



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

Privacy Notice

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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. Any 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 & Development Trafford Town Hall, Talbot Road, Stretford M32 0TH

TRAFFORD COUNCIL

Office Use Only	
App No:Rec Date:	
Amount: Confidence of the	

0161 912 3149 development.management@trafford.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 require 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. Applic	ant Name and Address	2. Agent	Name and Address
Title:	First name: Sally	Title:	Mr First name:
Last name:	Frier	Last name;	Robinson
Company (optional):	and Clive Marchi	Company (optional):	Pride Road Ltd North Ch
Unit:	House number: 17 House suffix:	Unit:	House number: 35
House name:		House name:	
Address 1:	Stokesay Rd	Address 1:	Collinfield
Address 2:	Sale	Address 2:	
Address 3:		Address 3:	
Town:	Manchester	Town:	, Kendal
County:		County:	Cumbria
Country:		Country:	
Postcode:	M33 6QN	Postcode:	LA9 5JD

Title:	Мг	First name:	Bruce		
Last name;	Robinson				
Company (optional):	Pride Road	Ltd North Che	shire		
Unit:		House number: 35		House suffix:	
House name:					
Address 1:	Collinfield				
Address 2:				- 4	
Address 3:					1.
Town:	, Kendal				
County:	Cumbria	,	140		>
Country:					
Postcode:	LA9 5JD				

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	ddress Details			cation Advice	2004-00-00-00-00-00-00-00-00-00-00-00-00-
Please prov	ide the full postal address of th			or prior advice been sough: this application?	
Unit:	House number: 17	House suffix:	deriving as as	Timo approximant	Yes X No
House name:				mplete the following infor . (This will help the authorit	
Address 1:	Stokesay Rd		application mor	re efficiently).	
Address 2:				e full contact details are no in complete as much as pos	
Address 3:			Officer name:		
	Manchester			- A	
Town:			Reference:		
County:					
Postcode (optional):	M33 6QN		Date of	advice (DD/MM/YYYY):	
Description	of location or a grid reference. Impleted if postcode is not kno		Details of pre-a	application advice received	1
Easting:	Northin				N I
Description		9.			
Detached					
=					
5. Eligib					
	he person on whose behalf you erest in the part of the land to w			X Yes No	
				a nan matarial amar	admana a
	re answered No to this q				iament.
	ot the sole owner, has notification evelopment Management Proc			Yes No	Not Applicable
If you hav	e answered No to this q	uestion, you cannot	apply to make	a non-material ame	ndment.
If you have	answered Yes to this question,	please give details of per	sons notified:		
	Person Notified		Address		Date of Notification
-					
6 Autho	rity Employee / Member		7		
	rtant principle of decision-mak	ing that the process is or	on and transparant	Ear the purposes of this c	westion "rolation to"
means relat	ed, by birth or otherwise, closel at there was bias on the part of	y enough that a fair-mind	ded and informed o	bserver, having considered	
	e following statements apply to		Yes X No	With respect to the Auth	ority.Lam:
	• • • • • • • • • • • • • • • • • • •	- ,	1/3-1	(a) a member of staff	
				(b) an elected member	-1 -> -1t
				(c) related to a member(d) related to an elected	
If yes pleas	e provide details of their name	, role and how you are re	ated to them.		
		, , , , ,			
				4.	

7. Description Of Your Proposal	
Please provide the description of the approved development as show and date of decision in the sections below:	n on the decision letter, including application reference number
Erection of a two storey side and a part single/part two storey rear extension a rear-facing balcony with timber pergola over at first floor level. External alterations to include removal of the porch and creation of a canopy, render property with new and replacement windows. Part II	
Reference number:	Date of decision (DD/MM/YYYY):
101866/HHA/20	05/11/2020
(e.g. 1 dir , 110 discribited and Listed Balloting , Cuttine /	older Planning Application
For the purpose of calculating fees, which of the following best descri	
Householder development: development to an existing dwelling-householder development	ouse 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 m	ake:
Are you intending to substitute amended plans or drawings? If Yes, please complete the following:	X Yes No
Old plan/drawing number(s):	
10, 13, 11A, 12A, and 16	
New plan/drawing number(s):	
10A and 13B	
Please state why you wish to make this amendment:	
A more attractive front elevation and easier access for day-to-day use.	

9. Application Requirements - Checklist Please read the following checklist to make sure you have sent all the information required will result in your application not being accepte	
Local Planning Authority (LPA) has been submitted.	d. It will not be accepted until all moth alton required by the
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:	
*National legislation specifies that the applicant must provide the original of four copies), unless the application is submitted electronically LPAs may also accept supporting documents in electronic format by provided the contact their plants of the contact their plants.	or, the LPA indicate that a smaller number of copies is required. post (for example, on a CD, DVD or USB memory stick).
10. Declaration	
I/we hereby apply for planning permission/consent as described in th information. I/we confirm that, to the best of my/our knowledge, any genuine opinions of the person (s) giving them.	
Signed - Applicant: Or signed - Agent:	Date (DD/MM/YYYY):
	06/07/2021
dd Aunifornt Contact Dataile	The state of the s
11. Applicant Contact Details	12. Agent Contact Details
Telephone numbers	Telephone numbers
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Telephone numbers Country code: National number: Extension number: Country code: Mobile number (optional): Country code: Fax number (optional): 13. Site Visit Can the site be seen from a public road, public footpath, bridleway or	Telephone numbers Country code: National number: Extension number: Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional): bruce@prideroad.co.uk
Telephone numbers Country code: National number: Extension number: Country code: Mobile number (optional): Country code: Fax number (optional): 13. Site Visit	Telephone numbers Country code: National number: Extension number: Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional): bruce@prideroad.co.uk
Telephone numbers Country code: National number: number: Country code: Mobile number (optional): Country code: Fax number (optional): Country code: Fax number (optional): Can the site be seen from a public road, public footpath, bridleway or If the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (Please select only one) If Other has been selected, please provide:	Telephone numbers Country code: National number: Extension number: Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional): bruce@prideroad.co.uk Other public land? X Yes No Applicant Other (if different from the
Telephone numbers Country code: National number: Extension number: Country code: Mobile number (optional): Country code: Fax number (optional): Country code: Fax number (optional): Can the site be seen from a public road, public footpath, bridleway or lifthe planning authority needs to make an appointment to carry out a site visit, whom should they contact? (Please select only one)	Telephone numbers Country code: National number: Extension number: Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional): bruce@prideroad.co.uk Other public land? X Yes No Applicant Other (if different from the

Email a