



Application for a non-material amendment following a grant of planning permission. Town and Country Planning Act 1990

Privacy Notice

This form is provided by Planning Portal and based on the requirements provided by Government for the sole purpose of submitting information to the Local Planning Authority in accordance with the legislation detailed on this form and 'The Town and Country Planning (Development Management Procedure) (England) Order 2015 (as amended).

Please be aware that once you have downloaded this form, Planning Portal will have no access to the form or the data you enter into it. As subsequent use of this form is solely at your discretion, including the choice to complete and submit it to the Local Planning Authority in agreement with the declaration section.

Upon receipt of this form and any supporting information, it is the responsibility of the Local Planning Authority to inform you of its obligations in regards to the processing of your application. Please refer to its website for further information on any legal, regulatory and commercial requirements relating to information security and data protection of the information you have provided.

Local Planning Authority details:

Planning

South Downs National Park Authority South Downs Centre North Street Midhurst GU29 9DH

Tel: 0300 303 1053 Email: planning@southdowns.gov.uk



Publication of applications on planning authority websites

Information provided on this form and in supporting documents may be published on the authority's planning register and website.

Please ensure that the information you submit is accurate and correct and does not include personal or sensitive information. If you requir any further clarification, please contact the Local Planning Authority directly.

If printed, please complete using block capitals and black ink.

It is important that you read the accompanying guidance notes and help text as incorrect completion will delay the processing of your application.

1. Applicant Name and Address			
Title:	MR First name: NICOUAS		
Last name:	KOUSSERTARI		
Company (optional):	,		
Unit:	House House suffix:		
House name:	EVESHAM HOUSE		
Address 1:	RESERVOIR LANE		
Address 2:			
Address 3:			
Town:	PETERSHED		
County:	HAMPSHIRE		
Country:	UK		
Postcode:	(4)27.2.HK		

2. Agent Name and Address			
Title:	MR First name: HNTHONY		
Last name:	HUTCHINGS'		
Company (optional):	ANTHONY HUTCHINGS ARIBA-FRSA		
Unit:	House House suffix:		
House name:	HIUSIDE		
Address 1:	HARROW LANE		
Address 2:			
Address 3:			
Town:	PETERSFIELD		
County:	HAMPSHIRE		
Country:	UK		
Postcode:	60127-287		

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7. Description Of Your Proposal				
Please provide the description of the approved development as shown on the decision letter, including application reference number and date of decision in the sections below:				
CHANGE OF USE FROM A5 TO C3				
SHOP TO ONE BEDROOM DWOUNG				
Will work of the second of the				
Reference number:	Date of decision (DD/MM/YYYY):			
SDNP/19/06145/FUL	04/05/2020			
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 orig	inal application type?			
Householder development: development to an existing dwelling-house or deve	elopment 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:				
(CONTRACTOR ON CONTRACTOR	THAT SHE LITWER			
CONSERVATION OFFICER SUBSESTED	DE DOLLES HELTE			
NEW PROPOSED BRICKNOOLK SHOVED A	BE PATINIED WITH IC			
Are you intending to substitute amended plans or drawings?	∯es V No			
If Yes, please complete the following:				
Old plan/drawing number(s):				
New plan/drawing number(s):				
PHOTOGRAPH AS BUILT.				
Please state why you wish to make this amendment:				
THE NEW LOWER WALL BRICKWORK MATE	CHES TO EXISTING			
BRICKWORK ON THE FIRST FLOOR. LOCAL				
THE RESIDENTS IN SHEED STREETHAS ALL I				
THE BRICKIORR LEFT UNBAINTED (WHITE).				

9. Application Requirements - Checklist Please read the following checklist to make sure you have sent all th information required will result in your application not being accept Local Planning Authority (LPA) has been submitted.					
The original and 3 copies* of a completed and dated application for	m:				
The original and 3 copies* of other plans and drawings or informatio necessary to describe the subject of the application:	on 🗹				
The correct fee:					
*National legislation specifies that the applicant must provide the original plus three copies of the form and supporting documents (a total of four copies), unless the application is submitted electronically or, the LPA indicate that a smaller number of copies is required. LPAs may also accept supporting documents in electronic format by post (for example, on a CD, DVD or USB memory stick). You can check your LPA's website for information or contact their planning department to discuss these options.					
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.					
Signed - Applicant: Or signed - Agent:	Date (DD/MM/YYYY):				
	29/03/2021				
11. Applicant Contact Details	12. Agent Contact Details				
Telephone numbers	Telephone numbers				
Country code: National number: Extension number:	Country code: National number: Extension number:				
Country code: Mobile number (optional):	Country code: Mobile number (optional):				
Country code: Fax number (optional):	Country code: Fax number (optional):				
Email address (optional):	Email address (optional):				
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 that agent/applicant's details)				
If Other has been selected, please provide:					
Contact name:	Telephone number:				
Email address:					