

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.

1. Applicant Name, Address and Contact Details

Title:	Mr	First Name:	Kevin	Surname:	Stewart
Company name:					
Street address:	Southern House				
	Embankment Way				
Telephone number:					
Mobile number:					
Town/City:	Ringwood				
Fax number:					
Country:					
Email address:					
Postcode:	BH24 1EU				
Are you an agent acting on behalf of the applicant?					
☒ Yes ☐ No					

2. Agent Name, Address and Contact Details

Title:	Mr	First Name:	Bartek	Surname:	Fleszar
Company name:	HGP ARCHITECTS LTD				
Street address:	110 Wickham Road				
Telephone number:	01329283225				
Mobile number:					
Town/City:	Fareham				
Fax number:					
Country:	United Kingdom				
Email address:					
Postcode:	PO16 7JH				
	bartek.fleszar@hgp-architects.co.uk				

3. Site Address Details

Full postal address of the site (including full postcode where available)

House:		Suffix:	
House name:	Limewood		
Street address:	1-34 St Marys Road		
Town/City:	HAYLING ISLAND		
Postcode:	PO11 9ED		

Description of location or a grid reference
(must be completed if postcode is not known):

Easting:	472171
Northing:	99766

Description:

4. 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? ☒ Yes ☐ No

If you are not the sole owner, has notification under article 10 of the Town and Country Planning (Development Management Procedure) (England) Order 2015 been given? ☐ Yes ☐ No ☒ Not Applicable

Person notified	Address	Date of notification (DD/MM/YYYY)																																				
	<table><tr><td>Number:</td><td> </td><td>Suffix:</td><td> </td><td>House name:</td><td> </td></tr><tr><td>Street:</td><td colspan="5"> </td></tr><tr><td></td><td colspan="5"> </td></tr><tr><td></td><td colspan="5"> </td></tr><tr><td>Town:</td><td colspan="5"> </td></tr><tr><td>Postcode:</td><td colspan="5"> </td></tr></table>	Number:		Suffix:		House name:		Street:																		Town:						Postcode:						
Number:		Suffix:		House name:																																		
Street:																																						
Town:																																						
Postcode:																																						

5. Description of Your Proposal

Description of Approved Development:

Change to windows, for details refer to Proposed Elevations drawings

Reference number:

*Date of decision (DD/MM/YYYY):

What was the original application type?

Full planning permission

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

6. Non-Material Amendment(s) Sought

*Please describe the non-material amendment(s) you are seeking to make:

6. Non-Material Amendment(s) Sought

Change to the style of glazing of the larger windows, from a large single top hung window to 2no. opening side lights, to give easier control for the residents.

Are you intending to substitute amended plans or drawings?

☒ Yes ☐ No

Old plan/drawing numbers: 10 Proposed Elevations 11 Proposed Elevations

New plan/drawing numbers: 200-00-Elevations-Sheet 1 Rev L 200-01-Elevations-Sheet 2 Rev K

Please state why you wish to make this amendment:

To give easier control of the windows for the residents.

7. Pre-application Advice

Has assistance or prior advice been sought from the local authority about this application?

☒ Yes ☐ No

If Yes, please complete the following information about the advice you were given (this will help the authority to deal with this application more efficiently):

Officer name:

Title: First name: Surname:

Reference:

Date (DD/MM/YYYY): (Must be pre-application submission)

Details of the pre-application advice received:

8. 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 out a site visit, whom should they contact? (Please select only one)

☒ The agent ☐ The applicant ☐ Other person

9. Authority Employee/Member

With respect to the Authority, I am:

- (a) a member of staff
- (b) an elected member
- (c) related to a member of staff
- (d) related to an elected member

Do any of these statements apply to you?

☐ Yes ☒ No

10. Declaration

I/we hereby apply for planning permission/consent as described in this form and the accompanying plans/drawings and additional information. I/we confirm that, to the best of my/our knowledge, any facts stated are true and accurate and any opinions given are the genuine opinions of the person(s) giving them.



Date

30/01/2018