

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:	RICHARD		
Last name:	RAWSTHORNE				
Company (optional):					
Unit:		House number:	10	House suffix:	
House name:					
Address 1:	THE PLANTATION TOSSIDE				
Address 2:					
Address 3:					
Town:	TOSSIDE SKIPTON				
County:	NORTH YORKS				
Country:	ENGLAND				
Postcode:	BD 23 4SF				

#### 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:	10	House suffix:	
House name:					
Address 1:	THE PLANTATION				
Address 2:					
Address 3:					
Town:	TOSSIDE				
County:	SKIPTON NORTH YORKS				
Postcode (optional):	BD23 4SF				
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:

Reference:

Date of advice (DD/MM/YYYY):

02/08/2021

Details of pre-application advice received:

VERY HELPFULY TOWARDS IT  
TOLD ME WHAT WAS NEEDED  
POSTED FORMS

### 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 4F(3) of the GDPO 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

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## 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:

SINGLE STOREY GARDEN ROOM EXTENSION  
WITH HIP SLATE ROOF

APPLICATION NO  
C3/2008/0352

Reference number:

3 2011 1519 B

Date of decision (DD/MM/YYYY):

17/06/2008

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

FULL

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:

CHANGE OF WINDOWS AND DOOR DESIGN AND  
SIZE

Are you intending to substitute amended plans or drawings?

☒ Yes

☐ No

If Yes, please complete the following:

Old plan/drawing number(s):

3 2011 1519 B

New plan/drawing number(s):

Please state why you wish to make this amendment:

TO BE IN KEEPING WITH ADJOINING PROPERTY  
EXTENSION WHICH WILL HAVE BI FOLDS ON TWO SIDES  
AND TO LET IN MORE LIGHT AND HEAT FROM THE  
SUN WHICH SHOULD HELP TO REDUCE ENERGY  
CONSUMPTION

## 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: ☒

## 10. Declaration

I/we hereby apply for planning permission/consent as described in this form and the accompanying plans/drawings and additional information.

Signed - Applicant:

Or signed - Agent:

Date (DD/MM/YYYY):

36/08/2021

Extension  
number:

## 12. Agent Contact Details

Telephone numbers

Country code:

National number:

Extension  
number:

Country code:

Mobile number (optional):

Country code:

Fax number (optional):

Email address (optional):

h, bridleway or other public land? ☐ Yes

☒ No

nt to carry  
ct only one)

☐ Agent

☒ Applicant

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

Telephone number: