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:	
ADDITIONS + ALTERATIONS IN MESO	OCIUTION WITH THE CHUNGE OF USE FROM
OFFICES (CLUSS BI) TO REGIDENT	IMZ USE (CURS C3) PROVIDING 4no. NEW
RESIDENTIAL UNITS.	
Reference number:	Date of decision (DD/MM/YYYY):
2071/2676/P	11/11/11
What was the original application type?: (e.g. 'Full', 'Householder and Listed Building', 'Outline')	FULL
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:
INSTALLATION OF A 900 x 320 x 1300 CUTDOOR WANT AIR CONDITIONING	
UNIT ABOVE THE APPROVED NEW YOURMER EXTENSION ON ROOF A WHOCH	
10 South Boundary	
*	
Are you intending to substitute amended plans or drawi	ings? Yes No
If Yes, please complete the following:	<i>—</i> —
Old plan/drawing number(s):	
AL(00) 26 REVC/MU00) 24 REV D/ AL(00) 23 REV D/ AL(00) 20 REVC	
New plan/drawing number(s):	
AL(00) 76 REV D/ M(00) 24 REV E/M(00) Z3 REV E/M(00) 70 REV D.	
Please state why you wish to make this amendment:	
TO ENSURE ADEQUATE THERMAN COMPORT TO NEW UNIT 4 WHICH	
HAS ISEAN SHOWN TO BE AT RISK FROM SUMMER CLEZHEATING	