

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:	MR	First name:	SHANE		
Last name:	HORRIDGE				
Company (optional):					
Unit:		House number:	21	House suffix:	
House name:					
Address 1:	HAMPTON GROVE				
Address 2:					
Address 3:					
Town:	BURY				
County:					
Country:					
Postcode:	BL9 6PT				

2. Agent Name and Address

Title:		First name:			
Last name:					
Company (optional):					
Unit:		House number:		House suffix:	
House name:					
Address 1:					
Address 2:					
Address 3:					
Town:					
County:					
Country:					
Postcode:					

3. Site Address Details

Please provide the full postal address of the application site.

Unit:		House number:	21	House suffix:	
House name:					
Address 1:	HAMPTON GROVE				
Address 2:					
Address 3:					
Town:	BURY				
County:					
Postcode (optional):	BL9 6PT				
Description of location or a grid reference. (must be completed if postcode is not known):					
Easting:		Northing:			
Description: 					

4. Pre-application Advice

Has assistance or prior advice been sought from the local authority about this application? ☒ Yes ☐ No

If Yes, please complete the following information about the advice you were given. (This will help the authority to deal with this application more efficiently).

Please tick if the full contact details are not known, and then complete as much as possible: ☐

Officer name:

THOMAS Beirne

Reference:

PD537413192

Date of advice (DD/MM/YYYY):

07.08.23

Details of pre-application advice received:

CHECKED ON ALTERATIONS REQUIRED AND ADVISED ON THIS FORM TO BE COMPLETED.

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?

☒ Yes ☐ No

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 DMPO been given? ☐ Yes ☐ No ☐ Not Applicable

If you have answered No to this question, you cannot apply to make a non-material amendment.

If you have answered Yes to this question, please give details of persons notified:

Person Notified	Address	Date of Notification

6. Authority Employee / Member

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

Do any of these statements apply to you?

☐ Yes ☒ No

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:

EXTENSION TO FRONT, SIDE AND REAR OF EXISTING PROPERTY.

Reference number:ApplicationNo:66295

Date of decision (DD/MM/YYYY):19.12.20

What was the original application type?:
(e.g. 'Full', 'Householder and Listed Building', 'Outline')

HOUSEHOLDER

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:

I WISH TO MAKE AN AMENDMENT TO THE ROOF FINISH AT THR RIGHT SIDE OF THE PORCH AT THE FRONT OF THE PROPERTY & THE LEFT SIDE OF THE REAR (BOUNDARY SIDE). ORIGINAL APPROVAL WAS TO FINISH WITH HIP ROOFS, A TOTAL OF 4X HIPS, HOWEVER I WOULD LIKE TO CHANGE THE ROOF FINISH THE PIKE STYLE AT THE ABOVE MENTIONED AREAS.

Are you intending to substitute amended plans or drawings?☐ Yes☐ No

If Yes, please complete the following:

Old plan/drawing number(s):

B/HJ/21Ham/1, B/HJ/21Ham/2

New plan/drawing number(s):

IF REQUIRED

Please state why you wish to make this amendment:

I FEEL THE ROOFS WILL FINISH BETTER IN THIS STYLE TO MATCH THE SURROUNDING ROOFLINES AROUND CLOSE PROXSIMITY TO MY PROPERTY AND WILL BE MORE TO MY PREFERENCE. I HAVE INFORMED THE NEIGHBOURING PROPERTY OF MY INTENSIONS AND THEY ARE HAPPY WITH THEM.