liable, in terms of section 2 for in which the proposed builtimanship in the erection; der	the registered on; National Build odivision and rec will be made by 3 of the Act, to a	ging Regulation quirements of the Council of any person for	ns and Buildi the Occupati nce this appl any loss; da	ng Standa onal Healt ication ha mage; inji	rds Act 103 ( th and Safet) s been subm
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## ARCHITECTURAL PROFESSION

Postal: PO Box 408, Bruma, 2026

Physical: 1st Floor, Lakeside Place, Cnr Ernest Oppenheimer

and Queen Street, Bruma, Johannesburg

Tel: +27 11 479 5000 | Fax: +27 11 479 5100

SACAP/IDoW0002

## ARCHITECTURAL COMPLIANCE CERTIFICATE

This certificate is to be completed and submitted by the Registered Person so identified by the Architectural Professions Act 44 of 2000, Section 26(4), as the authorised person responsible

A company resolution in support of Item C (where required) and two copies of this Certificate, together with applicable drawings and documentation, must be submitted to the local authority concerned for approval to build

One completed copy of this Certificate, stamped by the local authority concerned, is to be retained by the Registered Person Complete or indicate with a cross where applicable

A.1. PROJECT DETAILS

Authority:										
Stand no:			Township	:					<del>-</del>	
Street address:			·					<u>-</u>		
Proposed project:				-	•		_		<u>-</u>	
	ASSIFICATION A	S PER SACAI	P REGULĀT	IONS FOR	R THE IDEN	VTIFIC	ATION O	F WORK S	CHÉDUI	FS
SACAP Building									0.12002	
Classification/s:				*			Code/s	:		<del></del>
Complexity scale:		LOW						_	<del>-</del>	<u> </u>
A.3. SENSITIVITY	SCALE	LOW			MEDI	UM				HIGH
Sensitivity scale:		LOW	· · ·		MED	11.18.4	<u> </u>		<del>- ·</del> -	
ENVIRONMENTAL	NOT	REQUI	RED	National	MEDI Heritage	Year	r of			HIGH
Impact Assessment:	APPLICABLE	(Includ	<del></del>	Site:		Declaration:  Year of				
HERITAGE Impact Assessment:	NOT APPLICABLE	REQUII		National Building	Heritage				Year/s of	
SOCIAL	NOT	REQUI		All other		Declaration: Year/s of		1.	construction:	
Impact Assessment:  B. REGISTERED	APPLICABLE	(includ	led)	huilding	e·	cons	etruction			
Registered Person	PERSON AUTHO	OKISED IN TE	RIMS OF AF	RCHITECT	URAL PRO	FESS	SIONS AC	T 44 OF 20	000, Secti	ons 18, 26(3) & 26(4)
										<del></del>
Registration No:	<del></del>		Profession	al title:	PrArch	1	PrSArch	nT PrA	ArchT	PrArchDraught
Practice:	·									
Postal address:			<del>_</del>		, <u></u>				Code:	<del></del>
Physical address:				<del>.</del>			<del></del>	<del></del>		
Telephone:	[ ]		E-mail add	race.				·- <u>·</u>	Code:	
Facsimile:	[ ] Mobile ph								<u></u>	
project classification and site individual registration condit	classification inform	nation provided a Professional Co	above is correct onduct under the	ct in all aspo he South At	Regulations ects, and that frican Council	for app my app for the	proval to bu pointment to Architectu	Jild. I, the un	dersigned, t is not in v n.	de Person acting for and on respective local authority with also hereby confirm that the ariance with my competence,
	WNER/AUTHOR						,			
Name:	MILLIVAGITION	SED AGENT					т.	00/7		<del></del>
Postal address:	<del></del> -							CC/Trust,e		
	<del>.</del>								Code:	
Physical address:		<del></del>		<del></del>	_				Code:	
Telephone:	[ ]	E-r	mail addres	s:				_		
Facsimile:	[ ]	Mo	bile phone:	1 :	]					
SIGNED	perty Owner/Autho	ased broject deta	ed Person in t tiled herewith t						), and duly erned.	e appointed the Professional authorised representative for
E. LOOAL AO ITI	ORITI	<del></del> :			_		··-·	<u>.</u>		
	THORITY STAMP	· ,- ,.		competent specified	itectural Profi cy to perform project in this	essions the arc certific	s Act 44 of 2 chitectural v cate, and do	2000, with Se work identifie ses not in an	ections 26(: d in their re way imply	ered Person in terms of the 3) and 26(4) regarding egistration conditions for the y compliance or approval of
DATE			1 1	ally	corer regular	.viis, \$t	tanuards Of	conactions o	T OF DY any	authority concerned.

## **Buffalo City Metropolitan Municipality**

East London • Bisho • King William's Town Province of the Eastern Cape

South Africa

Website: www.buffalocity.gov.za



**Directorate: Development Planning** 

PO Box 81 • East London • 5200

26 Oxford Street • East London • 5201

Tel: 043 705 2295 Fax: 043 743 5266

METROPOLITAN MUNICIPALITY

CHECKLIST FOR BUILDING PLAN SUBMISSION	YES	NO
*SACAP Number and SACAP Registered Name		<u>                                     </u>
*SACAP compliance certificate to be attached		<del> </del>
*SANS 10400 FORMS		
* Plans to be signed and dated by Owner & Architectural Professional (if a Candidate have drawn up the plans, it must also be signed by a Registered mentor)		
*4 Copies for ALL plan submissions		
*3 copies are to be coloured in (Colours according to SABS 0400-1990)		
*Registered Professional's Drawing Checklist completed & signed		
*Submission Fee paid – copy of receipt to be attached with invoice		
Age of building? Heritage Application required if building is older than 60yrs		
*Submission forms to be filled in correctly <i>providing all required information (including Owners contact details)</i> and to be signed by Owner and Architectural Professional		
Stormwater Management Plan is required when a floor plan (hardened footprint) of 100m <sup>2</sup> or more is shown. Engineers Certificate required		
Appointed Engineers Certificate required where applicable.		
ire Protection Plan is required for any commercial building, public building or facility, i.e. Schools, shops, institutions, factories, hospitals, etc.		
Departure forms / Consent forms where applicable, signed by owner and abutting owner providing all required information		
Departure fee paid		<del></del>
Water Connections / Sewer Connections paid where applicable. Proof of payment required.		<u> </u>
No Book Plans allowed – plans as per ISO Standards – A0,A1,A2,A3		
Only <b>Recognized Drawings</b> scales to be used -1:20,1:25,1:50,1:100,1:200, 1:500 etc.		

NB - Should any documentation be incomplete or omitted, where applicable, NO plan submissions will be accepted.

FOR OF	FICE USE ONLY -
Comments / Attachments:	
Checked By:	
Date:	

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BUFFALO CITY METROPOLITAN MUNICIPALITY

REGISTERED PROFESSIONAL'S DRAWING CHECKLIST							
INFORMATION REQUIRED ON DRAWINGS	CHECK	REMARKS					
1. Full Title of Proposal & signed by owner and Registered Prof.							
2. SITE PLAN 1:200 / 1:500 - Scale, Boundary Dimensions, ERF no.'s							
3. North Point, Street Name and Number		·					
4. All Existing Buildings shown, all *NEW WORK clearly indicated							
(*red)	<u> </u>						
5. Existing and *NEW Drainage shown (* brown)							
6. Building lines as per current approved zoning scheme, Servitudes,							
Right of ways, V.A. (Vehicle Access) indicated							
7. Show Municipal Services crossing site (Sewer / Water)							
8. Contours shown (Survey Dept – 1st Floor)							
9. Confirm site boundaries (Survey Dept. – 1st Floor)							
10. Overall dimensions and dims from boundaries shown							
11. "No street furniture affected" to be shown where applicable							
12. Municipal Calculations - Erf Area, Existing Area, Proposed Area.							
Total Area, lotal coverage, etc.							
13. FULL FLOOR PLAN 1:50 / 1:100 – and wall thicknesses							
14. All Rooms Designated and FULLY Dimensioned							
15. Natural Ventilation & Lighting to all rooms, vent, mech.							
16. *Proposed & Existing Work to be clearly shown(*red)							
17. Garage – Fire Wall, Fire Door annotated							
18. Stairs – Widths, Treads, Risers, Balustrade height							
19. All Plumbing incl. gulley position to be shown 20. Sections Lines enumerated		<u>·</u>					
21. <b>SECTIONS 1:50 / 1:100 –</b> Foundation sizes, DPC, DPM, etc. shown 22. Floor construction annotated. (Thickness, sand bed)		<del></del>					
23. Floor to Ceiling height clearly shown & annotated	-						
24. Roof Construction annotated. (timber – yellow)							
25. ELEVATIONS 1:50 / 1:100 - Finishes to be indicated	<u> </u>						
26. Natural Ground, Finished floor levels shown							
27. Windows sizes and openable windows indicated	<del></del>						
28. Plumbing and rainwater pipes shown							
29. Drainage Section and levels indicated							
30. Plans required for Boundary Walls over 1.8m high		·					
31. POOLS - Plan, Site Plan & Section (scale - as above)	<del></del>						
32. Pump and filter location							
33. Backwash to existing sewer to be indicated							
34. Safety Fencing and Gate as per NBR.							
	MAITTED EDG.	. CUDANA A A					
NB – PLANS WILL NOT BE ACCEPTED IF FORM IS INCOMPLETE OR CONOTE: Work over 500m <sup>2</sup> is reserved for REGISTERED ARCHITECTS	MILLED FROM	4 20RWIZZION					
Plans submitted for SHOPS, OFFICES, CHURCHES, ETC. To show	<del>-</del>						
A) Zoning, Building Lines, Parking and Loading, Including Method	l of Coloreta						
B) Details of Entrance and Exit to Site.	oi Calculatio	<u> </u>					
C) Fire Protection Plan and details							
D) Facilities for Disable person	<del></del>						
E) Refuse Storage Facility							
Ly Korose storage racility							
Checked by REGISTERED PROFESSIONAL:	Date:						
1101 200 11112	Dule:						