

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

Title:	MR	First name:	GRAHAM
Last name:	EITE		
Company (optional):			
Unit:		House number:	29
		House suffix:	
House name:			
Address 1:	ROGERS MEAD		
Address 2:			
Address 3:			
Town:	HAYLING ISLAND		
County:	HAMPSHIRE		
Country:	ENGLAND		
Postcode:	PO11 0PN		

2. Agent Name and Address

Title:	MR	First name:	JASON
Last name:	DANCER		
Company (optional):			
Unit:		House number:	23
		House suffix:	
House name:			
Address 1:	STAUNTON AVENUE		
Address 2:			
Address 3:			
Town:	HAYLING ISLAND		
County:	HAMPSHIRE		
Country:	ENGLAND		
Postcode:	PO11 0EN		

3. Site Address Details

Please provide the full postal address of the application site.

Unit:		House number:	29	House suffix:	
House name:					
Address 1:	ROGERS MEAD				
Address 2:					
Address 3:					
Town:	HAYLING ISLAND				
County:	HAMPSHIRE				
Postcode (optional):	PO11 0PN				
Description of location or a grid reference. (must be completed if postcode is not known):					
Easting:		Northings:			
Description:					

4. 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).

Please tick if the full contact details are not known, and then complete as much as possible: ☐

Officer name:

MR STEVE WEAVER.

Reference:

REF E-MAIL

Date of advice (DD/MM/YYYY):

02/04/2015.

Details of pre-application advice received:

I CAN CONFIRM THAT THE AMENDMENT TO THE APPROVED PLANS IS LIKELY TO BE ACCEPTED. HOWEVER, IN ORDER TO FORMALLY AUTHORISE THE REVISION SUBMIT 'NON MATERIAL AMENDMENT (EXTRACT ONLY)

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?

☒ Yes ☐ No

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?

☐ Yes ☐ No ☒ Not Applicable

If you have answered No to this question, you cannot apply to make a non-material amendment.

If you have answered Yes to this question, please give details of persons notified:

Person Notified	Address	Date of Notification

6. Authority Employee / Member

With respect to the Authority, I am:

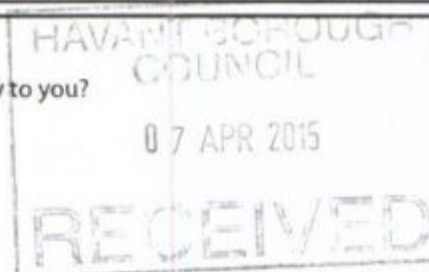
- (a) a member of staff
- (b) an elected member
- (c) related to a member of staff
- (d) related to an elected member

Do any of these statements apply to you?

☐ Yes ☒ No

If yes please provide details of the name, relationship and role

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7. Description Of Your Proposal

Please provide a description of the approved development as shown on the decision letter, including application reference number and date of decision in the sections below. Please also provide the original application type:

FIRST FLOOR REAR BALCONY.

CONDITIONS. OPAQUE PRIVACY SCREENS SHOWN ON THE APPROVED DRAWINGS SHALL BE PROVIDED PRIOR TO THE BALCONY BEING BOUGHT INTO USE AND SHALL AT ALL TIMES BE MAINTAINED AT A MINIMUM OF 1.7 M IN HEIGHT AND AT ALL TIMES REMAIN GLAZED ENTIRELY WITH OPAQUE GLASS. THE PARTICULAR TYPE OF WHICH GLASS SHALL PROVIDE A DEGREE OF OBSCURATION NO LESS OBSCURE THAN THAT WHICH IS PROVIDED BY PILKINGTONS TEXTURED GLASS OBSCURATION LEVEL 4.

Reference number:

Date of decision (DD/MM/YYYY):

APP/15/100069

20/03/2015

What was the original application type?:
(e.g. 'Full', 'Householder and Listed Building', 'Outline')

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 ☐

8. Non-Material Amendment(s) Sought

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

THE SIZE APPROVED ON THE ORIGINAL APPLICATION IS 2 METRES WIDE BY 1 METRE DEEP. IN DISCUSSION WITH A STRUCTURAL ENGINEER, HE RECOMMENDED THAT THE WIDTH OF THE BALCONY BE INCREASED TO 2.5 METRES. HE EXPLAINED THAT AS THE FIRST FLOOR WINDOW IS NOT DIRECTLY ABOVE THE GROUND FLOOR WINDOW ON THE ELEVATION IN QUESTION, ONE OF THE SUPPORTING BEAMS FOR THE BALCONY WOULD BE IN CONFLICT WITH THE LINTEL ABOVE THE GROUND FLOOR WINDOW. A BETTER SOLUTION IN HIS OPINION IS TO WIDEN THE BALCONY BY 0.5 METRES,

Are you intending to substitute amended plans or drawings?

☒ Yes

☐ No

If Yes, please complete the following:

Old plan/drawing number(s):

PROPOSED FLOOR PLAN DATE STAMPED 16/01/15
AMENDED REAR ELEVATION 18/03/15

AMENDED SIDE ELEVATIONAL DRAWINGS 18/3/15.

New plan/drawing number(s):

FLOOR PLAN - 02/4/15

SIDE ELEVATION DRAWINGS 02/04/15.

REAR ELEVATION PLAN - 02/04/15

Please state why you wish to make this amendment:

TO IMPROVE THE STRUCTURAL INTEGRITY OF THE ~~REAR~~ BALCONY.
gpa

HAVANT BOROUGH COUNCIL

07 APR 2015

RECEIVED

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: ☒

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):

02/04/2015

11. Applicant Contact Details

Telephone numbers

Country code: National number:

Extension number:

12. Agent Contact Details

Telephone numbers

Country code: National number:

Extension number:

Country code: Mobile number (optional):

Country code: Fax number (optional):

Email address (optional):

jason@britesparxinstallation.co.uk

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

☐ Agent

☒ Applicant

☐ Other (if different from the agent/applicant's details)

If Other has been selected, please provide:

Contact name:

Telephone number:

Email address:

