Llywodraeth Cymru
Welsh Government

# Application for a non-material amendment following a grant of planning permission

## Town and Country Planning Act 1990

**If printed, please complete using BLOCK CAPITALS and BLACK ink.**

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### 1. Applicant Name and Address

Title: [redacted] First name: [redacted]

Last name: [redacted]

Company (optional):

Unit: House number: House suffix:

House name:

Address 1: [redacted]

Address 2:

Address 3:

Town:

County:

Country:

Postcode:

## 2. Agent Name and Address

| | | | | | |
|---|---|---|---|---|---|
| Title: | MR | First name: | ANDY | | |
| Last name: | CLARKE | | | | |
| Company (optional): | TACP ARCHITECTS | | | | |
| Unit: | | House number: | | House suffix: | |
| House name: | | | | | |
| Address 1: | PEMBROKE HOUSE | | | | |
| Address 2: | ELLICE WAY | | | | |
| Address 3: | WREXHAM TECHNOLOGY PARK | | | | |
| Town: | WREXHAM | | | | |
| County: | | | | | |
| Country: | | | | | |
| Postcode: | LL13 7YT | | | | |

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Mae'r ddogfen hon ar gael yn Gymraeg hefyd / This document is also available in Welsh
Rydym yn croesawu gohebiaeth a galwadau ffôn yn Gymraeg / We welcome correspondence and telephone calls in Welsh

## 3. Site Details

Please provide the full postal address of the application site.

| | | | | | |
|---|---|---|---|---|---|
| Unit: | | House number: | | House suffix: | |

| | |
|---|---|
| House name: | |
| Address 1: | ARDAGH METAL BEVERAGE |
| Address 2: | BRIDGE ROAD NORTH |
| Address 3: | WREXHAM INDUSTRIAL ESTATE |
| Town: | WREXHAM |
| County: | |
| Postcode: (optional) | LL13 9PS |

If you cannot provide a postcode, the description of site location must be completed. Please provide the most accurate site description you can, to help locate the site – for example "field to the North of the Post Office".

| | | | |
|---|---|---|---|
| Easting: | 337991 | Northing: | 349729 |

Description:

## 4. Pre-application Advice

Has pre-application advice been sought from the local planning 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 possible: ☐

Officer name:

Reference:

Date (DD/MM/YYYY): (must be pre-application submission)

Details of the 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.**

## 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 [X]

If Yes, please provide details of the name, relationship and role:

[ ]

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## 7. Description of Your Proposal

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

INSTALLATION OF CIRCULATION ROADWAY

Reference number: P/2026/0446

Date of decision (DD/MM/YYYY): 10/09/2026

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:

ALTERATIONS TO ROADWAY, BY MOVING ROAD LEFT By 3.2M

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

If Yes, please complete the following:

Old plan/drawing number(s): 7000/7001/7100/7101

New plan/drawing number(s): PL7000/PL7001/PL7100

Please state why you wish to make this amendment:

TO ALLOW INSTALLATION OF NEW DRAINAGE

## 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. ☐

The original and 3 copies of other plans and drawings or information necessary to describe the subject of the application. ☐

The correct fee. ☐

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## 10. Declaration

I/we hereby apply for planning permission as described in this form and the accompanying plans/drawings and additional information. I confirm that, to the best of my knowledge, any facts stated are true and accurate and any opinions given are the genuine opinions of the persons giving them.

Signed – Applicant:

Or signed – Agent: [redacted]

Date (DD/MM/YYYY):
(date cannot be pre-application) 21/09/2026

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## 11. Applicant Contact Details

Telephone numbers:

Country code: | National number: | Extension number:

[redacted]

Country code: | Mobile number (optional):

Email address (optional):

## 12. Agent Contact Details

Telephone numbers:

Country code: [redacted] Extension number:

Country code: Mobile number (optional):

Email address (optional):

## 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: Telephone number:

Email address: