

## 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: | Paul | Surname:          | Harvey          |                  |
| Company name                                                                                                      | Peter Ernest Homes Ltd |             |      |                   |                 |                  |
| Street address:                                                                                                   | 36                     |             |      | Country Code      | National Number | Extension Number |
|                                                                                                                   | Fernhurst Close        |             |      | Telephone number: |                 |                  |
|                                                                                                                   |                        |             |      | Mobile number:    |                 |                  |
| Town/City                                                                                                         | Hayling Island         |             |      | Fax number:       |                 |                  |
| County:                                                                                                           | Hampshire              |             |      | Email address:    |                 |                  |
| Country:                                                                                                          | United Kingdom         |             |      |                   |                 |                  |
| Postcode:                                                                                                         | PO11 0DT               |             |      |                   |                 |                  |
| Are you an agent acting on behalf of the applicant? <input checked="" type="radio"/> Yes <input type="radio"/> No |                        |             |      |                   |                 |                  |

**2. Agent Name, Address and Contact Details**

|                 |                                |             |      |                   |                          |                  |
|-----------------|--------------------------------|-------------|------|-------------------|--------------------------|------------------|
| Title:          |                                | First Name: | Mark | Surname:          | Holman                   |                  |
| Company name:   | Holman Reading Partnership llp |             |      |                   |                          |                  |
| Street address: | 18 Limberline Spur             |             |      | Country Code      | National Number          | Extension Number |
|                 | Hilsea                         |             |      | Telephone number: | 0239269 1843             |                  |
|                 |                                |             |      | Mobile number:    |                          |                  |
| Town/City       | Portsmouth                     |             |      | Fax number:       |                          |                  |
| County:         | Hants                          |             |      | Email address:    |                          |                  |
| Country:        | United Kingdom                 |             |      |                   |                          |                  |
| Postcode:       | PO3 5HJ                        |             |      |                   | markh@hrp-architects.com |                  |

### 3. Site Address Details

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

|                 |                                              |         |                      |
|-----------------|----------------------------------------------|---------|----------------------|
| House:          | <input type="text" value="36"/>              | Suffix: | <input type="text"/> |
| House name:     | <input type="text"/>                         |         |                      |
| Street address: | <input type="text" value="Fernhurst Close"/> |         |                      |
|                 | <input type="text"/>                         |         |                      |
| Town/City:      | <input type="text" value="Hayling Island"/>  |         |                      |
| County:         | <input type="text" value="Hampshire"/>       |         |                      |
| Postcode:       | <input type="text" value="PO11 0DT"/>        |         |                      |

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

|           |                                     |
|-----------|-------------------------------------|
| Easting:  | <input type="text" value="471049"/> |
| Northing: | <input type="text" value="99263"/>  |

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

### 5. Description of Your Proposal

Description of Approved Development:

Demolition of existing detached garage and proposed two storey and single storey extensions to side and rear of property and internal alterations

Reference number:

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

What was the original application type?

Householder 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:

Changes to the elevation treatment and obscure glazing added to first floor windows

Are you intending to substitute amended plans or drawings? ☒ Yes ☐ No

If yes please complete the following

|                            |                                       |
|----------------------------|---------------------------------------|
| Old plan/drawing numbers:  | <input type="text" value="8141-03"/>  |
| New plan/ drawing numbers: | <input type="text" value="8141-03C"/> |

Please state why you wish to make this amendment:

Improvements to layout culminating in minor changes to the elevations

## 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