

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: M	First name: Phil			
Last name:	Crossley			
Company (optional):				
Unit:	House number: House suffix:			
House name:	Woodsmoor			
Address 1:	Pithytan Rd.			
Address 2:	Eavitan Grate			
Address 3:				
Town:	Houghton le Spring			
County:	Durham			
Country:	UK			
Postcode:	DH5 9RG			

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:				

Please provi	I walke feel on and malabores a fallon conditional on their	The region of the control of the con							
r	de the full postal address of the application site.	Has assistance or prior advice been sough authority about this application?							
Unit:	House House suffix:	authority about this applications	Yes No						
House name:	Woodswar If Yes, please complete the following information about the advice you were given. (This will help the authority to deal with this								
Address 1:	Pithyatzu real	application more efficiently). Please tick if the full contact details are no	t						
Address 2:	Raintan Gate	known, and then complete as much as po	ssible:						
Address 3:		Officer name:							
Town:	Houghton le Spring	Reference:							
County:	Durham								
Postcode (optional):	415 9 PG	Date of advice (DD/MM/YYYY):							
Description (must be co	of location or a grid reference. mpleted if postcode is not known):	Details of pre-application advice received	Details of pre-application advice received:						
Easting:	Northing:								
Description		—— 							
5. Eligibi									
Do you, or the have an inte	e person on whose behalf you are making this a rest in the part of the land to which this amendm	pplication, nent relates? Yes No							
If you hav	e answered No to this question, you ca	annot apply to make a non-material ame	ndment.						
If you are no	t 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 a	or appreciation of the contract of the contrac								
	nswered Yes to this question, please give details	The second section of the section of the second section of the section of the second section of the second section of the section of th							
	Person Notified	of persons notified: Address	Date of Notification						
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	Person Notified	The second section of the section of the second section of the section of the second section of the second section of the section of th	Date of Notification						
6. Author		Address	Date of Notification						
With respec	ity Employee / Member t to the Authority, I am:	The second section of the section of the second section of the section of the second section of the second section of the section of th	Date of Notification						
With respect (a) a memb (b) an elect	ity Employee / Member t to the Authority, I am: er of staff ed member	Address	Date of Notification						
With respect (a) a memb (b) an elect (c) related t	ity Employee / Member t to the Authority, I am: er of staff	Do any of these statements apply to you?	Date of Notification						
With respect (a) a memb (b) an elect (c) related (d) related	ity Employee / Member t to the Authority, I am: er of staff ed member o a member of staff	Address Do any of these statements apply to you?	Date of Notification						
With respect (a) a memb (b) an elect (c) related (d) related	ity Employee / Member t to the Authority, I am: er of staff ed member o a member of staff to an elected member	Address Do any of these statements apply to you?	Date of Notification						
With respect (a) a memb (b) an elect (c) related (d) related	ity Employee / Member t to the Authority, I am: er of staff ed member o a member of staff to an elected member	Address Do any of these statements apply to you?	Date of Notification						

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:					
Two storey side of veur extensión & single storey mear extensión					
Reference number: Date of decision (DD/MM/YYYY):					
DM/22/00321/FPA 30/03/2022					
What was the original application type?: (e.g. 'Full', 'Householder and Listed Building', 'Outline') Householder					
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					
8. Non-Material Amendment(s) Sought					
Please describe the non-material amendment(s) you are seeking to make:					
x 2 sets of french doors added to replace single set of doors to kitchen Divier					
Buy wurdow to office replaced with feat window					
Kayon window to Bertimon 4 medical with floot window.					
First Apper landling true window verdenced with feat window					
Last of freeds down to but women luceased to 1500 mm					
with of french dans to buturoun inceased to 1500 mm Bushy switchest to lower half of property rendered to match existing					
Are you intending to substitute amended plans or drawings?					
If Yes, please complete the following:					
Old plan/drawing number(s):					
MAD 489/2 MAD 489/4/19					
New plan/drawing number(s):					
MAD 489/2/A MUND 489/4/1B'					
Please state why you wish to make this amendment:					
Requirements have changed					

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 has been submitted.	information in support of your proposal. Failure to submit all d. It will not be accepted until all information 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:				
10. Declaration I/we hereby apply for planning permission/consent as described in the information. Signed - Applicant: Or signed - Agent:	is form and the accompanying plans/drawings and additional Date (DD/MM/YYYY): 01/02/2023			
11. Applicant Contact Details	12. Agent Contact Details			
Telephone numbers Country code: National number: Country code: M Country code: Fa Email address (optional):	Telephone numbers Country code: National number: Extension number: Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional):			
Can the lifthe l	lic land? Yes No gent Applicant Other (if different from the agent/applicant's details)			