

Application for a non-material amendment following a grant of planning permission. Town and Country Planning Act 1990

Privacy Notice

This form is provided by Planning Portal and based on the requirements provided by Government for the sole purpose of submitting information to the Local Planning Authority in accordance with the legislation detailed on this form and 'The Town and Country Planning (Development Management Procedure) (England) Order 2015 (as amended).

Please be aware that once you have downloaded this form, Planning Portal will have no access to the form or the data you enter into it. Any subsequent use of this form is solely at your discretion, including the choice to complete and submit it to the Local Planning Authority in agreement with the declaration section.

Upon receipt of this form and any supporting information, it is the responsibility of the Local Planning Authority to inform you of its obligations in regards to the processing of your application. Please refer to its website for further information on any legal, regulatory and commercial requirements relating to information security and data protection of the information you have provided.

Local Planning Authority details:



Public Protection & Development Management

Bodicote House, Bodicote, Banbury.

Telephone: 01295 227006 Website: www.cherwell.gov.uk Email: planning@cherwell-dc.gov.uk

Publication of applications on planning authority websites

Information provided on this form and in supporting documents may be published on the authority's planning register and website.

Please ensure that the information you submit is accurate and correct and does not include personal or sensitive information. If you require any further clarification, please contact the Local Planning Authority directly.

If printed, please complete using block capitals and black ink.

It is important that you read the accompanying guidance notes and help text as incorrect completion will delay the processing of your application.

Applicant Name and Address		2. Agent Name and Address			
Title:	First name:	Title: First name:	The state of the s		
Last name:	GREEN	Last name:			
Company (optional):	BOW TRACING UMMED	Company (optional):			
Unit	House House suffix:	House House suiffix:			
House name:	RAMUS 2	House name:			
Address 1:	2 CRANBROOK WAY	Address 1:			
Address 2:	SOLIHUL BUSINESS FARK	Address 2:			
Address 3:		Address 3:			
Town:	SOLIHULL	Town:	and the second second		
County:	SOLIHULL WEST MIDLANDS	County:			
Country:		Country:			
Postcode:	1390 4GT	Postcode:			

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Address			
	Date of Notification		
pen and transparent. I	For the purposes of this question "relating to"		
ne local planning auth	oserver, having considered the facts , would hority.		
, <u> </u>	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.		
	(d) related to an elected member		
	ded and informed ob e local planning autl		

Please provide the description of the approved development as shown on the decision and date of decision in the sections below:	ion letter, including application reference number
UP TO 280 DWELLINGS (INC UP TO 30%)	AFFERDABLE HOURING) INTRODUCTION
OF TO 280 DWELLINGS (INC UP TO 30% A OF STRUCTURAL PLANT & LANDSCAPING, INFO	RMAL PUBLIC, PEN SACE
& CHLIMPENS RAY AKEA, SURPACE WATTR:	FLOOD MITIGATION &
ATTENUATION, VEHICULAR ACCESS BONT &	PROVI WHITE POST ROAD
AND ASCOCIATED ANGUARY WORKS	
Reference number:	Date of decision (DD/MM/YYYY):
15/01326/04	20/12/17
What was the original application type?	
(e.g. 'Full', 'Householder and Listed Building', 'Outline')	
For the purpose of calculating fees, which of the following best describes the original	
Householder development: development to an existing dwelling-house or develo	ppment 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:	
CONDITION 40 STATES THAT NON-12	ESIDERITIAL BUILDINGS
SHOULD MEET BREEKM VERY 9007	D STANDARD, HOWEVER
BRE STATE THAT BULLDINGS SUCH 1	AS CHANGING ROOMS
CHUNDT BE ASSESSED LNDER BRE	EAM. THEREFORE THE
CHANGING ROOMS MU DE CONSTR	JURED 70 MEET BUILDING
CHANGING ROOMS MULDE CONSTR REGULATION PART LZ ZOZI INSPE	AD
	, , , ,
Are you intending to substitute amended plans or drawings?	
If Yes, please complete the following:	Vec No
Old plan/drawing number(s):	
X/A	
New plan/drawing number(s):	
NA	
Please state why you wish to make this amendment:	
IT IS IMPOSSIBLE TO MEET REQUIRE	MENT.

7. Description Of Your Proposal

9. Application Requirements - Checklist Please read the following checklist to make sure you information required will result in your application no Local Planning Authority (LPA) has been submitted.				
The original and 3 copies* of a completed and dated	application form:			
The original and 3 copies* of other plans and drawing necessary to describe the subject of the application:	gs or information	□ N/F	}	
The correct fee:				*
*National legislation specifies that the applicant mus total of four copies), unless the application is submitt LPAs may also accept supporting documents in elect You can check your LPA's website for information or	ted electronically of tronic format by po	r, the LPA indicate st (for example, or	e that a smaller number of c n a CD, DVD or USB memory	upics is required.
10. Declaration		6		1 1 1 1 1 1
I/we hereby apply for planning permission/consent a <u>information</u> . I/we confirm that to the best of my/our genuine opinions of the person(s) giving them.	is described in this knowledge, any fa	form and the acco	ompanying plans/drawings and accurate and any opin	and additional lions given are the
	signed - Agent:		Date (DD/MM/Y	YYY):
			actions!	24/02/2023
File Applicant Contact Details.		iz. Agent Cor	itact Details	
Telephone numbers	11	Telephone numbe	ers	
Country code: National number	Extension number:	Country code:	National number:	Extension number:
Country and a Malay	Military 1			
Country code: Mobile number (optional):		Country code:	Mobile number (optional):	
Country code: Fax number (optional):	- - -	Country code:	Fax number (optional):	
ไว้กาลก่ addi ess (optional):		Limaii address (op	diorial).	
13. Site Visit				
Can the site be seen from a public road, public footpa		ther public land?	Yes No	
If the planning authority needs to make an appointm out a site visit, whom should they contact? (Please sel	ient to carry lect only one)	Agent		er (if different from the it/applicant's details)
If Other has been selected, please provide: Contact name:	7	Telephone numbe		
STREET HATTON		i dispriorie numbe		
Email address:	1 1			