

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 2.		2. Agent N	Agent Name and Address		
Title:	First name:	Title:	MISS First name: SARAH		
Last name:		Last name:	BEUDEN		
Company (optional):	GIRLS DAY SCHOOL TRUST	Company (optional):	SAVILLS		
Unit:	House House suffix:	Unit:	2 House House suffix:		
House name:		House name:			
Address 1:		Address 1:	CHARLOTTE PLACE		
Address 2:		Address 2:			
Address 3:		Address 3:			
Town:		Town:	SOUTHAMPTON		
County:		County:	HAMPSHIRE		
Country:		Country:	UNITED KINGDOM		
Postcode:		Postcode:	SO14 OTB		

	ddress Details ide the full postal address of	the application site	4. Pre-application Advice Has assistance or prior advice been sough	t from the local			
Unit:	House	House	authority about this application?	Yes X No			
House	number:	suffix:					
name:			If Yes, please complete the following info	rmation about the advice			
Address 1:	HAMPSTEAD CRICK	ET CLUB	you were given. (This will help the authority to deal with this application more efficiently). Please tick if the full contact details are not				
Address 2:	LYMINGTON ROAD		Officer name:				
Address 3:							
Town:	LONDON		Reference:				
County:							
Postcode (optional):	NW6 1HZ		Date of advice (DD/MM/YYYY):	1			
Description	of location or a grid referent of location or a grid referent of location of l	ce. nown):	Details of pre-application advice received	d:			
Easting:		hing:					
Description							
5. Eligib	ility						
f you hav	ot the sole owner, has notific ve answered No to this answered Yes to this questio	question, you canno	ot apply to make a non-material ame	Not Applicable			
		n, please give details of pe	ersons notified.	nument.			
	Person Notified	on, please give details of pe					
THE HA	Person Notified MPSTEAD CRICKET		Address OAD, LONDON, NW6 1HZ	Date of Notification			
CLUB	MPSTEAD CRICKET	25 LYMINGTON R	Address	Date of Notification			
CLUB THE CU	MPSTEAD CRICKET	25 LYMINGTON R	Address OAD, LONDON, NW6 1HZ	Date of Notification			
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CLUB THE CU TENNIS	MPSTEAD CRICKET MBERLAND LAWN CLUB	25 LYMINGTON R 25 ALVANLEY GA	Address OAD, LONDON, NW6 1HZ	Date of Notification			
CLUB THE CU TENNIS	MPSTEAD CRICKET	25 LYMINGTON R 25 ALVANLEY GA	Address OAD, LONDON, NW6 1HZ RDENS, LONDON, NW6 1JD	Date of Notification			
CLUB THE CU TENNIS	MPSTEAD CRICKET MBERLAND LAWN CLUB rity Employee / Memb ct to the Authority, I am: ber of staff	25 LYMINGTON R 25 ALVANLEY GA	Address OAD, LONDON, NW6 1HZ RDENS, LONDON, NW6 1JD	Date of Notification			
CLUB THE CU TENNIS 6. Autho With respe (a) a memi (b) an elec	MPSTEAD CRICKET IMBERLAND LAWN CLUB rity Employee / Memb ct to the Authority, I am: ber of staff ted member	25 LYMINGTON R 25 ALVANLEY GA	Address OAD, LONDON, NW6 1HZ RDENS, LONDON, NW6 1JD	Date of Notification			
CLUB THE CU TENNIS 6. Autho With respe (a) a memi (b) an elec (c) related	MPSTEAD CRICKET MBERLAND LAWN CLUB rity Employee / Memb ct to the Authority, I am: ber of staff	25 LYMINGTON R 25 ALVANLEY GA	Address OAD, LONDON, NW6 1HZ RDENS, LONDON, NW6 1JD	Date of Notification			
CLUB THE CU TENNIS 6. Autho With respe (a) a memi (b) an elec (c) related (d) related	MPSTEAD CRICKET IMBERLAND LAWN CLUB rity Employee / Memb ct to the Authority, I am: ber of staff ted member to a member of staff to an elected member	25 LYMINGTON R 25 ALVANLEY GA	Address OAD, LONDON, NW6 1HZ RDENS, LONDON, NW6 1JD	Date of Notification			
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date of decision in the sections below. Please also provid		on letter, including application reference number and
ERECTION OF TWO-STOREY BUILDING (CLASS D1) WITH ANCILLARY ELECTR LANDSCAPING AND CHANGE OF USE OF (CLASS D2) TO COMBINED EDUCATION (CLASS D2).	TO PROVIDE TEMP ICAL SUBSTATION EXISTING INDOC	ORARY CLASSROOM ACCOMODATION AND PLANT, CYCLE PARKING AND R SPORT AND RECREATION BUILDING
Reference number:		Date of decision (DD/MM/YYYY):
2012/0162/P		24/04/2012
What was the original application type?: (e.g. 'Full', 'Householder and Listed Building', 'Outline')	FULL	
For the purpose of calculating fees, which of the followin	ng best describes the origi	nal application type?
Householder development: development to an existin	g dwelling-house or deve	lopment within its curtilage
Other: anything not covered by the above category		
If Yes, please complete the following: Old plan/drawing number(s):	ngs?	Yes No
If Yes, please complete the following: Old plan/drawing number(s): A/SHHS/4201/A	ngs?	Yes No
If Yes, please complete the following: Old plan/drawing number(s):		
A/SHHS/4201/A New plan/drawing number(s):		

9. Application Require Please read the following ch information required will res Local Planning Authority has	ecklist to make sure you sult in your application n	have sent all the ot being accepted	information in sup d. It will not be ac	oport of you	ur proposal. Failure t til all information req	uired by the
						τ
The original and 3 copies of necessary to describe the su	other plans and drawing bject of the application:	is or information	X			
The correct fee:			X			
10. Declaration I/we hereby apply for planni information. Signed - Applicant:		as described in thi signed - Agent: Marrie	on behalf of		ng plans/drawings and Date (DD/MM/YYYY 05/09/2012	
11. Applicant Contact Telephone numbers	Details		12. Agent Co		etails	
Country code: National n	umber:	Extension number:	Telephone num Country code:	National r 8071		Extension number:
Country code: Mobile nur	mber (optional):		Country code: 07812	Mobile nu 96530	umber (optional): 8	
Country code: Fax number	er (optional):		Country code:	Fax numb	per (optional):	
Email address (optional):			Email address (optional): sbeuden@savills.com			
13. Site Visit Can the site be seen from a p If the planning authority nee out a site visit, whom should If Other has been selected, p Contact name: SARAH BEUDEN	eds to make an appointm they contact? (Please se	nent to carry	other public land X Agent Telephone num 023 8071	App ber:	licant Other (i	f different from the applicant's details)
Email address: sbeuder	n@savills.com					