

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:	SHAH
Last name:	JAHAN		
Company (optional):			
Unit:		House number:	612
		House suffix:	
House name:	SUMMERLEA HOUSE		
Address 1:	CHEPSTOW ROAD		
Address 2:			
Address 3:			
Town:	NEWPORT		
County:			
Country:			
Postcode:	NP19 9BZ		

2. Agent Name and Address

Title:	MR	First name:	TERRY
Last name:	JONES		
Company (optional):			
Unit:		House number:	72
		House suffix:	
House name:			
Address 1:	MILLFIELD PARK		
Address 2:	UNDY		
Address 3:			
Town:	CALDICOT		
County:	MONMOUTHSHIRE		
Country:			
Postcode:	NP26 3LL		

3. Site Details

Enter the full postal address of the application site.

House number:	612	House suffix:	
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SUMMERLEA HOUSE

Address 1: CHEPSTOW ROAD

Address 2:

Address 3:

Town: NEWPORT

County:

Postcode (optional): NP19 9BZ

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.

5. 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

the description of the approved development as shown on the decision letter, including application reference number
decision in the sections below:

ALTERATIONS AND EXTENSIONS TO THE MAIN DWELLING TO PROVIDE
KITCHEN, BEDROOM AND STORAGE ROOM AT LOWER GROUND FLOOR LEVEL,
DINING ROOM, GAMES ROOM AND STORAGE ROOM AT UPPER GROUND FLOOR
LEVEL, BEDROOM AT FIRST FLOOR LEVEL AND BEDROOM, HOME OFFICE AND
EN SUITE AT SECOND FLOOR LEVEL. EXTENSION ON TO EXISTING RAISED
SEATING AREA OFF REAR OF UPPER GROUND FLOOR AND CONSTRUCTION
OF A SINGLE STOREY GARDEN ROOM/SUMMERHOUSE IN REAR GARDEN
CONTAINING KITCHENETTE, SEATING AREA, SHOWER/WC AND FITNESS ROOM
AND FRONT PORCH.

reference number:

25/0459

Date of decision (DD/MM/YYYY):

28 AUGUST 2025

for the purpose of calculating fees, which of the following best describes the original application type?

minorholder development: development to an existing dwelling-house or development within its curtilage ☒

other: anything not covered by the above category ☐

Non-Material Amendment(s) Sought

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

- (i) REMOVAL OF LOWER GROUND FLOOR AND UPPER GROUND FLOOR SIDE
EXTENSION CONTAINING TWO NEW STORAGE ROOMS
- (ii) EXTENSION OF FRONT WALL OF GAMES ROOM AT UPPER GROUND FLOOR
LEVEL AND BEDROOM AT FIRST FLOOR LEVEL REMOVING THE 1.0m SETBACK
- (iii) REDUCTION OF RAISED SEATING AREA ADJACENT TO EXTENSION
REMOVED AS DETAILED IN SECTION (i) EXTENSION OF PROPOSED RAISED SEATING AREA
OVER THE LOWER GROUND FLOOR REAR BEDROOM EXTENSION.
- (iv) RECONFIGURATION OF THE SECOND FLOOR LAYOUT INTRODUCING A
REAR DORMER CONTAINING TWO BEDROOMS WITH EN SUITES AND AN OFFICE
AND A NEW ROOF IN WHICH THE PITCH OF BOTH HIPPED ENDS IS
INCREASED FROM 40 TO 45 DEGREES

are you intending to substitute amended plans or drawings?

☒ Yes

☐ No

Yes, please complete the following:

old plan/drawing number(s):

1612(05)25 REV A, 1612(06)REV A, 1612(07)25 REV A

new plan/drawing number(s):

1612(05)25 REV B, 1612(06)25 REV B, 1612(07)25 REV B, 1612(10)26 and 1612(11)26

please state why you wish to make this amendment:

- (i) REMOVAL OF THE SIDE EXTENSION TO REDUCE COSTS
- (ii) REMOVAL OF 1.0m SETBACK WILL ENABLE A SYMMETRICAL TRUSSED ROOF/DORMER
ROOF TO BE CONSTRUCTED REPLACING THE EXISTING ROOF IN ITS ENTIRETY
THUS MAKING A REAR DORMER MORE FEASIBLE.
- (iii) LOSS OF THE RAISED SEATING AREA TO THE RIGHT HAND SIDE OF
THE REAR ELEVATION TO BE COMPENSATED BY AN ADDITIONAL AREA OVER
THE PROPOSED LOWER GROUND FLOOR SINGLE STOREY EXTENSION.
- (iv) CHANGE IN THE ANGLE OF THE HIPPED ENDS WILL PRODUCE A MORE
DESIRABLE FRONT ELEVATION.

Application Requirements - Checklist

Use the following checklist to make sure you have sent all the information in support of your proposal. Failure to submit all required information will result in your application not being accepted. It will not be accepted until all information required by the Planning Authority has been submitted.

Original and 3 copies of a completed and dated application form:



Original and 3 copies of other plans and drawings or information necessary to describe the subject of the application:



* TO BE E MAILED TO YOUR OFFICES

Is the correct fee:



3. 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:

Telephone number:

Mail address: