

If you would rather make this application online, you can do so on our website:

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

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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.



Development Control **Gloucester City Council** PO Box 3252, Gloucester, GL1 9FW 01452 396396 development.control@gloucester.gov.uk www.gloucester.gov.uk/planning

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

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 dela

1. Applicant Name and Address				
Title:	MR First name: RICHARD			
Last name:	GARLAND			
Company (optional):				
Unit:	House suffix:			
House name:				
Address 1:	INNSWORTH LANE			
Address 2:				
Address 3:				
Town:	GROVCESTER			
County:	GLOS			
Country:				
Postcode:	GLZ ODA.			

2. Agent	Name and Address
Title:	First name:
Last name:	
Company (optional):	
Unit:	House number: House suffix:
House name:	
Address 1:	
Address 2:	
Address 3:	
Town:	
County:	
Country:	
Postcode:	

Ca Sito A	Idross Data II			10 10 10 10 10 10 10 10 10 10 10 10 10 1			
3. Site Address Details Please provide the full postal address of the state of the			4. Pre-appli	cation Advice	form the legal		
Please provide the full postal address of the application site. Unit: House / House			or prior advice been sought this application?	Yes No			
House name:	number:	suffix:	If Yes, please co	mplete the following inform	nation about the advice		
	1./.10	1		(This will help the authority	to deal with this		
Address 1: Address 2:	INNSWORTH	LANE		full contact details are not	ible:		
Address 3:			Officer name:	n complete as much as poss	sible:		
			Onice name.				
Town: GLOUCESTER County: GLOS		Reference:					
Postcode (optional): GL2 ODA		Date of a	advice (DD/MM/YYYY):				
Description of location or a grid reference. (must be completed if postcode is not known):		Details of pre-a	pplication advice received:				
Easting:	Nor	thing:					
Description	n:						
<u></u>			/				
5. Eligib	ility						
Do you, or t	he person on whose behalf	you are making this applicat to which this amendment re	ion,	Yes No			
	The state of the s				dmont		
		s question, you cannot		a non-material amend	ament.		
	ot the sole owner, has notific evelopment Management f	cation under article 10 of the Procedure) (England) Order 2		Yes No	Not Applicable		
r iaining (D	If you have answered No to this question, you cannot apply to make a non-material amendment.						
3.			•	a non-material amend	dment.		
If you hav	ve answered No to this	s question, you cannot	apply to make	a non-material amend	dment.		
If you hav	ve answered No to this	s question, you cannot on, please give details of per	apply to make sons notified:	a non-material amend	dment. Date of Notification		
If you hav	ve answered No to this answered Yes to this question Person Notified	s question, you cannot	apply to make	a non-material amend	Date of Notification		
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If you have a lif you have a lift	rity Employee / Memb	er a question, you cannot be process give details of per ADDRESS AS	en and transparent	. For the purposes of this qu bserver, having considered thority.	Date of Notification 18/2/22 uestion "relating to" the facts , would		
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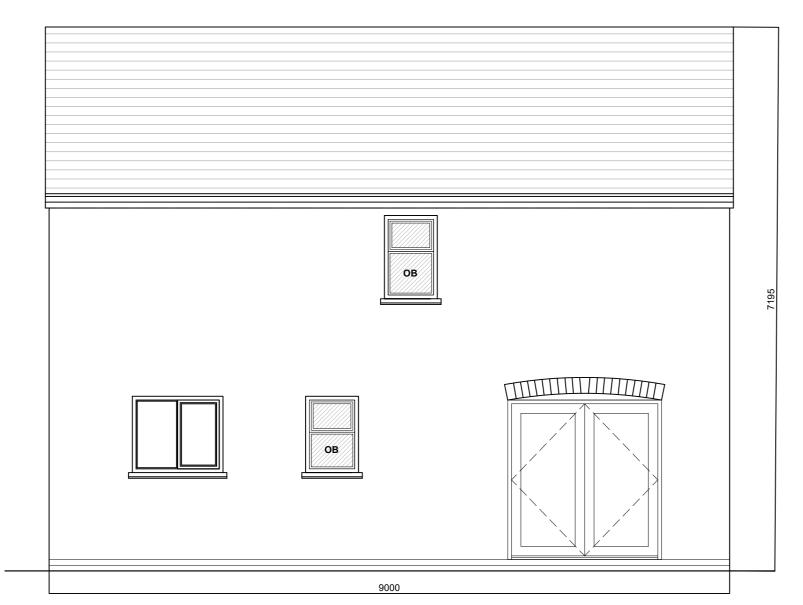
7. Description Of Your Proposal				
Please provide the description of the approved development as shown on the decision and data of decision in the cortions below:	on letter, including application reference number			
ERECTION OF A DETACHED DWELLING	1 eš			
	- E			
Reference number: Do	ate of decision (DD/MM/YYYY):			
21/00142/4UL	10/02/202)			
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	application type?			
Householder development: development to an existing dwelling-house or develop	oment 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:				
INCLUSION OF AN ADDITIONAL WINDOW OF S ADVANTAGE OF LIGHT/SUN, THIS IS DUE ELEVATIONS BEING PROCLUDED DUE TO O	BOUTH FLEVATION TO TAKE			
ADVANTAGE OF LIGHT IS UN THIS IS PULL TO OFFICE PROCEDED DUE TO O	NELLODKING. SOUTH			
I DOLLATON OF NEW DWELLING FACES	A COMMERCIAL BUILDING			
- C-PM AND WHICH IS A	(CCUPEN KY FK-ABIISHED			
I TO DICKUT AND FENCE. DISTANCE BET	WEEN BUILDING 713M.			
DOLDOWD NEW WINDOW WILL BE OF	IST GOOR, SOUTH			
EVENATION AS SHOWN IN DAWING				
Are you intending to substitute amended plans or drawings?	Ýes No			
If Yes, please complete the following:	_			
Old plan/drawing number(s):				
973/PLO4D , 973/PLOSC				
New plan/drawing number(s):				
973/PLO4D/A, 973/PLOSC/A				
Please state why you wish to make this amendment:				
IT IS FELT, IN RETROSPECT THAT OBTAININ	SG NATURAL LIGHT FROM			
THE WEST ELEVATION ONLY INTO THE IST FLOOD BED ROOMS IS NOT TAKING FULL ADVANTAGE OF THE PROPERTY ORIENTAM				
AND POSITION THERE IS NO IMPACT	TO ALLENDER AS			
HAND TOUTHON THERE IS NO IMPACT	NEIGNBOVKS.			

