



# 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. 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 and Sustainable Development**

Correspondence address Cornwall Council - Planning, PO Box 676, Threemilestone, Truro, TR1 9EQ Telephone 0300 1234 151 | Email planning@cornwall.gov.uk

www.cornwall.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. Applicant Name and Address				
Title:	Mrs	First name:	Sally	
Last name:	Veale			
Company (optional):				
Unit:	1 .	louse number:		House suffix:
House name:		Daisy Co	ottage	
Address 1:	St Erme			
Address 2:				
Address 3:				
Town:	Т	ruro		
County:	Co	ornwall		
Country:	UK			
Postcode:	Tr49	9AT		

2. Agent	Name and Address
Title:	First name:
Last name:	
Company (optional):	
Unit:	House number: House suffix:
House name:	
Address 1:	
Address 2:	
Address 3:	
Town:	
County:	
Country:	
Postcode:	

Version 2018.1

3. Site Address Details		4. Pre-application Advice  Has assistance or prior advice been sought from the local					
Please provi	ide the full postal address of  House	the application site.  House		r prior advice been sought this application?			
Unit:	number:	suffix:					
House name:	Daisy Cottage.		you were given.	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			
Address 1:	St Erme.		Please tick if the				
Address 2:			known, and the	n complete as much as poss	sible:		
Address 3:			Officer flame.				
Town:	Truro		Reference:				
County:	Cornwall						
Postcode (optional):	TR49AT		Date of a	advice (DD/MM/YYYY):			
(must be co	of location or a grid reference Impleted if postcode is not k	:e. nown):	Details of pre-a	pplication advice received:			
Easting:	Nortl	ning:					
Description	า:						
	<b>ility</b> he person on whose behalf y erest in the part of the land to			X Yes No			
	e answered No to this			a non-material amen	dment.		
•	ot the sole owner, has notific	-					
Planning (De	evelopment Management Pi	ocedure) (England) Order 2	2015 been given? ´	Yes No	X Not Applicable		
If you hav	e answered No to this	question, you cannot	t apply to make	a non-material amen	dment.		
If you have a	answered Yes to this questio	n, please give details of per	sons notified:				
	Person Notified		Address		Date of Notification		
	rity Employee / Membe			Foodbare Coleter			
means relate	ortant principle of decision-med, by birth or otherwise, clo	sely enough that a fair-min	ded and informed o	bserver, having considered			
	at there was bias on the part ne following statements appl		ne local planning au ] Yes <b>X</b> No	tnority.  With respect to the Autho	ority Lam:		
Do any or an	ic following statements appr	y to you und/or agent.	103	(a) a member of staff	oney, rain.		
				<ul><li>(b) an elected member</li><li>(c) related to a member of</li></ul>	of staff		
				(d) related to an elected i	member		
If yes pleas			Later describer as				
	se provide details of their nar	ne, role and how you are re	elated to them.				

7. Description Of Your Proposal	
Please provide the description of the approved development as shown on the de and date of decision in the sections below:	ecision letter, including application reference number
Alterations to existing garage and letting accomr	nodation to form a separate dwelling.
Reference number:	Date of decision (DD/MM/YYYY):
PA20/07570	17/11/2020
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 original control of the following best describes the origin	ginal application type?
<b>Householder development</b> : development to an existing dwelling-house or dev	velopment 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:	
rease describe the non-material amenament(s) you are seeking to make.	
Using the original two openings, replace garage doo	rs with triple sliding
doors.	
Are you intending to substitute amended plans or drawings?	Yes No
If Yes, please complete the following:	
Old plan/drawing number(s):	
New plan/drawing number(s):	
new plant/drawing number(s).	
Please state why you wish to make this amendment:	

9. Application Requirements - Checklist Please read the following checklist to make sure you have sent all t 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	form:
The original and 3 copies* of other plans and drawings or informat necessary to describe the subject of the application:	ation
The correct fee:	
•	· · · · · · · · · · · · · · · · · · ·
10. Declaration  I/we hereby apply for planning permission/consent as described in information. I/we confirm that, to the best of my/our knowledge, a genuine opinions of the person(s) giving them.  Or signed - Agen	any facts stated are true and accurate and any opinions given are the
11. Applicant Contact Details	12. Agent Contact Details
	Telephone numbers  Country code: National number:  Country code: Mobile number (optional):  Country code: Fax number (optional):  Email address (optional):
13. Site Visit	
Can the site be seen from a public road, public footpath, bridleway	Y OH OF HE
Can the site be seen from a public road, public footpath, bridleway If the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (Please select only one)	Other (if different from the
Can the site be seen from a public road, public footpath, bridleway If the planning authority needs to make an appointment to carry	☐ Agent X Applicant ☐ Other (if different from the

Email address: