

**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.

1. Applicant Name, Address and Contact Details

Title: First name: Surname:

Company name:

Street address:

Town/City:

County:

Country:

Postcode:

Telephone number:

Country Code	National Number	Extension Number
<input type="text"/>	<input type="text"/>	<input type="text"/>

Mobile number:

<input type="text"/>	<input type="text"/>	<input type="text"/>
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Fax number:

<input type="text"/>	<input type="text"/>	<input type="text"/>
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Email address:

Are you an agent acting on behalf of the applicant? Yes No

2. Agent Name, Address and Contact Details

Title: First Name: Surname:

Company name:

Street address:

Town/City:

County:

Country:

Postcode:

Telephone number:

Country Code	National Number	Extension Number
<input type="text"/>	<input type="text" value="0845 64 362 64"/>	<input type="text"/>

Mobile number:

<input type="text"/>	<input type="text"/>	<input type="text"/>
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Fax number:

<input type="text"/>	<input type="text"/>	<input type="text"/>
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Email address:

3. Site Address Details

Full postal address of the site (including full postcode where available)

Description:

House:	<input type="text"/>	Suffix:	<input type="text"/>
House name:	<input type="text" value="Land North East of Junction of"/>		
Street address:	<input type="text" value="Skimmingdish Lane/Launton Road"/>		
Town/City:	<input type="text" value="Launton"/>		
County:	<input type="text" value="Oxon"/>		
Postcode:	<input type="text" value="OX"/>		

Description of location or a grid reference
(must be completed if postcode is not known):

Easting:	<input type="text" value="460158"/>
Northing:	<input type="text" value="223288"/>

4. 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 are not the sole owner, has notification under article 9 of the DMPO been given?

Yes No Not applicable

5. Description of Your Proposal

Description of Approved Development:

Construction of a 60 bed care home (Use Class C2) together with ancillary accommodation including café, hair salon and shop and associated development including car parking and servicing arrangements.

Reference number:

*Date of decision (DD/MM/YYYY):

What was the original application type?

Outline planning permission: Some matters reserved

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

6. Non-Material Amendment(s) Sought

*Please describe the non-material amendment(s) you are seeking to make:

Alterations to the 16 no. first floor windows and alterations to the external cladding to the second floor accommodation.

Are you intending to substitute amended plans or drawings? Yes No

If yes please complete the following

Old plan/drawing numbers:

New plan/ drawing numbers:

Please state why you wish to make this amendment:

7. 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):

Officer name:

Title: First name: Surname:

Reference:

Date (DD/MM/YYYY): (Must be pre-application submission)

Details of the pre-application advice received:

8. Site Visit

Can the site be seen from a public road, public footpath, bridleway or other public land?

Yes No

If the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (Please select only one)

The agent The applicant Other person

9. 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

10. Declaration

I/we hereby apply for planning permission/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.



Date