9. Application Requirements - Checklist Please read the following checklist to make sure you have sent al information required will result in your application not being acc Local Planning Authority (LPA) has been submitted.	I the information in support of your proposal. Failure to submit all epted. It will not be accepted until all information required by the
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:	ation 🗹
The correct fee:	Z
*National legislation specifies that the applicant must provide the total of four copies), unless the application is submitted electronic LPAs may also accept supporting documents in electronic format You can check your LPA's website for information or contact their	e original plus three copies of the form and supporting documents (a cally or, the LPA indicate that a smaller number of copies is required. : by post (for example, on a CD, DVD or USB memory stick). r planning department to discuss these options.
10. Declaration	The state of the s
I/we hereby apply for planning permission/sensent as described	any facts stated are true and accurate and any opinions given are the
11. Applicant Contact Details	12. Agent Contact Details
Telephone numbers	Telephone numbers
Extension Country code: National number: number:	Country code: National number: Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional):
13. Site Visit	y or other public land? Yes No
Can the site be seen from a public road, public footpath, bridleway If the planning authority needs to make an appointment to carry	- Other (if different from the
out a site visit, whom should they contact? (Please select only one)	Agent Applicant Other (if different from the agent/applicant's details)
If Other has been selected, please provide: Contact name:	Telephone number:
RICHARD GARLAND	

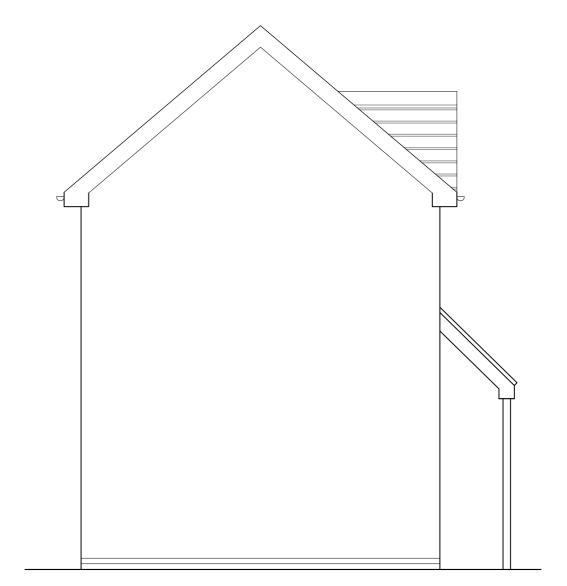
Email address:



