		For office use Application No Date received	D.
RIBBLE VALLEY BOROUGH COUNCIL		Fee paid £	Receipt No:
Council Offices Church Walk	Clithoroo Lancachiro E	1200 /25111	www.ribblevallev.gov.uk

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.

1. Applicant Name, Address and Contact Details						
Title: Mrs	First Name:	Amanda		Surname:	Oakden	
Company name:	Chipping Homes L	td				
Street address:	Units A2-A6 Edge	Fold Industrial				
	Plodder Lane		Telephone numb	er:		
	Farnworth		Mobile number:			
Town/City:	Bolton		Fax number:			
Country:			Email address:			
Postcode:	BL4 0LR					
Are you an agent acting on behalf of the applicant?		🖲 Yes 🔘 N	lo			

2. Agent Name, Address and Contact Details						
Title: Mrs	First Name:	Amanda		Surname:	Oakden	
Company name:	Chadkirk Consultin	g Ltd				
Street address:	Units A2-A6 Edge I	Fold Industrial				
	Plodder Lane		Telephone numb	er: 0781	1132985	
	Farnworth		Mobile number:			
Town/City:	Bolton		Fax number:			
Country:			Email address:			
Postcode:	BL4 0LR		amanda@chadkirkconsulting.co.uk			

3. Site Address Details

Full postal addre	ss of the site (including full postcode where available	e) Description:
House:	Suffix:	
House name:		
Street address:	Church Raike	
Town/City:	CHIPPING	
Postcode:	PR3 2QL	
	ecation or a grid reference eted if postcode is not known):	
Easting:	362148	
Northing:	443371	

4. 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?			\bigcirc	No
If you are not the sole owner, has notification under article 10 of the Town and Country Planning (Development Management Procedure) (England) Order 2015 been given?			\bigcirc	No 💿 Not Applicable
Person notified	Address			Date of notification (DD/MM/YYYY)
	Number: Suffix: House name:			
	Street:			
	Town:			
	Postcode:			

5. Description of Your Proposal Description of Approved Development: The development proposed is for full planning permission for works and change of use to the Grade II listed Kirk Mill to create a hotel (18 bed, use class C1) and a bar and restaurant (use class A3), works to the barn buildings to create seven holiday cottages (use class C1), construction of a hotel and spa (20 bed use class C1), wedding venue (use class D1), kids club (use class D1) and trailhead centre (use class D1 and A3), change of use of Malt Kiln House from residential use to class C1, construction of a new cricket pavilion (Sui Generis), demolition of the group of derelict factory buildings. Outline planning permission for 60 residential dwellings split over 2 sites with a maximum of 56 and 4 units each, with all matters reserved except for access). Reference number: 3/2014/0183 *Date of decision (DD/MM/YYYY): 18/04/2016

What was the original application type?

Full planning & listed building consent

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

6. Non-Material Amendment(s) Sought				
*Please describe the non-material ame	endment(s) you are seeking to make:			
i de la companya de l	ot B. The approved drawing is referenced in condition	4 - TPMA1001 - 108.		
Are you intending to substitute amende	ed plans or drawings?	. Yes ⊇ No		
Old plan/drawing numbers:	TPMA1001 - 108			
New plan/drawing numbers:	3081-SHD-00-ZZ-DR-C-SK001 P1			
Please state why you wish to make thi	is amendment:			
The site access has been re designed	d to allow for the retention of the tree to the west.			
7. Pre-application Advice				
Has assistance or prior advice been so	ought from the local authority about this application?	💿 Yes 🔾 No		
If Yes, please complete the following in	nformation about the advice you were given (this will h	help the authority to deal with this application more efficiently):		
Officer name:				
Title: Mr First name:	Robert	Surname: Major		
Reference:				
Date (DD/MM/YYYY): 14/06/2017	(Must be pre-application submission)			
Details of the pre-application advice re				
Type of application required.				
8. Site Visit				
Can the site be seen from a public roa	ad, public footpath, bridleway or other public land?	Yes O No		
	e an appointment to carry out a site visit, whom should			
		I THEY CONTACT? (Flease select only one)		
The agent O The applicant O Other person				
9. Authority Employee/Membe	۶r			
With respect to the Authority, I am: (a) a member of staff				
(b) an elected member	Do any of these statements app	ply to you? Q Yes 💿 No		
(c) related to a member of state(d) related to an elected memory				
10. Declaration				
	sion/consent as described in this form and the accomp			
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.				

Planning Portal Reference : PP-06160321