

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

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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. Agent Name and Address		
Title:	First name:	Title: Mr First name: Grant		
Last name:		Last name: Leggett		
Company (optional):	Crest Nicholson	Company (optional): Boyer Planning		
Unit:	House House suffix:	Unit: House House suffix:		
House name:		House name:		
Address 1:	C/- Agent	Address 1: 83 Blackfriars Road		
Address 2:		Address 2:		
Address 3:		Address 3:		
Town:		Town: London		
County:		County:		
Country:		Country:		
Postcode:		Postcode: SE1 8HA		

3. Site Address Details		4. Pre-application Advice					
	the application site	Has assistance or prior advice been sought from the local					
Please provide the full postal address of the application site. Unit: House		authority about this application?	X Yes No				
House number:	suffix:	If Yes, please complete the following inform	nation about the advice				
name:		you were given. (This will help the authorit					
Address 1: 45 Sidmouth Street		application more efficiently). Please tick if the full contact details are not					
Address 2:		known, and then complete as much as pos	sible:				
Address 3:		Officer name:					
Town: London		Nel McDonald					
County:		Reference:					
Postcode (optional): WC1H 8JB		Date of advice (DD/MM/YYYY):					
Description of location or a grid reference	ce.						
(must be completed if postcode is not k		Details of pre-application advice received: Advised lodging the application ASAP.					
Easting: Nort	hing:						
Part fo former Westminster Kingswa							
vacant and cleared.	ty conege site, now						
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?							
If you have answered No to this	question, you cannot	apply to make a non-material amen	dment.				
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? X Yes No Not Applicable							
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If you have answered No to this If you have answered Yes to this questio	question, you cannot n, please give details of pers	apply to make a non-material amen ons notified: Address pup/English land Banking Company, 15	idment.				
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If you have answered No to this If you have answered Yes to this questio Person Notified Paul Seaton 6. Authority Employee / Memb With respect to the Authority, I am:	er	apply to make a non-material amen ons notified: Address pup/English land Banking Company, 15 E1	Date of Notification				
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7. Description Of Your Proposal							
Please provide a description of the approved developme date of decision in the sections below. Please also provid				n reference number and			
Erection of two new buildings comprising one part 5- with basement, totalling 52 self contained dwellings			-				
Reference number:		Date of decision (DD/MM/YYYY):					
2012/0815/P			30/03/2012				
What was the original application type?: (e.g. 'Full', 'Householder and Listed Building', 'Outline')							
For the purpose of calculating fees, which of the followin	g best describes the orig	gin	nal application type?				
Householder development: development to an existin	g dwelling-house or dev	elo	opment within its curtilage				
Other: anything not covered by the above category			X				
8. Non-Material Amendment(s) Sought							
Please describe the non-material amendment(s) you are	seeking to make:						
We seek various non-material amendments to the a accompanying covering letter and Schedule of Non-	Material Changes.						
Are you intending to substitute amended plans or drawin If Yes, please complete the following:	ngs?] Yes 🛛 🗙 No				
Old plan/drawing number(s):							
Please see accompanying cover letter							
New plan/drawing number(s):							
Please see accompanying cover letter and Schedule	of Non-Material Chang	ge	28				
Please state why you wish to make this amendment:							
Please see accompanying cover letter and Schedule of Non-Material Changes							
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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:	X						
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: Or signed - Agent; Date (DD/MM/YYYY): Boyer Boyer 08/08/2012							
11. Applicant Contact Details							
Telephone numbers Extension Country code: National number: Country code: Mobile number (optional): Country code: Fax number (optional): Country code: Fax number (optional): Email address (optional): Email address (optional):	Telephone numbers Extension number: Country code: National number: 0203 268 2431 Image: Country code: Country code: Mobile number (optional): Country code: Fax number (optional): Country code: Fax number (optional): Email address (optional): Image: Country code:						
13. Site Visit Can the site be seen from a public road, public footpath, bridleway or other public land? X Yes No If the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (<i>Please select only one</i>) X Agent Applicant Other (if different from the agent/applicant's details) If Other has been selected, please provide: Contact name: Telephone number:							
Email address:							