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
Title: MR.  First name: COLIN
Last name: BARRETT
Company (optional): PROPERTY ASSET MANAGEMENT
Unit:  House number:  House suffix:
House name: NORTHAMPTONSHIRE COUNTY COUNCIL
Address 1: COUNTY HAYW
Address 2: PO. BOX. 128
Address 3: 
Town: NORTHAMPTON
County: NORTHAMPTONSHIRE
Country: UK
Postcode: NN1-7AS

2. Agent Name and Address
Title: MR.  First name: BILLY
Last name: ROWD
Company (optional): ROCK TANNSEND
Unit:  House number:  House suffix:
House name: THE OLD SCHOOL
Address 1: ETON STREET
Address 2: 
Address 3: 
Town: LONDON
County: GREATER LONDON
Country: UK
Postcode: SE1-8UE
3. Site Address Details

Please provide the full postal address of the application site.

Unit: [ ]
House number: [ ]
House suffix: [ ]

House name: STANDENS BAYN PRIMARY SCHOOL
Address 1: FLAXWELL COURT
Address 2: [ ]
Address 3: [ ]
Town: NORTHAMPTON
County: NORTHANTS
Postcode (optional): NN3 9EH

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

Description: PRIMARY SCHOOL

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: PETER MOOR
Reference: [ ]

Date of advice (DD/MM/YYYY): 24/09/2013

Details of pre-application advice received:
ADVISOR TO MAKE NMH APPLICATION FOR CHANGES TO CYCLE SHELTERS & ANY OTHER MINOR FIELD EXEMPTION OCCURED.

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 9 of the DMPO 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:

<table>
<thead>
<tr>
<th>Person Notified</th>
<th>Address</th>
<th>Date of Notification</th>
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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

[Date: 2011-01-04 45] (Version 3184 5)
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:

Expansion of school including the erection of a new stand-alone teaching block, new covered link to existing building, extension of staff car parking and additional hybrid surface play area at Standens Barn Primary School.

Reference number: 17/00059/CCD
Date of decision (DD/MM/YYYY): 30/08/2011

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 [X]

8. Non-Material Amendment(s) Sought

Please describe the non-material amendment(s) you are seeking to make:

TO CHANGE THE SPECIFICATION OF THE COVERED CYCLE SHELTERS AT A LOCATION.
TO AMEND THE CAR PARK LAYOUT TO ACCOMMODATE A FIRE TENDER TURNING HEAD.
TO REPOSITION 2X- LAMPOSTS (NO. 5 & 6 ON SITE PLAN) TO ACCOMMODATE NEW CAR PARK LAYOUT.
TO REMOVE EXISTING TREE THAT CLASHES WITH NEW CAR PARK LAYOUT AND TRIM HEDGE NEAR BY AS PER EMAIL TO TINA CUSP FROM NICK BOLTON.

Are you intending to substitute amended plans or drawings? [ ] Yes [ ] No

If Yes, please complete the following:

Old plan/drawing number(s):

New plan/drawing number(s):

Please state why you wish to make this amendment:
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 dated application form: [☐] ELECTRONIC APPLICATION VIA EMAIL

The original and 3 copies of other plans and drawings or information necessary to describe the subject of the application: [☐] ELECTRONIC APPLICATION VIA EMAIL

The correct fee: [☐]

10. Declaration
I/we hereby apply for planning permission/consent as described in this form and the accompanying plans/drawings and additional information.

Signed - Applicant: [signature] Or signed - Agent: [signature] Date (DD/MM/YYYY): 30/10/2013

11. Applicant Contact Details

<table>
<thead>
<tr>
<th>Telephone numbers</th>
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<tbody>
<tr>
<td>Country code:</td>
</tr>
<tr>
<td>[ ] 01604 - 236 257</td>
</tr>
<tr>
<td>Country code: Mobile number (optional):</td>
</tr>
<tr>
<td>Country code: Fax number (optional):</td>
</tr>
<tr>
<td>Email address (optional):</td>
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</table>

12. Agent Contact Details

<table>
<thead>
<tr>
<th>Telephone numbers</th>
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</thead>
<tbody>
<tr>
<td>Country code:</td>
</tr>
<tr>
<td>[ ] 020-7261-9577</td>
</tr>
<tr>
<td>Country code: Mobile number (optional):</td>
</tr>
<tr>
<td>Country code: Fax number (optional):</td>
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<td>Email address (optional):</td>
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13. 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)

[ ] Agent [ ] Applicant [☑] Other (If different from the agent/applicant's details)

If Other has been selected, please provide:

Contact name: JUSTIN MILNE

Telephone number:

Email address: JUSTIN.milne@galliard.org.co.uk