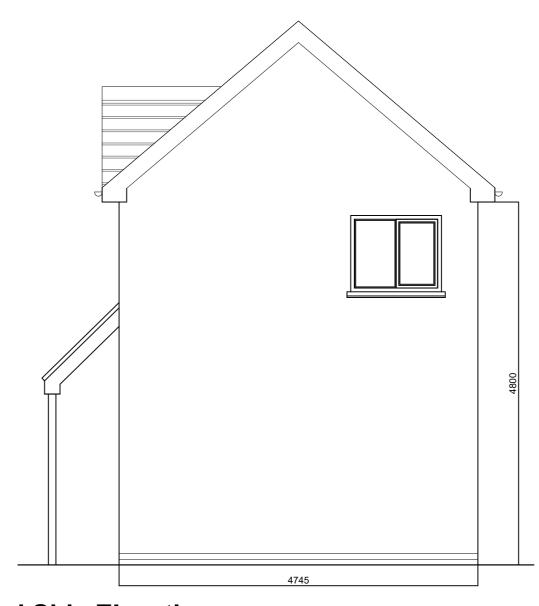
Proposed Front Elevation



Proposed Rear Elevation



Proposed Side Elevation



Proposed Side Elevation

No. 4 Innsworth Lane

Proposed New Dwelling

Planning Permission

Proposed Elevations

Date: Nov 2020

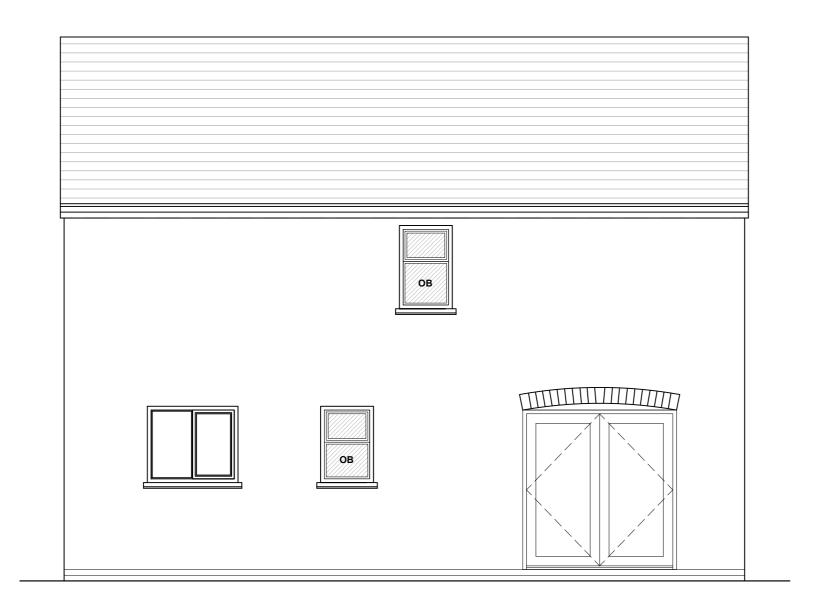
Scale: 1/50 @ A2

Subject to correct printing. See top left.

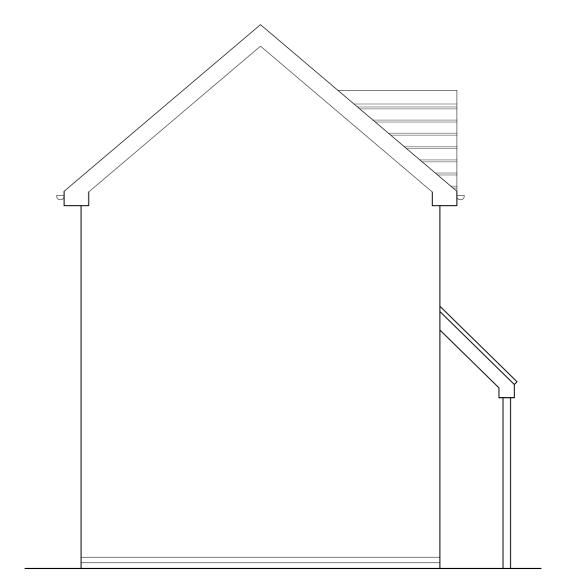
Drawing No: 973/ PL05C/A



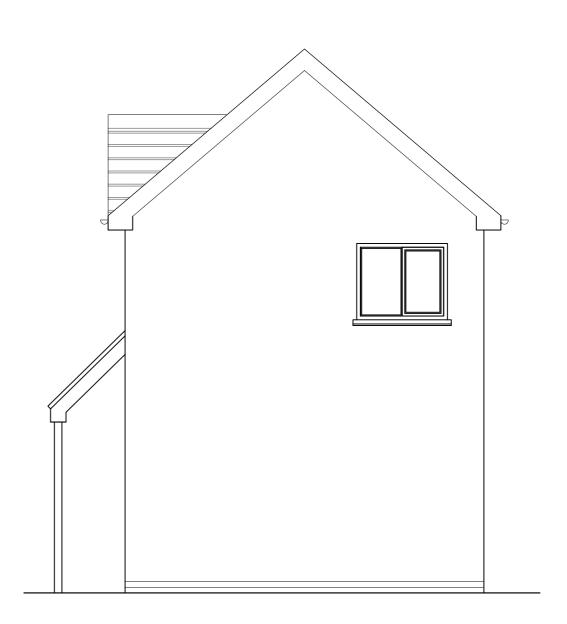
Proposed Front Elevation



Proposed Rear Elevation



Proposed Side Elevation



Proposed Side Elevation

No. 4 Innsworth Lane Proposed New Dwelling Planning Permission

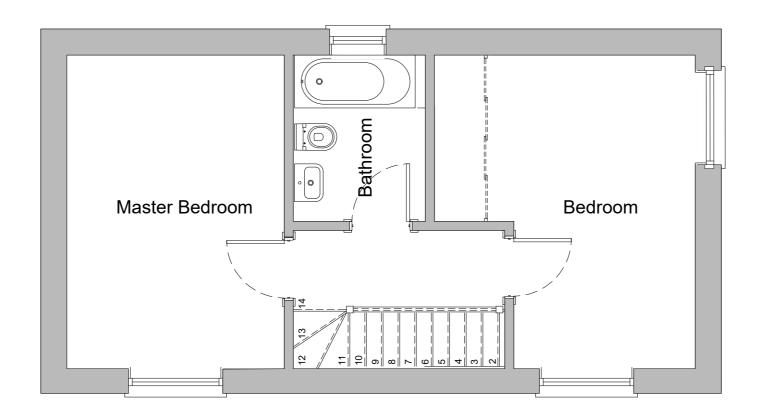
Proposed Elevations

Date: Nov 2020

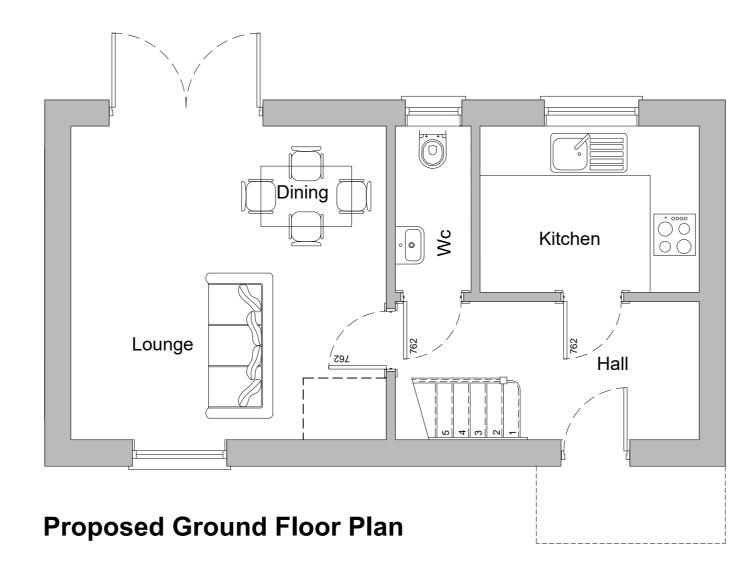
Scale: 1/50 @ A2

Subject to correct printing. See top left.

Drawing No: 973/ PL05C/A



Proposed First Floor Plan



No. 4 Innsworth Lane Proposed New Dwelling Planning Permission

Proposed Floor Plans

Date: Nov 2020

Scale: 1/50 @ A2

Subject to correct printing. See top left.

Drawing No: 973 /PL04D/A