Planning Development Management, Shirehall, Abbey Foregate, Shrewsbury, SY2 6ND Tel: 0345 678 9004 Email: customer.service@shropshire.gov.uk www.shropshire.gov.uk/planning



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		2. Agent Name and Address
Title:	MR First name: BARRY	Title: First name:
Last name:	LEWIS	Last name:
Company (optional):	N/A	Company (optional):
Unit:	House number: 3 House suffix:	Unit: House house suffix:
House name:	YEN TREE BANK	House name:
Address 1:	BOMERE HEATH	Address 1:
Address 2:		Address 2:
Address 3:		Address 3:
Town:	SHEEWSBURY	Town:
County:	SHEOPSHIRE	County:
Country:	ENGLAND	Country:
Postcode:	SY4 3PJ	Postcode:

3. Site Address Details	4. Pre-application Advice				
Please provide the full postal address of the application site.	Has assistance or prior advice been sought from the local authority about this application?	₹No			
unit: number: suffix:		-			
House name:	If Yes, please complete the following information about the a you were given. (This will help the authority to deal with this	advice			
Address 1: YEN TREE BANK	application more efficiently).				
Address 2: BOMERE HEATH	Please tick if the full contact details are not known, and then complete as much as possible:				
Address 3:	Officer name:				
Town: SHREWSBURY	Reference:				
County: SHEDPSHIRE					
Postcode (optional): 544 3PJ	Date of 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: Northing:					
Description:					
]			
5. Eligibility					
Do you, or the person on whose behalf you are making this application					
have an interest in the part of the land to which this amendment relates?					
If you have answered No to this question, you cannot	apply to make a non-material amendment.				
If you are not the sole owner, has notification under article 9 of the D	MPO been given? Yes No Not Applica	ble			
If you have answered No to this question, you cannot a					
If you have answered Yes to this question, please give details of perso		tion 1			
Person Notified	Address Date of Notific	ation			
6. Authority Employee / Member					
With respect to the Authority, I am: Do any of these statements apply to you?					
(a) a member of staff (b) an elected member	Yes No				
(c) related to a member of staff					
(d) related to an elected member					
(d) related to an elected member					
(d) related to an elected member If yes please provide details of the name, relationship and role					

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:					
EPECTION OF A SINGLE STOREY EXTEND	Sions				
Reference number:	Date of decision (DD/MM/YYYY):				
23/01662/FUL	02/06/2023				
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 origin	nal application type?				
Householder development: development to an existing dwelling-house or devel	lopment 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:					
· REDUCE THE DIMENSIONS OF THE EXTENSION BY 2 METERS. NEW DIMENSION					
	•				
· REPLACE BI-FOLD DOOR WITH FRENCH F	20005				
· Cut opening For New Door ANS FRAME WHERE EXISTING WINDOW IS					
· CHANG USE FROM DINING /KITCHEN TO LOUNDE.					
	energe.				
Are you intending to substitute amended plans or drawings?	Yes ⊡ No				
Are you intending to substitute amended plans or drawings? Yes No					
Old plan/drawing number(s):					
No NHUMBER					
New plan/drawing number(s):					
23/01662/)					
Please state why you wish to make this amendment:					
CHANGE THE USE OF THE EXTENSION FROM KITCHEN/DINING TO LOUNGE					
WILL NEGATE THE NEED FOR FOUL DEATING TO BE CONSTRUCTED.					
THE EXISTING LOUNGE WILL BECOME A KITCHEN AND THE KITCHEN					
WAIST WILL DISCHARGE TO THE EXISTING FOUL DRAINS.					
DLAINS .					

9. Application Requirements - Checklist Please read the following checklist to make sure you have sent all the information in support of your proposal. Failure to submit all information required will result in your application not being accepted. It will not be accepted until all information required by the Local Planning Authority has been submitted.					
The original and 3 copies of a completed and dated application for	rm:				
The original and 3 copies of other plans and drawings or information necessary to describe the subject of the application:	on 🖌				
The correct fee:					
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. Or signed - Agent: Date (DD/MM/YYYY): I/2 / 03 / 2024.					
11. Applicant Contact Details	12. Agent Contact Details				
Telephone numbers	Telephone numbers				
Country code: National number: number: Country code: Mobile number (optional):	Country code: National number:				
Email address (optional):	Email address (optional):				
13. Site Visit					
Can the site be seen from a public road, public footpath, bridleway or other public land? Yes No					
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:					
Contact name:	Telephone number:				
Email address:					

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Please read the following checklist to make sure you have sen	t all the information in support of your proposal. Failure to submit all accepted. It will not be accepted until all information required by the				
The original and 3 copies of a completed and dated applicatio	on form:				
The original and 3 copies of other plans and drawings or infor necessary to describe the subject of the application:	mation				
The correct fee:					
10. Declaration I/we hereby apply for planning permission/consent as describ information. I/we confirm that, to the best of my/our knowled genuine opinions of the person(s) giving them.	bed in this form and the accompanying plans/drawings and additional lige, any facts stated are true and accurate and any opinions given are the Agent: Date (DD/MM/YYYY): 12/03/2024				
11. Applicant Contact Details	12. Agent Contact Details				
Telephone numbers Country code: National number: Exter	nsion ber: Country code: National number: Extension number:				
Country code: Mobile number (optional):	Country code: Mobile number (optional): Country code: Fax number (optional):				
Email address (optional):	Email address (optional):				
Can the site be seen from a public road, public footpath, bridleway or other public land? Yes No					
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:	Telephone number:				
Email address:					

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