



12/00358/NMA



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:	MRS First name: SEAN		
Last name:	WINSTON		
Company (optional):			
Unit:	House number: 15 House suffix:		
House name:			
Address 1:	ELMWOOD AVENUE		
Address 2:			
Address 3:	•		
Town:	HOCKLEY		
County:	ESSEX		
Country:	U.K.		
Postcode:	SS5 4ND		

2. Agent Name and Address			
Title:	MR First name: CAVEN		
Last name:	GOVIER		
Company (optional):	MODUS CONSTRUCTION		
Unit:	House number: 63 House suffix:		
House name:			
Address 1:	LIFSTAN WAY		
Address 2:			
Address 3:			
Town:	SOUTHEND		
County:	ESSEX		
Country:	V. K		
Postcode:	SSI 2×Q		

	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: 15 House suffix:		Yes No			
House name:	If Yes, please complete the following inform you were given. (This will help the authority				
Address 1: ELM WOODAVENUE	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: Steve Tonge Duty P	Jannin Mice			
Town: HOCKLEY	Reference:	The state of the s			
County: ESSEX					
Postcode (optional): SS5 4-ND	Date of advice (DD/MM/YYYY):	23/5/2012			
Description of location or a grid reference. (must be completed if postcode is not known):	Details of pre-application advice received:				
Easting: Northing:	Steve Tonge, yes Pine	butchede			
Description:					
	Panning Officer. Yes line make minor amonda	est application			
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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 rela	ites? Yes No				
If you have answered No to this question, you cannot	apply to make a non-material amen	dment.			
If you are not the sole owner, has notification under article 9 of the D	MPO been given? Yes No	Not Applicable			
 If you have answered No to this question, you cannot	apply to make a non-material amen	dment.			
If you have answered Yes to this question, please give details of pers					
Person Notified	Address	Date of Notification			
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6. Authority Employee / Member					
,	any of these statements apply to you?				
With respect to the Authority, I am: Do (a) a member of staff					
With respect to the Authority, I am: Do (a) a member of staff	any of these statements apply to you?				
With respect to the Authority, I am: Do (a) a member of staff (b) an elected member					
With respect to the Authority, I am: (a) a member of staff (b) an elected member (c) related to a member of staff					
With respect to the Authority, I am: (a) a member of staff (b) an elected member (c) related to a member of staff (d) related to an elected member					

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:				
Construct Single Stovey Flat Roofed Rear Extension				
Rear Extension				
Reference number: Date of decision (DD/MM/YYYY):				
11/00649/FUL 23/12/2011				
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 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:				
Small change in shape to vear extension to pain a bit move vowam internally.				
to agin a bil more volume.				
Are you intending to substitute amended plans or drawings?				
If Yes, please complete the following:				
0ld plan/drawing number(s): 11 -117-002 and 11-117-003				
New plan/drawing number(s):				
New plan/drawing number(s):				
New plan/drawing number(s): 11-117-003 A and 11-117-003 A				
N-N7-002 A and N-N7-003 A Please state why you wish to make this amendment:				
11-117-002 A and 11-117-003 A				
N-117-002 A and N-117-003 A Please state why you wish to make this amendment:				

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 form	1:				
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 tinformation. Signed - Applicant: Or signed - Agent:					
11. Applicant Contact Details	12. Agent Contact Details				
Telephone numbers Country code: National number: Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional):	Telephone numbers Country code: National number: Country code: Mobile number (optional): Country code: Fax number (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)	Agent Applicant Other (if different from the agent/applicant's details)				
If Other has been selected, please provide: Contact name:	Telephone number:				

Email address: