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 N	lame, Address and Contact Details				
Title: Mr	First name: Dave	Surname: Par	т		
Company name	Kier Construction				
Street address:	Kier House		Country Code	National Number	Extension Number
	Windward Drive	Telephone number:			
	Estuary Business Park	Mobile number:			
Town/City	Speke				
County:	Liverpool	Fax number:			
Country:	United Kingdom	Email address:			
Postcode:	L24 8QR				
2. Agent Nam	e, Address and Contact Details First Name: Dawn	Surname: Co	word		
Title. IVII'S	First Name: Dawn	Surname: Co	ward		
Company name:	Ryder Architecture				
Street address:	Innovation Centre		Country Code	National Number	Extension Number
	131 Mount Pleasant	Telephone number:			
		Mobile number:			
Town/City	Liverpool	Fax number:			
County:		T GATTER TO SET			
Country:	United Kingdom	Email address:			

3. Site Address	Details							
ull postal address of the site (including full postcode where available)					Description:			
House:		Suffix:						
House name:	St Julies Catholic Hig	jh School						
Street address:	Speke Road							
	Woolton							
Town/City:	Liverpool							
County:								
Postcode:	L25 7TN							
Description of locat	tion or a grid referenced if postcode is not kr	⊒ e eown):						
Easting:	342507							
Northing:	386517							
4. Eligibility								
application, have an If you are not the so	on on whose behalf you interest in the part of the owner, has notificate	the land to whice the strict of the land to whice the land to whice the land to whice the land to the land to whice the land to the land to whice the land to the land t	ch this amendment e 10 of the Town and		Planning	YesNeYesNe	lot applicable	
(Development Management Procedure) (England) Order 2015 been gi Person notified Address						103 (100	Date of notification (DD/MM/YYYY)	
LCC		Number		Suffix			15/10/2015	
		Street	Cunard Building]				
		Locality	Liverpool					
		Town						
			Liverpool					
		Post Code	L3 1DS					
		Number		Suffix				
		Street						
		Locality						
		Town						
		Post Code						
		Number		Suffix				
		Street		Janna				
		Locality						
		Town						
		Post Code						
		Number		Suffix				
		Street						
		Locality						
		Town						
		Post Code						
		Number		Suffix				
		Street		Janny				
		Locality						
		Town						
		Post Code						
C December :	of Vour Propos	\1						-

5. Description of Your Proposal

Description of Approved I	Development:				
To erect new school with associated ancillary facilities, widen existing vehicular access to Speke Road and demolish existing school					
Reference number:	15F/0067				
*Date of decision (DD/MM/YYYY):	13/07/2015				
What was the original app	blication type?				
Full planning permission					
For the purpose of calcula	ating fees, which of the following best describes the original application type?				
Householder devel	opment: Development to an existing dwelling-house or development within its curtilage				
Other: anything not	covered by the above category				
6. Non-Material A	mendment(s) Sought				
*Please describe the non	-material amendment(s) you are seeking to make:				
	o the kitchen window arrangement and also a minor change to the doors within the curtain walling in the link space between blocks B & C.				
Are you intending to sub	ostitute amended plans or drawings?				
Please state why you wis	h to make this amendment:				
The proposed minor characceptable. (Marked up o	nge to the doors within the curtain walling is necessary to avoid a clash with the steel beam and we hope that planning would deem this				
	ndment to kitchen window arrangement to coordinate with the kitchen layout.				
7. Pre-application	Advice				
	dvice 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: Mrs	First name: Niki Surname: Gallagher				
Reference:					
Date (DD/MM/YYYY):	Date (DD/MM/YYYY): (Must be pre-application submission)				
Details of the pre-applica	ation advice received:				
8. Site Visit					
Can the site be seen from	n a public road, public footpath, bridleway or other public land?				
	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 Emplo	yee/Member				
With respect to the Auth (a) a member					
(b) an elected	d member				
1 1	a member of staff an elected member				
	Do any of these statements apply to you? Yes No				
10. Declaration					
	nning permission/consent as described in this form and the accompanying plans/drawings and				
	we confirm that, to the best of my/our knowledge, any facts stated are true and accurate and any enuine opinions of the person(s) giving them. Date 15/10/2015				