



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="0191 261 4442"/>	<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"/>		
Street address:	<input type="text" value="Trinity South"/>		
Town/City:	<input type="text" value="South Shields"/>		
County:	<input type="text" value="Tyne & Wear"/>		
Postcode:	<input type="text" value="NE33 5EE"/>		

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

Easting:	<input type="text" value="436093"/>
Northing:	<input type="text" value="566083"/>

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

Yes No Not applicable

5. Description of Your Proposal

Description of Approved Development:

Proposed residential development comprising 222no dwellings and associated infrastructure, landscaping and boundary treatments, together with new and revised public car parking facilities and car parking for the Trinity Medical Centre and St George's Medical Centre, and proposed new bus lay-by on Western Approach.

Reference number:

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

What was the original application type?

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:

Amendments to plots 161-169, house types & positionings amended. 4 bedroom units omitted & replaced with 2/3 bedroom dwellings.

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:

4 bed units omitted due to lack of sale interest and replaced with 2 & 3 bed units between plots 161-169.

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