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:	Mr First name: Stuart	Title: Mrs First name: Catrin	
Last name:	Andrews	Last name: Oliver-Thomas	
Company (optional):		Company (optional): Oliver-Thomas Consultancy Limited	
Unit:	House House Suffix:	Unit: House number: 13 House suffix:	
Hou s e name:		House name: Rhigos Gardens	
Address 1:	Palace Avenue	Address 1:	
Address 2:	Llandaf	Address 2:	
Address 3:		Address 3:	
Town:	Cardiff	Town: Cardiff	
County:	Caerdydd	County: Caerdydd	
Country:		Country:	
Postcode:	CF5 2DW	Postcode: CF24 4LS	

3. Site Ac	ldress Details	4. Pre-application Advice				
Please provide the full postal address of the application site.		Has assistance or prior advice been sought from the local				
Unit:	House House suffix:	authority about this application? Yes X No				
House name:	Glynderwen	If Yes, please complete the following information about the advice you were given. (This will help the authority to deal with this				
Address 1:	Peterston-super-Ely	application more efficiently). Please tick if the full contact details are not				
Address 2:		known, and then complete as much as possible:				
Address 3:		Officer name:				
Town:		Reference:				
County:	Vale of Glamorgan					
Postcode (optional): Description	CF5 6LG of location or a grid reference.	Date of advice (DD/MM/YYYY):				
(must be co	mpleted if postcode is not known):					
Easting:	Northing:					
Description						
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?						
If you have answered No to this question, you cannot apply to make a non-material amendment.						
6. Author	rity Employee / Member					
	Vith respect to the Authority, I am: Do any of these statements apply to you?					
(a) a memb (b) an elect		Yes X No				
(c) related t	c) related to a member of staff					
(d) related to an elected member						
If yes please provide details of the name, relationship and role						

7. Description Of Your Proposal					
Please provide the description of the approved development as shown on the decision letter, including application reference number and date of decision in the sections below:					
Erection of a two storey side extension with part single storey and part two storey extension to rear at Glynderwen, Peterston Super Ely					
Reference number:	Date of decision (DD/MM/YYYY):				
2014/00723/FUL	10 September 2014				
For the purpose of calculating fees, which of the following best describes the origin	nal application type?				
Householder development: development to an existing dwelling-house or devel	lopment 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:					
 the alteration of window proportions to the Side electron suit the relocation of the kitchen and dining areas; a the narrowing of the high level window to the sittir (east), so that it matches the proportions of the other with the other with the second plane or drawing? 	nd ng area shown on Side elevation windows within the room.				
Are you intending to substitute amended plans or drawings? If Yes, please complete the following: Old plan/drawing number(s):	Yes No				
2720[D]L(0)301 Rev A, 302 Rev A, 307 Rev A, 308 Rev A, 309 Rev A, 313					
New plan/drawing number(s):					
2720[D]L(0)301 Rev B, 302 Rev B, 307 Rev B, 308 Rev C, 309 Rev C, 313 Rev A					
Please state why you wish to make this amendment:					
During the preparation of the construction drawings for the extension, the applicants, Stuart & Dawn Andrews, have decided to alter the location of the kitchen area within the large room at ground floor level created by the rear extension in order that they can see their young children in all parts of the room from the kitchen area. It is now in the position where the dining area was previously. As a result, the applicants would like to slightly alter the arrangement of the windows at ground floor level within that part of the extension.					

\$ Date:: 2014-08-14 #\$ \$ Revision: 6085 \$

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 consent as described in this form and the accompanying plans/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.

Signed - Applicant:	Or signed - Agent:	Date (DD/MM/YYYY):				
		15/01/2015				
11. Applicant Contact Details		12. Agent Contact Details				
Telephone numbers		Telephone numbers				
Country code: National number: Country code: Mobile number (optional): Country code: Fax number (optional): Country code: Fax number (optional): Email address (optional): Email address (optional):	Extension number:	Country code: National number: Extension number: Country code: Mobile number (optional): Image: Country code: Country code: Fax number (optional): Image: Country code: Country code: Fax number (optional): Image: Country code: Email address (optional): Image: Country code: Image: Country code: Country code: Fax number (optional): Image: Country code: Email address (optional): Image: Country code: Image: Country code: Country code: Fax number (optional): Image: Country code: Country code: Fax number (optional): Image: Country code: Country code: Fax number (optional): Image: Country code: Country code: Fax number (optional				
12 Sito Vicit						
13. Site Visit Can the site be seen from a public road, public footpath, bridleway or other public land? X Yes No						
If the planning authority needs to make an appo out a site visit, whom should they contact? (<i>Pleas</i>	intment to carry se select only one)	X Agent Applicant Other (if different from the agent/applicant's details)				
If Other has been selected, please provide:						
Contact name:		Telephone number:				

Email address: