



21.10.19 21.10.19 033635

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:	First name:	Title: MR First name: STUART	
Last name:		Last name: HERD	
Company (optional):	J-J HOMES (NW) LLP	Company (optional): SUNDERLAND PEACOCK & ASSOC. LTD	
Unit:	House House suffix:	Unit: House number: House suffix:	
House name:	CO AGENT	House name: HAZELMELE	
Address 1:		Address 1: PIMLICO ROAD	
Address 2:		Address 2:	
Address 3:		Address 3:	
Town:		Town: CLITHEROE	
County:		County:	
Country:		Country:	
Postcode:		Postcode: BB7 2A9.	

3. Site A	ddress Details		4. Pre-application Advice	
Please prov	ride the full postal address of		Has assistance or prior advice been sour authority about this application?	,
Unit:	House number: 7	House suffix:	authority about this application:	Yes No
House name:			If Yes, please complete the following information about the advice	
Address 1:	HARE HILL CROP	7	you were given. (This will help the author application more efficiently).  Please tick if the full contact details are not be applicated by the full contact details are not be applined by the full contact details are not be applicated by the full	•
Address 2:	CHATBURN CLD KO	1AO	known, and then complete as much as p	
Address 3:	CHATBURN		Officer name:	
Town:	NR CLITHEROE		MR ADAM BIRKETT Reference:	
County:			EMML	
Postcode (optional):	BBT 4EP			
Description	of location or a grid reference impleted if postcode is not k	ce. nown):	Date of advice (DD/MM/YYYY):  Details of pre-application advice receive	02/10/2019
Easting:	North	1		
Description	1:		TO SUGMIT A NON-MATERIAL APPLICATION AND SUGGESTION	Ir ON WALL
			AND EALLNY HEIGHTS.	
5. Eligibi	lity			
Do you, or th	ne person on whose behalf y	ou are making this applica	ntion,	
have an inte	rest in the part of the land to	which this amendment re	elates? Yes No	
If you hav	e answered No to this	question, you canno	t apply to make a non-material ame	endment.
If you are no	t the sole owner, has notifica	ation under article 9 of the	DMPO been given? Yes No	Not Applicable
			t apply to make a non-material ame	endment.
	nswered Yes to this question Person Notified	n, please give details of per		
	1 cison Notined		Address	Date of Notification
6. Authori	ty Employee / Membe	r		
	•			
AAITH LESDECT	to the Authority. I am:		any of these statements apply to you?	
(a) a membe			any of these statements apply to you?	
(a) a membe (b) an electe	er of staff ed member		any of these statements apply to you?  Yes  No	
<ul><li>(a) a membe</li><li>(b) an electe</li><li>(c) related to</li></ul>	er of staff			
<ul><li>(a) a membe</li><li>(b) an electe</li><li>(c) related to</li><li>(d) related to</li></ul>	er of staff ed member o a member of staff	Do		
<ul><li>(a) a membe</li><li>(b) an electe</li><li>(c) related to</li><li>(d) related to</li></ul>	er of staff ed member o a member of staff o an elected member	Do		
(a) a membe (b) an electe (c) related to (d) related to	er of staff ed member o a member of staff o an elected member	Do		

7. Description Of Your Proposal  Please provide a description of the approved development as shown on the decision letter, including application reference number and					
ELECTION OF ONE DETECHED FOUR - BEDROOM IN HOUSE TYPE)	,				
Reference number:	Date of decision (DD/MM/YYYY):				
3/2019/0759	08/08/2019				
What was the original application type?: (e.g. 'Full', 'Householder and Listed Building', 'Outline')  FULL APPLICATION	ATION				
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 o	development within its curtilage				
Other: anything not covered by the above category	abla				
CONSENT TO ELECT METAL GATES AND PAILINGS ON BONDARY AND ACCESS INTO THE PLOT	N STONE DWARF WALLS ALONG THE				
Are you intending to substitute amended plans or drawings?  If Yes, please complete the following:  Old plan/drawing number(s):	V Yes No				
New plan/drawing number(s):					
	(REVI) EXTERNALS AND 2834 (REVIA) GARES.				
Please state why you wish to make this amendment:					
TO FORMALLE THE NEW GARET AND WALL PAILINGS PURPOSES	TOR PRIVACY AND SECURITY				

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:						
The original and 3 copies of other plans and drawings or information necessary to describe the subject of the application:						
The correct fee: \$234 - 00						
10. Declaration						
I/we hereby apply for planning permission/consent as described in the information.	his form and the accompanying plans/drawings and additional					
Signed - Applicant; Or signed - Agent:	Date (DD/MM/YYYY);					
/preserve f	eacached Ana that 15/10/2019					
11. Applicant Contact Details 12. Agent Contact Details						
Telephone numbers	Telephone numbers					
Country code: National number: Extension number:	Country code: National number: Extension number:					
	01200 423178					
Country code: Mobile number (optional):	Country code: Mobile number (optional):					
Country code: Fax number (optional):	Country code: Fax number (optional):					
Email address (optional):	Email address (optional):					
	strarte-sunderland procock-com					
13. Site Visit						
Can the site he seen from a public read public factors to take any and the take any						
f the planning authority needs to make an appointment to carry						
If Other has been selected, please provide:						
Contact name:	Telephone number:					
Email address:						