

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 Name	and Addre	SS	2. Agent Name and Address			
Title:	MR	First name:	GRAHAM	Title:	MR	First name:	RICHARD
Last name:	ZIMMATORE			Last name:	4	ARNON	
Company (optional):	STERL	ing Home	Improvements (TO	Company (optional):	BLA	. tach	KEKTS
Unit:		House number:	House suffix:	Unit:		House number:	House suffix:
House name:				House name:	OLD	GARDE	en House
Address 1:	105	riture h	/mex	Address 1:	THE	LANGE	rn2
Address 2:				Address 2:	Ban	DUE L	ANE
Address 3:		Are gift		Address 3:			
Town:	E~	sr 4	RINSTEAD	Town:	BA	mee-sea	
County:	WES	50 Suss	ex	County:	Lo	~ 00~	
Country:	U.K.			Country:	U.K.		
Postcode:	RHIS	7 38D		Postcode:	11WZ	OAE	

3. Site Address Details	4. Pre-application Advice	
Please provide the full postal address of the application site.	Has assistance or prior advice been sought fr	om the local
Unit: House number: 22 House suffix:	authority about this application?	Yes No
House name:	If Yes, please complete the following informa	ation about the advice
Address 1: DOCHESTER MEWS	you were given. (This will help the authority to application more efficiently).	to deal with this
Address 2:	Please tick if the full contact details are not known, and then complete as much as possil	ble:
Address 3:	Officer name:	J
Town: CANDEN		
County: LONDON	Reference:	
Postcode (optional): NWI 938	Data of the CDD (AMARICA)	
Description of location or a grid reference. (must be completed if postcode is not known):	Date of advice (DD/MM/YYYY): Details of pre-application advice received:	
Easting: Northing:		
Description:		
5. Eligibility		
Do you, or the person on whose behalf you are making this appli	cation,	
have an interest in the part of the land to which this amendment	relates:	
If you have answered No to this question, you cann	ot apply to make a non-material amend	ment.
If you are not the sole owner, has notification under article 9 of th	ne DMPO been given? Yes No .	Not Applicable
	- L	
If you have answered No to this question, you cann		ment.
If you have answered Yes to this question, please give details of p		
resorriouned	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	
(c) related to a member of staff	V	
(d) related to an elected member		
If yes please provide details of the name, relationship and role		
¹ i		

7. Description Of Your Proposal						
Please provide a description of the approved development as shown on the decisi date of decision in the sections below. Please also provide the original application	on letter, including application reference number and					
ORIGINAL APPLICATION (REF NO 2005/3182/P):	ype.					
DEMOLITION OF EXISTING TWO STARS	EY STORAGE BUILDING WITH					
DEMOLITION OF EXISTING TWO STORE ANCILLARY ACCOMMODATION AND C	מונים ביים ביים ביים ביים ביים ביים ביים ב					
BEDROOM DWELLINGHOUSE WITH	Cit Tool of Des (Co.)					
	off sincer parking.					
Reference number:	Date of decision (DD/MM/YYYY):					
ORIGINAL APP. 2005/3182/P	12 AUGUST 2005					
RENEWAL APP. 2010/5004/P	7 FEBRUARY 2011					
What was the original application type?:						
(e.g. 'Full', 'Householder and Listed Building', 'Outline')						
For the purpose of calculating fees, which of the following best describes the original control of the purpose of calculating fees, which of the following best describes the original control of the purpose of calculating fees, which of the following best describes the original control of the purpose of calculating fees, which of the following best describes the original control of the following best describes and the following best describes a						
Householder development: development to an existing dwelling-house or deve	lopment within its curtilage					
Other: anything not covered by the above category						
, , , , , , , , , , , , , , , , , , ,	<u> </u>					
8. Non-Material Amendment(s) Sought						
Please describe the non-material amendment(s) you are seeking to make:						
AMENDMENTS TO TREATMENT OF TIMBER TO FRONT ELEVATION;	ANEMAE & ENTRANCE DOORS					
AMENOMENTS TO FIRST PLOOR WIN DOW	10 PRONT ENEVATION;					
AMENDMENTS TO REAR ELEVATION WINDOWS & BALLSTRADING,						
ADDITIONAL OF WINDOW TO CAST ELEV	ARION AT SECOND PLOOK					
Are you intending to substitute amended plans or drawings?	Yes No IF REQUIRED					
If Yes, please complete the following:						
· ·						
Old plan/drawing number(s):						
New plan/drawing number(s):						
Please state why you wish to make this amendment:						

9. Application Requirements - Checklist								
Please read the following checklist to make sure you have sent all th	ne 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	n: 🗀							
	Lund							
The original and 3 copies of other plans and drawings or information	n —							
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							
mornagor.								
Signed - Applicant: Or signed - Agent	Date (DD/MM/YYYY):							
Jet Man	14/10/2011							
L_ GAIN	14/10/2011.							
11. Applicant Contact Details	12 Agent Control Details							
}	12. Agent Contact Details							
Telephone numbers	Telephone numbers							
Country code: National number: Extension	Extension							
Country code: National number: number:	Country code: National number: number:							
	1+44 (0)20 7978 4000							
Country code: Mobile number (optional):	Country code: Mobile number (optional):							
++44 (0)7808 794257								
Country code: Fax number (optional):	Country Code:							
Townser (optional).	Country code: Fax number (optional):							
Email address (optional):	Email address (optional):							
sterlinghomefix@aol.com	richard @ bla-architecty.com							
13. Site Visit								
Can the site be seen from a public road, public footpath, bridleway	or other public land? Yes No							
If the planning authority needs to make an appointment to carry	or other public land? Yes No							
out a site visit, whom should they contact? (Please select only one)	Agent Applicant Other (if different from the							
If Other has been selected, please provide:	agent/applicant's details)							
Contact name:	Telephone number:							
	receptione number.							

Email address: