



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

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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:

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Planning Section	
North Norfolk District Council	The second s
NOFIN NOFIOIK DISIFICI GOUNCII	
Holt Road, Cromer, Norfolk NR27 9EN	
HOIL BORD, CROTTER, NORTOIK, NBZ7 9EN	
T-l	NODTU
Telephone: 01263 516150 / 516151 / 516143	
	NODEOL
email: planning@north-norfolk.gov.uk	
official planning enorth nortein.gov.uk	
	DISTRICT COUNCI

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		2. Agent Name and Address		
Title:	MRS First name: IRENE	Title: MF First name: STUART		
Last name:	VALLANCE	Last name: SMITH		
Company (optional):		Company (optional): SMG ARCHITECTS LTD		
Unit:	House House suffix:	Unit: House House suffix:		
House name:	THE STABLES	House name: THE STUDIO		
Address 1:	BOUNDARY FARM	Address 1: ST PETERS ROAD		
Address 2:	SWANTON ROAD	Address 2:		
Address 3:	GUNTHORPE	Address 3:		
Town:	MELTON CONSTABLE	Town: SHERINGHAM		
County:	NORFOLK	County: NORFOLK		
Country:		Country:		
Postcode:	NR24 2NS	Postcode: NR26 8QY		
		Version 2018.1		

3. Site Address Details				cation Advice	
Please provide the full postal address of the application site.			r prior advice been sought f		
Unit:	House number:	House suffix:		this application?	Yes X No
House name:	THE STABLES		you were given.	mplete the following inform (This will help the authority	
Address 1:	BOUNDARY FARM		application mor Please tick if the	e efficiently). full contact details are not	
Address 2:	SWANTON ROAD			n complete as much as poss	sible:
Address 3:	GUNTHORPE		Officer name:		
Town:	MELTON CONSTABLE		Reference:		
County:	NORFOLK				
Postcode (optional):	NR24 2NS		Date of a	advice (DD/MM/YYYY):	
Description (must be co	of location or a grid reference mpleted if postcode is not kr	ce. nown):	Details of pre-a	pplication advice received:	
Easting:	North	ning:			
Description	1:				
5. Eligibi	lity				
	ne person on whose behalf y rest in the part of the land to			X Yes No	
1	e answered No to this			a non-material ameno	dment.
lf you are no	t the sole owner, has notifica	ation under article 10 of the	Town and Country		
Planning (De	evelopment Management Pr	ocedure) (England) Order 2	015 been given?	Yes No	X Not Applicable
If you hav	e answered No to this	question, you cannot	apply to make	a non-material ameno	dment.
If you have a	answered Yes to this question	n, please give details of pers	sons notified:		
	Person Notified		Address		Date of Notification
6 Author	rity Employee / Membe)r			
	rity Employee / Membe		an and transportant	For the number of this of	eastion "relating to"
It is an important principle of decision-making that the process is open and transparent. For the purposes of this question "relating to" means related, by birth or otherwise, closely enough that a fair-minded and informed observer, having considered the facts , would conclude that there was bias on the part of the decision-maker in the local planning authority.					
	Do any of the following statements apply to you and/or agent? \Box Yes x No With respect to the Authority, I am:				
	.			(a) a member of staff	anna 👷 🔭 a bhannanna
				(b) an elected member(c) related to a member o	f staff
				(d) related to an elected r	
If yes please provide details of their name, role and how you are related to them.					

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: GUNTHORPE, BOUNDARY FARM, OUTBUILDINGS: PROPOSEI RESIDENTIAL USE	
Reference number:	Date of decision (DD/MM/YYYY):
01/74/1262/F	22/ 11 / 1974
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 describe	es the original application type?
Householder development: development to an existing dwelling-hou	use or development within its curtilage
Other: anything not covered by the above category	X
3. Non-Material Amendment(s) Sought	
Please describe the non-material amendment(s) you are seeking to maker	ke:
REDUCTION IN SIZE OF DORMER TO SOUTH ELEVATION CHANGING JOINERY TO UPVC INTRODUCING ROOF LIGHTS TO NORTH ELEVATION	
Are you intending to substitute amended plans or drawings?	X Yes No
f Yes, please complete the following:	
Old plan/drawing number(s):	
WD/1717/1 & WD/297/3	
New plan/drawing number(s):	
23.5109.011 / PL01	
Please state why you wish to make this amendment:	
THE DORMER WILL NOW WORK WITHOUT AFFECTING THE CU THE JOINERY WILL MATCH THAT CURRENTLY INSTALLED WIT ROOF LIGHTS WILL PROVIDE VALUABLE DAYLIGHT INTO THE	THIN REMAINDER OF CONVERTED BUILDING

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.			
The original and 3 copies* of a completed and dated application form	n: 🛛 🗙		
The original and 3 copies* of other plans and drawings or information necessary to describe the subject of the application:			
The correct fee:	X		
*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):		
	25 / 05 / 2023		
11. Applicant Contact Details	12. Agent Contact Details		
Telephone numbers Extension Country code: National number: Country code: Mobile number (optional): Country code: Fax number (optional): Country code: Fax number (optional): Email address (optional):	Telephone numbers Extension number: Country code: National number: 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 If the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (<i>Please select only one</i>) If Other has been selected, please provide: Contact name:	r other public land? X Yes No Agent X Applicant Other (if different from the agent/applicant's details) Telephone number:		