

## 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. t 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:	First name:			
Last name:				
Company (optional):	RINGLINE PROPERTIES			
Unit:	House number: 14	House suffix:		
House nan	.3			
Address 1:	DOWNSHIRE HILL			
Address 2:				
Address 3:				
Town:	LOWDON			
County:				
Country:				
Postcode:	NW3 INR			

2. Agent	Name ar	nd Address			
Title:	MR	First name:	20N		
Last name:	EVAN	5			
Company (optional):	METROPOLITAN DEVELOPMENT CONSULTANCY LTD.				
Unit:		House number:	6	House suffix:	
House name:	BICK	ENHAU	MAN	SIGNS	S
Address 1:	BICK	ENHA	L S	TREE	Г
Address 2:					
Address 3:					
Town:	LON	DON			
County:					
Country:					
Postcode:	Wlu	6BX			

3. Site Address Details	4. Pre-application Advice
Please provide the full postal address of the application site	
Unit: House number: House suffix:	
House name: MANOR HOUSE	If Yes, please complete the following information about the advice you were given. (This will help the authority to deal with this
Address 1: DOWNSHIRE HILL	application more efficiently).  Please tick if the full contact details are not
Address 2:	known, and then complete as much as possible:
Address 3:	Officer name:
Town: LONDON	JONATHAN MARKWELL
County:	Reference:  EMALL SUBJECT: 9 DOWNSHIRE HILL
Postcode 2002	Date of advice (DD/MM/YYYY): 17 /09 /7011
(optional): Description of location or a grid reference. (must be completed if postcode is not known):	Date of advice (DD/MM/YYYY): \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
	ADVISED TO SUBMIT A NOW-MATERIAL
Easting: Northing:	AMENDMENT APPLICATION AS THE
Description:	PROPOSAL COULD NOT BE DEALT WITH UNDER PLANNING PERMISSION (APPEAL B:
	APP/X5210/A/10/2129688) CONDITION 2 AND LISTED BUILDING CONSENT CAPPEAL A:
	APP/X5ZIO/E/10/ZIZQ689) CONDITION Z.
5. Eligibility	
If you have answered No to this question, you of	cannot apply to make a non-material amendment.
Person Notified	Address Date of Notification
6. Authority Employee / Member	
With respect to the Authority, I am: (a) a member of staff	Do any of these statements apply to you?
(b) an elected member	Yes No
<ul><li>(c) related to a member of staff</li><li>(d) related to an elected member</li></ul>	
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 date of decision in the sections below. Please also provide the original appli						
"THE WORKS PROPOSED ARE DEMOLITION	OF THE DERELICT GRADE I					
LISTED BUILDING AND ITS REPLACEMENT WITH A NEW SINGLE DWELLING						
House."						
Reference number:	Date of decision (DD/MM/YYYY):					
APPEAL A: APP/X5210/E/10/2129689						
APPEAL B: APP / x5210/A/10/2129688						
/ /F IV /II	WING PERMISSION AND					
(e.g. 'Full', 'Householder and Listed Building', 'Outline')	DING CONSENT.					
For the purpose of calculating fees, which of the following best describes th	e original application type?					
Householder development: development to an existing dwelling-house of	or development within its curtilage					
Oak and the second has been as a second has been as						
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:						
	ER GROUP CROWN FROM					
INTERNAL ALTERATIONS TO THE LOW	SEIS & LOUD, KIRST HIGH					
SECOND FLOOR.						
Are you intending to substitute amended plans or drawings?	Ýes No					
f Yes, please complete the following:						
Old plan/drawing number(s):						
03F, 04F, 05E, 06E (DATED APRIL ZO	onal DECEMBER ZOUS)					
New plan/drawing number(s):	2.3).					
1412,01D,08D,09D						
7412,07D,08D,09D						
Please state why you wish to make this amendment:	AND the second of the second o					
	ND FUNCTIONALITY OF THE					

<b>9. Application Requirements - Checklist</b> Please read the following checklist to make sure you have sent all the information required will result in your application not being accepted Local Planning Authority has been submitted.	e information in support of your proposal. Failure to submit all ed. 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 the information.  Signed - Applicant:  Or signed - Agent:	Date (DD/MM/YYYY):
Telephone numbers  Country code: National number: Extension number:  Country code: Mobile number (optional):  Country code: Fax number (optional):  Email address (optional):	Telephone numbers  Country code: National number:  DZO 7486 6675  Country code: Mobile number (optional):  Country code: Fax number (optional):  Email address (optional):  Son. evans @ mdc London. com
13. Site Visit Can the site be seen from a public road, public footpath, bridleway or	
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> )  If Other has been selected, please provide:	Agent Applicant Other (if different from the agent/applicant's details)
Contact name:	Telephone number: 020 7486 6675
Emair address: jon. evans@mdclondor.com	