PERMIT

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:	GARY
Last name:	HALSTONES
Company (optional):	DYLEX
Unit:	
House number:	
House suffix:	
House name:	
Address 1:	
Address 2:	
Address 3:	
Town:	
County:	
Country:	
Postcode:	

2. Agent Name and Address

Title:	MR.
First name:	PETER
Last name:	GALLOWAY
Company (optional):	PGP Architects
Unit:	10
House number:	
House suffix:	
House name:	,
Address 1:	EAST STREET
Address 2:	
Address 3:	
Town:	HAVANT
County:	HAMPSHIRE
Country:	UK
Postcode:	PO9 1AR

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3. Site Address Details

Please provide the full postal address of the application site.

Unit:	9	House number:		House suffix:	
House name:					
Address 1:	SEAFRONT				
Address 2:					
Address 3:					
Town:	HAYLING ISLAND				
County:	HAMPSHIRE				
Postcode (optional):	PO11 0AG				

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

Easting: Northing:

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: STEVEN WEAVER

Reference:

Date of advice (DD/MM/YYYY): 18/02/2011

Details of pre-application advice received:

Non material amendment application required in connection with Condition 11.

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 4F(3) of the GDPO 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

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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

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:

DEMOLITION OF EXISTING BUILDING AND ERECTION OF 14 NO. 2 BEDROOMED APARTMENTS WITH 120m² GROUND FLOOR RETAIL AREA PLUS ASSOCIATED CAR PARKING

Reference number: 06/59751/009

Date of decision (DD/MM/YYYY): 18/10/2006

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

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 ☑ £170

8. Non-Material Amendment(s) Sought

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

REDEFINED FENESTRATION AND DOOR PATTERN TO SHOPFRONTS AND COLUMN CASINGS (IN RESPONSE TO CONDITION NO. 11) AND SEEKING DISCHARGE OF CONDITION NO. 11.

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

If Yes, please complete the following:

Old plan/drawing number(s): 05/17/02 REV. D

New plan/drawing number(s): 05/17/ W09 REV. H .

Please state why you wish to make this amendment:

THE RETAIL UNIT(S) IS LIKELY TO BE LET AS ONE UNIT – THE HORIZONTAL EMPHASIS OF PROPOSED FENESTRATION IS MORE COORDINATED AND IN KEEPING WITH THE FENESTRATION AREAS FOR UPPER LEVELS.