



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

Name are 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.

Applicant Name and Address					
Title:	First name:				
Last name:					
Company (optional):	Johnnie Johnson Mousing				
Unit:	House number: House suffix:				
House ne:	ASTEA MOUSE				
Address 1:	SPINNERS LANE				
Address 2:	POYNTON				
Address 3:					
Town:					
County:	CHESTIRE				
Country:					
Postcode:	SKIZ IGA				

2. Agent	Name and Address
Title:	Me First name: CARL
Last name:	GRANNELL
Company (optional):	JOHN MCCAU ARCUITECTS
Unit:	House number: House suffix:
House name:	ARTS VILLAGE
Address 1:	MENRY STREET
Address 2:	
Address 3:	
Town:	LIVERROL
County:	MORS CUSIDE
Country:	
Postcode:	L31 100

4. Pre-application Advice	4. Pre-application Advice		
ication site. Has assistance or prior advice b			
House suffix:	n? Yes No		
	owing information about the advice the authority to deal with this		
application more efficiently).			
Officer name:	7.		
Telefor Rec			
Date of advice (DD/MM	VYYY):		
Details of pre-application advice	ce received:		
on, you cannot apply to make a non-mater give details of persons notified:	No Not Applicable rial amendment. Date of Notification		
Do any of these statements apply to yo	ou?		
	ou?		
Do any of these statements apply to yo	bu?		
Yes No	ou?		
	ou?		
Yes No	ou?		
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	authority about this application for suffix: If Yes, please complete the follow you were given. (This will help application more efficiently). Please tick if the full contact de known, and then complete as notificer name: Ale Coulong		

7. Description Of Your Proposal *Please provide a description of the approved development as show	n on the decision letter, including application reference number and
date of decision in the sections below. Please also provide the origin	
5 NOW BUILD HOUSES	
PLANNING APPROVAL NO H	PK / 2009 / 0633
D.f.	D :
Reference number:	Date of decision (DD/MWYYYY):
HPK /2009/0633	17/12/2009.
What was the original application type?: (e.g. 'Full', 'Householder and Listed Building', 'Outline')	ou APPLICATION
For the purpose of calculating fees, which of the following best desc	cribes the original application type?
useholder development: development to an existing dwelling-	house or development within its curtilage
Other: anything not covered by the above category	
3.2	
8. Non-Material Amendment(s) Sought	
Please describe the non-material amendment(s) you are seeking to r	make:
CHANGES TO ELWATION (REAZ + FRONT ROOF 284P)
Are you intending to substitute amended plans or drawings?	Til Yes No
If Yes, please complete the following:	
Old plan/drawing number(s):	
LOOBE LOOSE LOOYC	LOOSC
New plan/drawing number(s):	
L006 D LOOSF L0049	2 LOOSD
Please state why you wish to make this amendment:	
CLIENT REQUEST	

Please read the information red Local Planning		e you have sent all the ion not being accepte	ne information in support of your proposal. Failure to subted. It will not be accepted until all information required		
The original and necessary to de	d 3 copies of other plans and dra scribe the subject of the applica	wings or information tion:			
10. Declarat I/we hereby app information. Signed - Applie	oly for planning permission/cons	sent as described in the Or signed - Agent:	this form and the accompanying plans/drawings and add Date (DD/MWYYYY): 23.03.2		
11. Applicar	nt Contact Details		12. Agent Contact Details		
Telephone num Country code:	National number:	Extension number:	Telephone numbers Country code: National number: C151 767 1818	Extension number:	
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): corla John mccall.co.UZ.		
If the planning a out a site visit, w	t seen from a public road, public for authority needs to make an appo whom should they contact? (Plea n selected, please provide:	pintment to carry		erent from the ant's details)	

Email address: