

MASIPALA WASE THEEWATERSKLOOF MUNISIPALITEIT

Munisipale Kantoor/Municipal Office
Pleinstraat/Plein Street
Posbus/P.O Box 24
CALEDON
7230



Tel. no.: 028 214 3300
Faks/Fax no.: 028 214 1289
E-pos/E-mail: twkmun@twk.org.za

Our Reference Number: B/1438
Your Reference Number:
Enquiries: Sunet du Toit, 028 214 3300 / sunetdu@twk.org.za

Date: 30 June 2020

REGISTERED MAIL

A Redelinghuys
Umsiza Planning
P O Box 649
ROBERTSON
6705

(Per E-mail: annachris@mweb.co.za)

DECISION LETTER TO APPLICANT

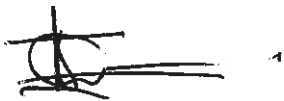
Dear Mr/Mrs/Ms

APPLICATION FOR REZONING AND DEPARTURE: ERF 1438 BOT RIVER.

1. This Municipality's letter dated 25 October 2019, refers.
2. The Municipal Planning Tribunal, on 03 June 2020 **refused** your application for the following, in terms of section 60 of the Theewaterskloof Municipality: By-law on Municipal Land Use Planning, 2015:
 - 2.1. **Rezoning** of erf 1438, Bot River from Single Residential Zone 1: Dwelling House to General Residential Zone 2: Town Housing in terms of Section 15(2)(a) of the Theewaterskloof Municipality: By-law on Municipal Land Use Planning;
 - 2.2. **Departure** of erf 1438, Bot River from the prescribed northern side building line (3m tot 1m) in terms of Section 15(2)(b) of the Theewaterskloof Municipality: By-law on Municipal Land Use Planning;
 - 2.3. **Departure** of erf 1438, Bot River from the prescribed southern side building line (3m tot 1m) in terms of Section 15(2)(b) of the Theewaterskloof Municipality: By-law on Municipal Land Use Planning; and
 - 2.4. **Departure** from Section 6.2.2(b) of the Theewaterskloof Municipality Zoning Scheme (increase in density from 50 units per hectare to 67 units per hectare in terms of Section 15(2)(b) of the Theewaterskloof Municipality: By-law on Municipal Land Use Planning.
3. **Reasons for the above refusal are as follows:**
 - 3.1. The approval of the application will have a negative impact on existing land use rights enjoyed by surrounding property owners.

- 3.2. The expected increase in traffic will have a negative impact on the surrounding residential neighbourhood.
 - 3.3. The development proposal is not in line with the proposals of the Theewaterskloof Municipality Spatial Development Framework.
 - 3.4. No Site specific circumstance exist that justifies a departure from the provisions of the Theewaterskloof Municipality Spatial Development Framework.
 - 3.5. The development proposal is not in line with the objective of General Residential Zone 2: Town Housing as set out in the Theewaterskloof Municipality Zoning Scheme.
5. You are hereby informed of your right to appeal to the Appeal Authority in terms of section 79(2) and 80 of the said legislation.
- 5.1. The attached appeal form must be completed and should be directed to the Appeal Authority and received by the Theewaterskloof Municipality, 6 Plein Street, Caledon, 7230 telephone: 028 214 3300, within 21 days of notification of this decision together with proof of payment of the appeal fee.
 - 5.2. You are requested to simultaneously serve notice of the appeal on any person who commented on the application and any other persons as the Municipality may determine (see attached list). Proof of serving the notification must be submitted to the Municipality, within 14 days of serving the notification.
 - 5.3. The notice must be served in accordance with section 35 of the said legislation and in accordance with the additional requirements as may be determined by the Municipality. The notice must invite persons to comment on the appeal within 21 days from date of notification of the appeal.
6. Kindly note that no appeal right exists in terms of Section 62 of the Local Government Municipal Systems Act, No 32 of 2000.

Yours faithfully



JC PIENAAR
MANAGER TOWN PLANNING AND BUILDING CONTROL

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APPEAL FORM

(Section 79 of the Proposed Standard Draft By-law on Municipal Land Use Planning)

KINDLY NOTE: Please complete this form using BLOCK capitals and ticking the appropriate boxes. Append this form to your letter of appeal which must comply with section 80 of the Theewaterskloof Standard By-law on Municipal Land Use Planning.

PART A: APPEAL

Are you appealing against the decision made by the authorised employee or Tribunal?	Y	N	If Yes, indicate in Part E if the appeal is lodged against the whole decision or part thereof. If the latter applies provide a description of the part.
Are you appealing in respect of the failure of the authorised employee or Tribunal to make a decision within the period contemplated in section 57(1) or (2)?	Y	N	If Yes, provide facts that prove the failure in Part E.
Are you appealing against the condition(s) of approval imposed by the authorised employee or Tribunal?	Y	N	If Yes, list relevant condition(s) and provide a description in Part E.
Is your appeal based on and primarily concerned with the process followed prior to the authorised employee or Tribunal decision?	Y	N	If Yes, specify in Part E.
Is your appeal based on and primarily concerned with the merits of the land development or land use application on which it is believed that the authorised employee or Tribunal erred in coming to the conclusion?	Y	N	If Yes, specify in Part E.
Date of decision	DD/MM/YYYY	Date receiving notice of decision	DD/MM/YYYY
Who took the original decision?	<input checked="" type="checkbox"/>	Authorised employee	<input checked="" type="checkbox"/> Tribunal

PART B: APPELLANT'S DETAILS

First name(s)	
Surname	

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Company or legal person's name <i>(if applicable)</i>					
Postal address					Postal Code
Email					
Tel		Fax		Cell	

PART C: APPELLANT'S PROPERTY DESCRIPTION *(Property that is affected by proposed development)*

Number(s) of Erf/Erven/Portion(s) or Farm(s), allotment area.					
Physical Address					
GPS Coordinates		Town/City			

PART D: PROPERTY DESCRIPTION OF PROPOSED LAND DEVELOPMENT

Number(s) of Erf/Erven/Portion(s) or Farm(s), allotment area.					
Physical Address					
GPS Coordinates		Town/City			

PART E: APPEAL MOTIVATION AND REASONS*

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* Appeal motivation, information and reasons may be attached.

PART F: APPEAL FEE (for completion and use by official)

	Appeal	R
TOTAL APPEAL FEES*		R

* Appeal fees that are paid to the Municipality are non-refundable and proof of payment of the application fees must accompany the application.

BANKING DETAILS

Name:

Bank:

Branch no.:

Account no.:

Payment reference:
 (If applicable)

PART G: ATTACHMENTS AND SUPPORTING INFORMATION AND DOCUMENTATION

Complete the following checklist and attach all the information and documentation relevant to the appeal.

Y	N	Proof of payment of appeal fees (applicant)	Y	N	Proof of serving notice of appeal (applicant)
Y	N	Copy of decision and proof of notification	Y	N	Copy of conditions of approval
Y	N	Motivation and reasons for appeal	Y	N	Other (specify)

SECTION H: DECLARATION

I hereby wish to confirm the following :

1. That the information contained in this appeal form and accompanying documentation is complete and correct.
2. I'm aware that it is an offense in terms of section 85(1)(e) of the said legislation to supply particulars,

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information or answers knowing the particulars, information or answers to be false, incorrect or misleading or not believing them to be correct.

Appellant's signature: _____

Date: _____

Full name: _____

FOR OFFICE USE ONLY

Date received: _____

Received by: _____

MunicipalStamp