## Application for a non-material amendment following a grant of planning permission.

## Town and Country Planning Act 1990

Publication of applications on planning authority websites. Please note that the information provided on this application form and in supporting documents may be published on the Authority's website. If you require any further clarification, please contact the Authority's planning department.

Please complete using block capitals and black ink. It is important that you read the accompanying guidance notes as incorrect completion will delay the processing of your application.

1. Applicant Name and Address			
Title:	First name:		
Last name:			
Company (optional):			
Unit:	House House suffix:		
House name:			
Address 1:			
Address 2:			
Address 3:			
Town:			
County			
Country			
Post code:			

2. Agent Name and Address			
Title:	First name:		
Last name:			
Company (optional):	House House number: suffix:		
House name:			
Address 1:			
Address 2:			
Address 3:			
Town:			
County			
Country			
Post Code:			

3. Site Address Details Please provide the full postal address of the application site.	4. Pre-application Advice Has assistance or prior advice been sought from the local			
Trease provide the rail postar address of the application site.	authority about this application? Yes No			
Unit: House number: House suffix:				
House name:	If Yes, please complete the following information about the advice you were given. (This will help the authority to deal with this application more efficiently).			
Address 1:	Please tick if the full contact details are not known, and then complete as much as possible:			
Address 2:	known, and then complete as mach as possible.			
Town:	Officer name:			
Address 3:				
County:	Reference:			
Postcode	Date of advice (DD/MM/YYYY):			
(optional):  Description of location or a grid reference.	Details of pre-application advice received:			
(must be completed if postcode is not known):				
Easting: Northing:				
Description:				
5. Eligibility				
Do you, or the person on whose behalf you are making this	application, Yes No			
have an interest in the part of the land to which this amend				
If you have answered No to this question, you cannot apply to make a non-material amendment.				
6. Authority Employee / Member				
With respect to the authority, I am: Do	any of these statements apply to you?			
(a) a member of staff				
(b) an elected member Yes				
(c) related to a member of staff				
(d) related to an elected member No				
If yes please provide details of the name, relationship and role				

7. Description of your proposal			
Please provide the description of the approved development as shown on the decision letter, including application			
reference number and date of decision in the sections below.			
For the purpose of calculating fees, which of the following best describes the original application type?			
Householder development: development to an existing dwelling-house or development within its curtilage			
Other: anything not covered by the above category			
8. Non-Material Amendment(s) Sought			
Please describe the non-material amendment(s) you are seeking to make:			
Are you intending to substitute amended plans or drawings?  Yes  No			
If Yes, please complete the following:			
Old plan/drawing number(s):			
New plan/drawing number(s):			
Please state why you wish to make this amendment:			

9. Application Requirements - Checklist Please read the following checklist to make sure you have sent all the information in support of your proposal. Failure to submit all information required will result in your application not being accepted. It will not be accepted until all information required by the Local Planning Authority has been submitted.				
The original and 3 copies of a completed and dated application form				
The original and 3 copies of other plans and drawings or information necessary to describe the subject of the application:				
The correct fee:				
10. Declaration				
I/we hereby apply for consent as described in this form and the accompanying plans/drawings and additional information. I/we confirm that, to the best of my/our knowledge, any facts stated are true and accurate and any opinions given are the genuine opinions of the person(s) giving them.				
Signed – Applicant or signed – Agent Date (DD/MM/YYYY)				
11. Applicant Contact Details	12. Agent Contact Details			
Telephone numbers: Country code: National number: Extension number:	Telephone numbers: Country code: National number: Extension number:			
Country code: Mobile number (optional):	Country code: Mobile number (optional):			
Country code: Fax number (optional):	Country code: Fax number (optional):			
Email address (optional):	Email address (optional):			
13. Site Visit				
Can the site be seen from a public road, public footpath, bridleway or other public land?  Yes No				
If the planning authority needs to make an appointment to carry Agent Applicant Other(if different from out a site visit, whom should they contact? (Please select only one)				
If Other has been selected, please provide:  Contact name: Telephone number				
Email address:				