

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 Section

North Norfolk District Council Holt Road, Cromer, Norfolk NR27 9EN

Telephone: 01263 516150 / 516151 / 516143

email: planning@north-norfolk.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:	Anna		
Last name:	Sands				
Company (optional):					
Unit:		House number:		House suffix:	
House name:	Bodney Hall				
Address 1:	Bodney				
Address 2:					
Address 3:					
Town:	Thetford				
County:	North Norfolk				
Country:					
Postcode:	IP26 5BX				

2. Agent	Name and	l Address		
Title:	Mr	First name:	Peter	
Last name:	Lowe			
Company (optional):	Napier Cl	arke Archi	tects	
Unit:		House number:		House suffix:
House name:				
Address 1:	72 West S	Street		
Address 2:				
Address 3:				
Town:	Marlow			
County:	Buckingha	amshire		
Country:	UK			
Postcode:	SL7 2BP			

Version 2018.

	ddress Details ide the full postal address of	the application site.		cation Advice or prior advice been sought	from the local	
Unit:	House	House	authority about	this application?	Yes V No	
House name:	number: suffix: Snuggle Cottage		If Yes, please complete the following information about the advic			
Address 1:	: Main Road		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 2:			11	n complete as much as pos		
Address 3:			Officer name:			
Town:	Holkham		Reference:			
County:						
Postcode (optional):	NR23 1RW		Date of a	advice (DD/MM/YYYY):		
Description of location or a grid reference. (must be completed if postcode is not known):		Details of pre-application advice received:				
Easting: 5		hing: 343920				
Description	n:					
F. Flimib	:1:4				-	
	he person on whose behalf	you are making this applicati o which this amendment rela		✓ Yes No		
	•	question, you cannot		a non-material amen	dment.	
		ation under article 10 of the rocedure) (England) Order 20		☐ Yes ☐ No	✓ Not Applicable	
_		question, you cannot				
•		on, please give details of pers		a mon-material amen	ament.	
II you have	Person Notified	, picuse give details of pers	Address		Date of Notification	
Anna Sai	nde	Bodney Hall, Bodney,	Thetford North N	09.06.2022		
Ailia Gai	nus	Bodney Hall, Bodney,	THERIOIA, NORTH	VOHOIK, II 20 3BX	09.00.2022	
It is an impo	ed, by birth or otherwise, clo	naking that the process is op osely enough that a fair-mind	led and informed o	bserver, having considered		
	•	t of the decision-maker in the		•	avita e I a aa	
Do any or tr	ne following statements app	iy to you and/or agent?	Yes No	With respect to the Author (a) a member of staff (b) an elected member (c) related to a member of		
				(d) related to an elected		
If yes pleas	se provide details of their na	me, role and how you are rel	ated to them.			

7. Description Of Your Proposal	
Please provide the description of the approved development as shown on the decand date of decision in the sections below:	ision letter, including application reference number
Alterations and single storey extensions to existing dwelling with new	annex
Reference number:	Date of decision (DD/MM/YYYY):
PF/23/0299	03.04.2023
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	nal 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:	
Total of three additional rooflights added to ground floor bedrooms	
Are you intending to substitute amended plans or drawings?	Yes No
If Yes, please complete the following:	
Old plan/drawing number(s):	
SC_00_2001_Proposed Roof Plan (Rev. A)	
New plan/drawing number(s):	
SC_00_2001_Proposed Roof Plan (Rev. B)	
Please state why you wish to make this amendment:	
To provide secure night time ventilation to bedrooms to comply	with Building Regulations

9. Application Requirements - Checkli Please read the following checklist to make sure information required will result in your application Local Planning Authority (LPA) has been submitted.	you have sent all the on not being accepte		. ,	
The original and 3 copies* of a completed and da	ated application form	n:		
The original and 3 copies* of other plans and dra necessary to describe the subject of the application	wings or informatior ion:	n 🗌		
The correct fee:				
*National legislation specifies that the applicant total of four copies), unless the application is sub LPAs may also accept supporting documents in a You can check your LPA's website for information	mitted electronically electronic format by p	or, the LPA indica post (for example,	te that a smaller number of copie on a CD, DVD or USB memory sti	es is required.
10. Declaration				-
I/we hereby apply for planning permission/conseinformation. I/we confirm that, to the best of my genuine opinions of the person(s) giving them.				
Signed - Applicant:	Or signed - Agent:		Date (DD/MM/YYYY)):
	Peter Lowe		08.06.2023	
11. Applicant Contact Details		12. Agent Co	ontact Details	
Telephone numbers		Telephone num	bers	
Country code: National number:	Extension number:	Country code:	National number:	Extension number:
Country code. National number.	Tidiliber.	+44	01628487808	Tumber.
Country code: Mobile number (optional):		Country code:	Mobile number (optional):	
mosile namber (optional).			mosne namber (optional).	
Country code: Fax number (optional):		Country code:	Fax number (optional):	
Email address (optional):	Email address (d	pptional):		
13. Site Visit				
Can the site be seen from a public road, public for	ootnath bridleway or	r other public land	2 Z Vas Na	
If the planning authority needs to make an appo		other public land	V 133	1:00
out a site visit, whom should they contact? (Pleas	se select only one)	Agent		different from the oplicant's details)
If Other has been selected, please provide:		-		
Contact name:		Telephone num	oer:	
Anna Sands				

Email address: