

25 JAN 2020



HILLINGDON  
LONDON

London Borough of Hillingdon, Planning & Community Services, 3N Civic Centre, High Street, Uxbridge, Middlesex UB8 1UW  
Tel: 01895 250230 Web: [www.hillingdon.gov.uk](http://www.hillingdon.gov.uk)

**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: <input type="text" value="MISS"/> First name: <input type="text" value="SARAH"/>	Title: <input type="text"/> First name: <input type="text"/>
Last name: <input type="text" value="BARNES"/>	Last name: <input type="text"/>
Company (optional): <input type="text"/>	Company (optional): <input type="text"/>
Unit: <input type="text"/> House number: <input type="text" value="37"/> House suffix: <input type="text"/>	Unit: <input type="text"/> House number: <input type="text"/> House suffix: <input type="text"/>
House name: <input type="text"/>	House name: <input type="text"/>
Address 1: <input type="text" value="BRIXHAM CRESCENT"/>	Address 1: <input type="text"/>
Address 2: <input type="text"/>	Address 2: <input type="text"/>
Address 3: <input type="text"/>	Address 3: <input type="text"/>
Town: <input type="text" value="RUISLIP"/>	Town: <input type="text"/>
County: <input type="text"/>	County: <input type="text"/>
Country: <input type="text"/>	Country: <input type="text"/>
Postcode: <input type="text" value="HA4 8TU"/>	Postcode: <input type="text"/>

### 3. Site Address Details

Please provide the full postal address of the application site.

Unit:  House number:  House suffix:

House name:

Address 1:

Address 2:

Address 3:

Town:

County:

Postcode (optional):

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):

Details of pre-application advice received:

### 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
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

### 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

## 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:

PART TWO STOREY, PART SINGLE STOREY SIDE EXTENSION AND SINGLE STOREY FRONT EXTENSION.

Reference number:

6921/APP/2019/2868

Date of decision (DD/MM/YYYY):

16/04/2020

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:

WE ARE SEEKING TO REMOVE THE DOOR THAT ACCESSES THE GARDEN DIRECTLY FROM THE KITCHEN AND REPLACE IT WITH A WINDOW TO MATCH AN EXISTING ADJACENT WINDOW IN THE SAME ROOM.

WE ALSO PROPOSE TO ADD A MODEST VELLUX (OR SIMILAR) ROOF WINDOW TO THE SINGLE STOREY PITCHED ROOF AREA OF THE EXTENSION.

Are you intending to substitute amended plans or drawings?

☒ Yes

☐ No

If Yes, please complete the following:

Old plan/drawing number(s):

SKMPD-P-37BC-003 E

SKMPD-P-37BC-001 - F

New plan/drawing number(s):

SKMPD-P-37BC-003-F

SKMPD-P-37BC-001-G

Please state why you wish to make this amendment:

THE DOOR WILL BE REMOVED IN ORDER TO OPTIMISE THE PROPOSED INTERIOR LAYOUT AND ALSO INCREASE SECURITY. THE VELLUX (OR SIMILAR) ROOF WINDOW WILL SUBSTANTIALLY INCREASE NATURAL LIGHT IN THIS NORTH FACING SPACE.