

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. Applic	ant Nan	ne and Addre	ess	2. Agent	2. Agent Name and Address		
Title:	Ms	First name:	Miriam	Title:	45	First name:	FERNANDA
Last name:	Hiu	L		Last name:	PA6	NOSSIN	
Company (optional):				Company (optional):	FERN	ANDA PA	GNOSSIN DESIG
Unit:		House number:	69 House suffix:	Unit:	6R.	House number:	24 House suffix:
House name:				House name:			
Address 1:	JAN	ESTOWN	ROAD	Address 1:	Lin	DEN A	ENVE
Address 2:				Address 2:			
Address 3:				Address 3:			
Town:	20	NDON		Town:	Lon	DON	
County:				County:			
Country:				Country:			
Postcode:	NWI	7DB		Postcode:	NWI	0 SRE	

	dress Details		4. Pre-application Advice Has assistance or prior advice been sought from the local					
Please provi	ide the full postal address of t	he application site.	authority about this application?	Yes No				
Unit:	House number: 69	House suffix:						
House name:			If Yes, please complete the following inform you were given. (This will help the authority	nation about the advice to deal with this				
Address 1:	JAMESTOWN	ROAD	application more efficiently). Please tick if the full contact details are not					
Address 2:			known, and then complete as much as possion. Officer name:	sible:				
Address 3:			JOHN SHEEHY					
Town:	LONDON		Reference:					
County:			P.A. 2012/0971/P-APPROVED					
Postcode (optional):			Date of advice (DD/MM/YYYY):	Date of advice (DD/MM/YYYY): 26/09/2012				
Description (must be co	n of location or a grid reference completed if postcode is not ki	e. nown):	Details of pre-application advice received: E-MAIL TO AGENT ADVICING TO MAKE					
Easting:	North	ning:						
Descriptio	n:			THIS APPLICATION, VARING CONDITION				
				3 OF DECISION NOTICE AND SUBSTITUTE WITH NEW SET OF DRAWING				
If you ha If you are n If you ha	ot the sole owner, has notific	question, you can ation under article 9 of t question, you can	not apply to make a non-material amenthe DMPO been given? Yes No	Not Applicable				
6. Auth	ority Employee / Memb	er						
	ect to the Authority, I am:		Do any of these statements apply to you?					
(b) an ele	nber of staff ected member		Yes No					
(c) relate	d to a member of staff d to an elected member							
If yes ple	ase provide details of the nan	ne, 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:						
ERECTION OF 2 STOREY GLAZED EXTENSION AT LOWER GROUND AND						
AT THE REAR FIRST FLOOR LEVEL (FOLLOWING THE DEMOVITION OF						
EXISTING REAR EXTENSION), INSTA LLATION OF SOLAR PANELS						
AND ZX ROOFLIGHTS AT ROOF LEVEL AND ALTERATIONS TO THE REAR PENESTRATION ALL IN CONNECTION WITH EXISTING						
DWELLING (CLASS 3)						
Reference number: Date of decision (DD/MM/YYYY):						
2012 / 0971 / P 16 FEBRUARY 2012						
What was the original application type?: (e.g. 'Full', 'Householder and Listed Building', 'Outline') TULL PLANNING APPLICATION						
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						
B. Non-Material Amendment(s) Sought						
Please describe the non-material amendment(s) you are seeking to make:						
THE FIXED REAR WINDOWS TO GLAZED EXTENSION TO BE REPLACED BY OPENABLE SLIDING DOORS WITH 1.100M HIGH						
FLOOR LEVEL TO AVANCE 100 MM TOWARDS GARDEN.						
CLASS BALUSTRADE OF ROOF TERRACE TO BE CONCEALED						
FIXED AT THE EDGE OF NEW GLAZED ROOF ALL AROUND						
THE TWO STOREY EXTENSION STOPING AT THE EXISTING						
BRICK EXTENSION.						
Are you intending to substitute amended plans or drawings? If Yes, please complete the following:						
Old plan/drawing number(s):						
344/P2, 344/P3 +NP 344/P7						
New plan/drawing number(s):						
344/PZA, 344/P3A AND 344/P7A						
Please state why you wish to make this amendment:						
to IMPROVE THERMAL INSULATION AND ALLOWING BETTER						
VENTILATION TO THE GROUND FLOOR EXTENSION.						

P. Application Requirements - Checklist Please read the following checklist to make sure you have sent all the Information required will result in your application not being accepte Local Planning Authority has been submitted.	information in support of your proposal. Failure to submit all d. It will not be accepted until all information required by the						
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 planning permission/consent as described in this form and the accompanying plans/drawings and additional information. Signed - Applicant: Date (DD/MM/YYYY): 25 / 16 / 2012							
11. Applicant Contact Details	12. Agent Contact Details						
Telephone numbers	Telephone numbers						
Country code: National number: + 44 Country code: Mobile number (optional): - 44 Country code: Fax number (optional): Email address (optional): Extension number: - 0207 4826181 - 0787 656 2071 Fax number (optional):	Country code: National number: + 44 Country code: Mobile number (optional): - 44 Country code: Fax number (optional): Email address (optional): Faconossin@Mac.com						
13. Site Visit							
Can the site be seen from a public road, public footpath, bridleway or other public land? Yes							
If the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (Please select only one)	Agent Applicant Other (if different from the agent/applicant's details)						
If Other has been selected, please provide:	Talankana aurakan						
Contact name:	Telephone number: 020 8968 97 08 67973967929						
FERNANDA PAGNOSSIN	020 3968 9708 67973967929						

fpagnossin@ mac.com

Email address: