

2013/2253/new

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:	MRS	First name:	JANE
Last name:	GOLDSMITH		
Company (optional):	/		
Init:		House number:	1
		House suffix:	
House name:			
Address 1:	ROBIN GROVE		
Address 2:			
Address 3:			
Town:	LONDON		
County:			
Country:	UK		
Postcode:	N6 6PA		

#### 2. Agent Name and Address

Title:	MR	First name:	SIMON
Last name:	AGATE		
Company (optional):	PROJECT 5 ARCHITECTURE		
Unit:		House number:	8
		House suffix:	
House name:			
Address 1:	WATERSON ST		
Address 2:			
Address 3:			
Town:	LONDON		
County:			
Country:	UK		
Postcode:	E2 8HL		

#### 4. Site Address Details

Please provide the full postal address of the application site.

Init:	<input type="text"/>	House number:	<input type="text" value="1"/>	House suffix:	<input type="text"/>
House name:	<input type="text"/>				
Address 1:	<input type="text" value="ROBIN GROVE"/>				
Address 2:	<input type="text"/>				
Address 3:	<input type="text"/>				
Town:	<input type="text" value="LONDON"/>				
County:	<input type="text"/>				
Postcode (optional):	<input type="text" value="N6 6PA"/>				
Description of location or a grid reference. (must be completed if postcode is not known):					
Easting:	<input type="text"/>	Northings:	<input type="text"/>		
Description:					
<input type="text"/>					

#### 5. Pre-application Advice

Has assistance or prior advice been sought from the local authority about this application? ☒ Yes ☐ No

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).

Please tick if the full contact details are not known, and then complete as much as possible: ☐

Officer name:

Reference:

Date of advice (DD/MM/YYYY):

Details of pre-application advice received:

#### 5. Eligibility

Do you, or the person on whose behalf you are making this application, have an interest in the part of the land to which this amendment relates?

☒ Yes ☐ No

**If you have answered No to this question, you cannot apply to make a non-material amendment.**

If you are not the sole owner, has notification under article 9 of the DMPO been given?

☐ Yes ☐ No ☒ Not Applicable

**If you have answered No to this question, you cannot apply to make a non-material amendment.**

If you have answered Yes to this question, please give details of persons notified:

Person Notified	Address	Date of Notification
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

#### 5. Authority Employee / Member

With respect to the Authority, I am:

- (a) a member of staff
- (b) an elected member
- (c) related to a member of staff
- (d) related to an elected member

Do any of these statements apply to you?

☐ Yes ☒ No

If yes please provide details of the name, relationship and role

### 7. Description of Your Proposal

Please provide a description of the approved development as shown on the decision letter, including application reference number and date of decision in the sections below. Please also provide the original application type:

LOFT CONVERSION WITH THE INSTALLATION OF 4 X DORMER WINDOWS (TO REAR, SIDES AND FRONT) TO PROVIDE HABITABLE SPACE TO SINGLE DWELLING HOUSE (CLASS C3)

Reference number:

Date of decision (DD/MM/YYYY):

2013/3457/P

23/07/2013

What was the original application type?:

(e.g. 'Full', 'Householder and Listed Building', 'Outline')

HOUSE HOLDER

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 ☐

### 3. Non-Material Amendment(s) Sought

Please describe the non-material amendment(s) you are seeking to make:

TO RAISE THE REAR NORTH FACING DORMER BY 38 CM

Are you intending to substitute amended plans or drawings?

☒ Yes

☐ No

If Yes, please complete the following:

Old plan/drawing number(s):

6228-R51-PP02, PP04, PP07, PP08, PP09

New plan/drawing number(s):

6228-R51-PP02A, PP04A, PP07A, PP08A, PP09A, E11

Please state why you wish to make this amendment:

TO AVOID A CUT OFF ANGLED DOOR HEAD UNDER SLOPING CEILING, IN NEW WALL REQUIRED TO ALLOW SINGLE BEDROOM LAYOUT