

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. Applic	ant Name and Address	2. Agent Name and Address
Title:	Mr & Ms First name: Joe and Olivia	Title: Mr First name: Andrew
Last name:	Courtney & Oakham –O'Shea	Last name: Lockley
Company (optional):		Company (optional):
Unit:	House 35 House suffix:	Unit:House number:House suffix:
House name:		House name:
Address 1:	Victoria Road	Address 1: Maple Drive
Address 2:		Address 2: Heath Farm
Address 3:		Address 3:
Town:	Shrewsbury	Town: Shrewsbury
County:	Shropshire	County: Shropshire
Country:	England	Country: England
Postcode:	SY3 9HX	Postcode: SY1 3SE

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 authority about this application?	
Unit:	House number: 35	House suffix:		X Yes No
House name:			If Yes, please complete the following inform you were given. (This will help the authority	
Address 1:	Victoria Road		application more efficiently). Please tick if the full contact details are not	
Address 2:			known, and then complete as much as poss	sible:
Address 3:			Officer name: Enforcement department	
Town:	Shrewsbury		Reference:	
County:	Shropshire			
Postcode (optional):	SY3 9HX		Date of advice (DD/MM/YYYY):	
Description (must be co	of location or a grid reference mpleted if postcode is not kn	e. own):	Details of pre-application advice received:	
Easting:	Northi	ng:	Due to a neighbours concerns a no	on-material
Descriptior):		application was recommended be	submitted
			to highlight the differenced to the o	nginai approvai
have an inte If you hav If you are no If you hav	the person on whose behalf yc erest in the part of the land to the answered No to this of the sole owner, has notificat	which this amendment re question, you canno tion under article 9 of the question, you canno	elates? Ites NO ot apply to make a non-material amen DMPO been given? Yes No ot apply to make a non-material amen	Not Applicable
6. Author	rity Employee / Member			
With respec (a) a memb (b) an elec (c) related	ct to the Authority, I am:		o any of these statements apply to you? Yes X No	
If yes pleas	se 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:

The existing approval did not have an overhang of the eaves to the real is higher than the approved one. a window (non opening) has been inst the roof space.	
Reference number:	Date of decision (DD/MM/YYYY):
23/01391/FUL (original approval) 23/02262/AMP	original application 16th May 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 orig	inal application type?
Householder development: development to an existing dwelling-house or development	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:	
1, The 800mm overhang of the flat roof to the rear where in the origin 2, The insertion of a lantern window in the rear flat roof instead of a pl 3, A fixed window inserted in the side of the gable wall in the loft spac	an pane of glass which was proposed.
Are you intending to substitute amended plans or drawings?	Yes No
If Yes, please complete the following:	
Old plan/drawing number(s):	
N/A	
New plan/drawing number(s):	
N/A	
Please state why you wish to make this amendment:	
Answering the concerns that were raised to the enforcement team at	pout the variations to the original approval.

9. Application Requirements - Checkli Please read the following checklist to make sure information required will result in your application Local Planning Authority has been submitted.	you have sent all the			
The original and 3 copies of a completed and da	ted application form:	X		
The original and 3 copies of other plans and drawnecessary to describe the subject of the applicat		X		
The correct fee:		SEE A	GENT	
10. Declaration I/we hereby apply for planning permission/conse information. I/we confirm that, to the best of my/ genuine opinions of the person(s) giving them. Signed - Applicant:	ent as described in th our knowledge, any f Or signed - Agent: A LOCKLEY	is form and the acc facts stated are true	ompanying plans/drawings and and accurate and any opinions Date (DD/MM/YYYY): 27/04/2024	additional given are the
11. Applicant Contact Details		12. Agent Co	ntact Details	
Telephone numbers		Telephone numb	ers	
Country code: National number: Country code: Mobile number (optional):	Extension number:	Country code:	National number:	Extension number:
Country code: Fax number (optional):				
Email address (optional):				
13. Site Visit				
13. Site Visit Can the site be seen from a public road, public f	ootpath, bridleway o	other public land?	X Yes No	

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Other (if different from the agent/applicant's details)

Telephone number:

If Other has been selected, please provide:

Contact name:

Email address: