



If you would rather make this application online, you can do so on our website:
<https://www.planningportal.co.uk/apply>

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:



Arun District Council
Maltravers Road
Littlehampton
West Sussex BN17 5LF
Tel: 01903 737756
www.arun.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.

1. Applicant Name and Address

Title:	MRS	First name:	ANNALIESA
Last name:	WHITWORTH		
Company (optional):			
Unit:		House number:	54
		House suffix:	
House name:	PEBBLE BAY		
Address 1:	54 KINGSWAY		
Address 2:	CRAIGWEIL		
Address 3:	ALDWICK		
Town:	BOGNOR REGIS		
County:	WEST SUSSEX		
Country:	ENGLAND		
Postcode:	PO21 4DN		

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:			

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 10 of the Town and Country Planning (Development Management Procedure) (England) Order 2015 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

6. Authority Employee / Member

It is an important principle of decision-making that the process is open and transparent. For the purposes of this question "relating to" means related, by birth or otherwise, closely enough that a fair-minded and informed observer, having considered the facts, would conclude that there was bias on the part of the decision-maker in the local planning authority.

Do any of the following statements apply to you and/or agent? ☐ Yes ☒ No

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

If yes please provide details of their name, role and how you are related to them.

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:

SINGLE STOREY FRONT AND REAR EXTENSIONS,
RAISING OF EXISTING GARAGE ROOF AS PART OF
CONVERSION OF GARAGE AND FRONT CANOPY.

Reference number:

AW/294/19/HH

Date of decision (DD/MM/YYYY):

10TH JANUARY 2020

What was the original application type?
(e.g. 'Full', 'Householder and Listed Building', 'Outline')

HOUSEHOLDER APPLICATION FOR PLANNING
PERMISSION FOR WORKS OR EXTENSION TO A
DWELLING.

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:

EXTENSION OF FRONT CANOPY BY ONE METRE.

Are you intending to substitute amended plans or drawings?

☒ Yes

☐ No

If Yes, please complete the following:

Old plan/drawing number(s):

b3ee504a22c14ef.pdf

New plan/drawing number(s):

AW2021

Please state why you wish to make this amendment:

TO ENABLE BETTER ACCESS
TO PROPERTY FOR DISABLED RESIDENT.

