EB/3064/CCNM/2



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:	MR	First name:	MATT		Title:	MR	First name: TIM	
Last name:	DUNKLEY				Last name:	WEEDEN	I	
Company (optional):	East Sussex County Council Children's Services Directorate				Company (optional):	FEILDEN CLEGG BRADLEY STUDIOS		
Unit:	House House suffix:				Unit:		House House suffix:	
House name:	COUNTY	HALL			House name:			
Address 1:					Address 1:	20 TOTTE	ENHAM STREET	
Address 2:					Address 2:			
Address 3:	š				Address 3:			
Town:	LEWES				Town:	ĹONDON		
County:	EAST SU	SSEX			County:			
Country:	UK				Country:	UK		
Postcode:	BN71UE				Postcode:	W1T 4RF		

The contract of the contract o	ddress Details		4. Pre-application Advice				
Please prov	ride the full postal address of	Security and the Control of the Cont	Has assistance or prior advice been sought from the local authority about this application?				
Unit:	House number:	House suffix:	authority about this application:	✓ Yes No			
House name:	THE EASTBOURNE A		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:				
Address 1:	BRODRICK ROAD						
Address 2:							
Address 3:			Officer name:  David Vickers				
Town:	EASTBOURNE		Reference:				
County:	EAST SUSSEX		Email dated 9th August 2013				
Postcode (optional):	BN22 9RQ		Date of advice (DD/MM/YYYY): 09/08/2013				
Description (must be co	n of location or a grid reference completed if postcode is not k	ce. nown):	Details of pre-application advice received:				
Easting:	Norti	ning:		Preliminary application made, response from ESCC "With regard to the changes described below I don't see any is-			
Description	n:	3	sues from a planning point of view.	If an application for their			
		×	approval as non-material amendments were made I think there is a very good chance they would be granted."				
5. Eligib	70		*				
have an inte	he person on whose behalf y erest in the part of the land to	o which this amendment rela	on, ites? Yes N	lo			
If you hav	ve answered No to this	question, you cannot	apply to make a non-material am	nendment.			
If you are no	ot the sole owner, has notific	ation under article 9 of the D	MPO been given? Yes No	o ✓ Not Applicable			
13							
			apply to make a non-material am	ienament.			
If you have a	answered Yes to this question	n, please give details of perso					
	Person Notified		Address	Date of Notification			
			II				
			·				
	3		ē				
6. Author	rity Employee / Membe	ar					
	rity Employee / Membe		ny of these statements apply to you?				
With respect	ct to the Authority, I am: per of staff	Do a	M-seed				
With respect (a) a member (b) an elect (c) related to	ct to the Authority, I am: per of staff red member to a member of staff	Do a	ny of these statements apply to you? Yes \square No				
With respect (a) a memb (b) an elect (c) related t (d) related	ct to the Authority, I am: per of staff ced member to a member of staff to an elected member	Do a	M-seed				
With respect (a) a memb (b) an elect (c) related t (d) related	ct to the Authority, I am: per of staff red member to a member of staff	Do a	M-seed				
With respect (a) a member (b) an elect (c) related (d) related	ct to the Authority, I am: per of staff ced member to a member of staff to an elected member	Do a	M-seed				

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:					
The part demolition, part refurbishment and part teaching block and floodlit multi-use games are new landscaping and boundary treatments.					
Reference number:	1466 184 18 A (1)	Date of decision (DD/MM	/YYYY):		
EB/2011/0747	- 15 and 15	27/02/2012			
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	g best describes the origin	nal application type?			
Householder development: development to an existing	g dwelling-house or deve	opment within its curtilag	е		
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:				
The proposal is not to build the proposed new build site office, and instead house the site office within the existing tank room which is adjacent. There is very little change to the appearance as the original application proposed to reclad the existing tank rooms north elevation (brick to match the existing). The window and door that were proposed to the new build site office would be used to provide access/daylight/ventilation to the refurbished tank room.					
	a				
		ā			
2000					
		w.h.jased	or the second		
Are you intending to substitute amended plans or drawir	ngs?	Yes No	y.		
If Yes, please complete the following:		E .			
Old plan/drawing number(s):					
TEA/A/1598/P/109 P3, TEA/A/1598/P/110 P3, TEA/A/1598/P/112 P4, TEA/A/1598/P/213 P2, TEA/A/1598/P/304 P5					
New plan/drawing number(s):					
TEA/A/1598/P/109 P4, TEA/A/1598/P/110 P4, TEA/A/1598/P/112 P5, TEA/A/1598/P/213 P3, TEA/A/1598/P/304 P6					
Please state why you wish to make this amendment:					
We feel that this will improve the playground, external door access for pupils and also provide additional space around the bike storage area, while making use of an unused existing room.					

9. Application Requirements - Checklist Please read the following checklist to make sure you have sent all the information in support of your proposal. Failure to submit all					
information required will result in your application not being accepted. It will not be accepted until all information required by the Local Planning Authority has been submitted.					
The original and 3 copies of a completed and da	ted application form:	: <u>✓</u>			
The original and 3 copies of other plans and drawnecessary to describe the subject of the applicat	wings or information ion:	$\checkmark$			
The correct fee:		$\square$			
10. Declaration  I/we hereby apply for planning permission/conseinformation.  Signed - Applicant:	ent as described in thi Or signed - Agent:	Date (DD/MM/YYYY):  30/08/2013			
11. Applicant Contact Details		12. Agent Contact Details			
Telephone numbers	r r r r r r r r r r r r r r r r r r r	Telephone numbers			
Country code: National number:  Country code: Mobile number (optional):	Extension number:	Country code: National number: Extension number:  Country code: Mobile number (optional):			
Country code: Fax number (optional):		Country code: Fax number (optional):			
Email address (optional):		Email address (optional):			
13. Site Visit					
Can the site be seen from a public road, public foo	otnath, bridleway or c	other public land? [7] vac [7] Na			
If the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (Please select only one)					
If Other has been selected, please provide:		agent/applicant's details)			
Contact name: Tim Weeden		Telephone number:			
Email address: [Im Weeden@ Gbstudios com]					