

## KwaDukuza Municipality

Department:  
**ECONOMIC DEVELOPMENT & PLANNING**

### APPLICATION FORM FOR NAMING AND RENAMING OF STREETS AND OTHER PUBLIC PLACES WITHIN KWADUKUZA MUNICIPALITY

#### FOR OFFICE USE ONLY

Date received 

D	D	M	M	Y	Y	Y	Y
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 received by

#### DOCUMENTS REQUIRED

1. Locality map showing the street or feature to be named or renamed (if applicable).
2. Requesting parties proof of legal residency within KwaDukuza Municipality
3. Signed petition form (if applicable)
4. For private estates, a resolution from the Home Owners Association to rename or name a street or feature.
5. Ward councilors consent

#### APPLICANT INFORMATION

<b>Name:</b>	<b>Last Name:</b>
<b>Street Address:</b>	<b>Code:</b>
<b>Postal Address (If different from Street Address)</b>	<b>Code:</b>
<b>Email:</b>	
<b>Status of applicant:</b>	
<small>Official authority of individual or other applicant, e.g. tribal authority, representing state department, Transnet, provincial government, local authority, private company, interest group, or other (specify).</small>	



## DECLARATION

I HEREBY CERTIFY THAT THE INFORMATION GIVEN BY ME IN THIS FORM IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE.

I confirm that I am the legal owner/representative of the application

Name and Surname:	
Designation	
Signature:	
Date	

## TYPE OF APPLICATION

Select the Type of Street Naming being requested (only select one and mark appropriate field with an X)

- ☐ Naming a new street (does not currently have a legal name)
- ☐ Renaming an existing street (changing the name of an existing street)
- ☐ Naming of new features (i.e. public places)
- ☐ Renaming of existing features (i.e. public places)

If requesting to name or rename a Street, identify the type and characteristics of the Street

Is this Street public or private?	<input type="checkbox"/> Public	<input type="checkbox"/> Private
If it is a private street, name of Estate or area		
Is this Street an existing Street or a new development?	<input type="checkbox"/> Existing	<input type="checkbox"/> New development



Does this Street have an existing name?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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If yes, please provide the name of the existing street	
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### DETAILS OF PROPOSAL

Location of street/feature to be named/renamed:	
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Ward the street/feature falls within:	
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Proposed name of street or feature (if list, attach as Annexure)	First choice	
	Second choice	
	List attached	

What is the meaning of the name and from which language is the name derived?

Give the origin of the name if you know it and rationale for changing the name. also provide significance of the name.

In the case of naming or renaming public features, which feature is the proposed name intended? (e.g. post office, railway station, town, township, suburb, mountain , settlement, village)

Indicate the geographical co-ordinates in latitude and longitude (if possible)

In the case of a proposed change of a name, give former name and reasons for the change.



# PETITION FORM

Form 1

Date:

Petition to:

Petition summary and background:

No	Name	Surname	Area of residence	Address	Contact number	Comment
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.						
11.						
12.						
13.						
14.						
15.						



## NEWSPAPER ADVERT Form 2

The KwaDukuza Municipality in line with its policy on the Naming and Renaming of Streets and Public Places, is embarking on a Street Naming and Renaming Programme. It is the purpose and mandate of the municipality to assist the public in naming and renaming roads and public places.

The proposed renaming or naming includes inter alia;

.....

.....

.....

.....

The above mentioned proposal has been submitted by.....in terms of Section.....of the Policy on the naming and renaming of Streets and Other Public Spaces. The proposed street names need to be advertised for the public to comment prior to their final adoption by the KwaDukuza Council. In line with this policy provision, notice is hereby given that the KwaDukuza Council intends to consider the following proposed street names and/or renaming of street submitted as described above:

### A. PROPOSED NAMES OF NEW STREETS

Ward	Proposed Name	Map reference

### B. PROPOSED RENAMING OF STREETS

Ward	Current Name	Proposed Name	Map reference



Please be advised that all documentation and mapping relating to the proposals referred to above will be available for inspection by interested members of the public between the hours of 08h00 to 12h30 and 13h30 to 15h30 Mondays to Fridays (excluding Public Holidays).

Members of the public are invited to lodge written comments by hand with Development Planning Section to the following address:

**OK MALL BUILDING**

34 Chief Albert Luthuli Street  
KwaDukuza  
4450

**OR BY**

Registered post to  
P. O. Box 72  
KwaDukuza Municipality  
4450

or by fax to 032 437 5098, or by e-mail to [municipalm@kwadukuza.gov.za](mailto:municipalm@kwadukuza.gov.za) (REFERENCE: STREET NAMING POLICY) by the...../...../20.....

**IMPORTANT NOTE:** The closing date for submissions of comments is the.....

It must be also be mentioned that the process of naming and renaming of streets and public places is an ongoing programme and the municipality is still considering other proposals which will be advertised in due course once compliance with the policy provisions achieved. In this regard, the public is again encouraged to make their submissions through their ward committees and/or to the respective body corporates/Home Owners Associates within private estates. For further information in respect of the above, please contact.....during office hours on.....or by email on.....

**Issued By:**

Mr. N.J Mdakane  
Municipal Manager  
KwaDukuza Municipality



## KwaDukuza Municipality

Department:  
**ECONOMIC DEVELOPMENT & PLANNING**

# POWER OF ATTORNEY

Form 3

The Director- Development Planning  
KwaDukuza Municipality  
P. O. Box 72  
KwaDukuza  
4450

Dear Sir / Madam

### OWNER'S CONSENT

We, members of \_\_\_\_\_ (Name of Home Owners Association/Body Corporate) as per attached resolution do hereby confirm that permission has been given to \_\_\_\_\_ to submit an application for the naming/renaming (underline appropriate) of \_\_\_\_\_

Yours faithfully

\_\_\_\_\_  
Home Owners Association/Body Corporate

The Deponent acknowledges that he/she knows and understands the contents of this Affidavit.

Signature:.....

Declared before me.....

at.....

this.....day of.....20.....

Commissioner of Oath's Stamp

Office hours : 08h00 to 12h30 : Mondays to Fridays (excluding public holidays).





## KwaDukuza Municipality

Department:  
**ECONOMIC DEVELOPMENT & PLANNING**

### PROPOSED ROAD NAMES

Form 4

Date:			
Ward:			
Ward Councillor			
No.	Existing Road Name/Number	Proposed Name	Meaning
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			
13.			
14.			
15.			