



Application for removal or variation of a condition following grant of planning permission. Town and Country Planning Act 1990. Planning (Listed Buildings and Conservation Areas) Act 1990

Privacy Notice

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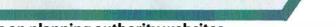
Please be aware that once you have downloaded this form, Planning Portal will have no access to the form or the data you enter into it. Any subsequent use of this form is solely at your discretion, including the choice to complete and submit it to the Local Planning Authority in agreement with the declaration section.

Upon receipt of this form and any supporting information, it is the responsibility of the Local Planning Authority to inform you of its obligations in regards to the processing of your application. Please refer to its website for further information on any legal, regulatory and commercial requirements relating to information security and data protection of the information you have provided.

Local Planning Authority details:

Development Management

Welwyn Hatfield Borough Council The Campus, Welwyn Garden City, Herts AL8 6AE T: 01707 357000 F: 01707 357255 E: planning@welhat.gov.uk www.welhat.gov.uk



WELWYN HATFIELD

Publication of applications on planning authority websites

Information provided on this form and in supporting documents may be published on the authority's planning register and website.

Please ensure that the information you submit is accurate and correct and does not include personal or sensitive information. If you require any further clarification, please contact the Local Planning Authority directly.

If printed, please complete using block capitals and black ink.

It is important that you read the accompanying guidance notes and help text as incorrect completion will delay the processing of your application.

1. Applica	ant Name and Address	2. Agent Name and Address		
Title:	MR First name: ROBERT	Title: ΠR First name: $SA M$		
Last name:	McGREGOR	Last name: BENNETT		
Company (optional):	ELLONA SE QOYA	Company (optional): ALAN COX ASSOCIATES		
Unit:	House number: House suffix:	Unit: House number: 224 A House suffix:		
House name:		House name: CONVENSENCE HOUSE		
Address 1:		Address 1: BARNET HIGH STREET		
Address 2:		Address 2:		
Address 3:		Address 3:		
Town:		Town: BARNET		
County:		County: HERTFORD SHIRE		
Country:	U K	Country: UK		
Postcode:		Postcode: EN 5 552		
		Version 2018		

3. Site Address Details			e-application Advice			
Please provide the full postal address of the application site.			sistance or prior advice been sought from the local rity about this application?			
Unit:	House number: 101 House suffix:					
House name:		you w	please complete the following information about the advice ere given. (This will help the authority to deal with this			
Address 1:	BROOKMANS AVENUE	Please	ation more efficiently). tick if the full contact details are not			
Address 2:			n, and then complete as much as possible:			
Address 3:		Office	r name:			
Town:	BROOK MANS PARK	Refere	ence:			
County:	HERTFORD SHIRE		· · · · · · ·			
Postcode (optional):	ALG TOL		Date (DD/MM/YYYY):			
Description	of location or a grid reference.		be pre-application submission)			
(must be co	ompleted if postcode is not known):	Detail	s of pre-application advice received?			
Easting:	Northing:					
Description	n:					
E Denni	ption Of Your Proposal					
Please prov		on the o	decision letter, including the application reference number			
T		AN OF	EXISTING BUILDINGS			
ENECIZO	IN OF SIX DUCTORS (POPLOWING DUCTORS)	0,0 0,				
Reference r	number: 6/2019/2313/FUL Date of decision (D	D/MM/Y	YYY): 18/12/2019 (date must be pre-application submission)			
Please state	e the condition number(s) to which this application relate	s:				
1.	10	6.				
2.		7.				
3.		8.				
4.		9.				
. 5.		10.				
Has the de	velopment already started?		Yes 📈 No			
If Yes, please state when the development started (DD/MM/YYYY): (date must be pre-application submission)						
Has the development been completed?						
If Yes, please state when the development was completed (DD/MM/YYYY): (date must be pre-application submission)						
6. Condi	tion(s) - Removal					
	e why you wish the condition(s) to be removed or change	d:				
DRAWINGS FOR HOUSES 1-3 ALONG BROOKMANS AVENUE TO MAVE LIVING ROUM REPLACED WITH AN INTERNAL						
GARAGE, AMENDMENTS TO EXTERNAL PARKING TO ACOUNT FOR GARAGES AND TO ELEVATIONS TO ACCOMMODATE A GARAGE						
Doo R						
If you wish the existing condition to be changed, please state how you wish the condition to be varied:						
THE CONDETEON IS UPDATED TO REFLECT THE LATEST PRAVING REVISCONS						

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7. Ownership Certificates and Agricultural Land Declaration							
One Certificate A, B, C, or D, must be completed with this application form							
CERTIFICATE OF OWNERSHIP - CERTIFICATE A Town and Country Planning (Development Management Procedure) (England) Order 2015 Certificate under Article 14 I certify/The applicant certifies that on the day 21 days before the date of this application nobody except myself/ the applicant was the owner* of any part of the land or building to which the application relates, and that none of the land to which the application relates is, or is part of, an agricultural holding**							
NOTE: You should sign Certificate B, C or D, as appropriate, if you are the sole owner of the land or building to which the application relates but the land is, or is part of, an agricultural holding.							
* "owner" is a person with a freehold interest or leasehold interest with at least 7 years left to run. ** "agricultural holding" has the meaning given by reference to the definition of "agricultural tenant" in section 65(8) of the Act.							
Signed - Applicant:	Or signed - Agent:	Date (DD/MM/YYYY):					
		27/02/2020					
Town and Country Planning (Development Management Procedure) (England) Order 2015 Certificate under Article 14 I certify/ The applicant certifies that I have/the applicant has given the requisite notice to everyone else (as listed below) who, on the day 21 days before the date of this application, was the owner* and/or agricultural tenant** of any part of the land or building to which this application relates. * "owner" is a person with a freehold interest or leasehold interest with at least 7 years left to run. ** "agricultural tenant" has the meaning given in section 65(8) of the Town and Country Planning Act 1990							
Name of Owner / Agricultural Tenant	Address	Date Notice Served					
		5					
Signed - Applicant:	Or signed - Agent:	Date (DD/MM/YYYY):					
[27/02/2020					

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8. Planning 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 being deemed invalid. It will not be considered valid until all information required by the Local Planning Authority (LPA) has been submitted.						
The original and 3 copies* of a completed and dated application form:	The original and 3 copies* of the completed, dated Ownership Certificate (A, B, C or D – as applicable) and Article 14 Certificate (Agricultural Holdings):					
The original and 3 copies* of other plans and drawings or information necessary to describe the subject of the application:						
The correct fee:						
*National legislation specifies that the applicant must provide the original plus three copies of the form and supporting documents (a total of four copies), unless the application is submitted electronically or, the LPA indicate that a smaller number of copies is required. LPAs may also accept supporting documents in electronic format by post (for example, on a CD, DVD or USB memory stick). You can check your LPA's website for information or contact their planning department to discuss these options.						
9. 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. Signed - Applicant: Or signed - Agent: Date (DD/MM/YYYY): Or signed - Agent: Or sign						
	2/102/2020 pre-application)					
10. Applicant Contact Details Telephone numbers Country code: National number: Country code: Mobile number (optional): Country code: Fax number (optional): Country code: Fax number (optional): Email address (optional):	11. Agent Contact Details Telephone numbers Country code: National number: D20 8 440 Country code: Mobile number (optional): Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional): Email address (optional): Sam bennett @ cox associates - co.uk					
12. Site Visit						
Can the site be seen from a public road, public footpath, bridleway or other public land? Ves No						
If the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (<i>Please select only one</i>) Agent Other (if different from the agent/applicant's details)						
If Other has been selected, please provide:						
Contact name:	Telephone number:					
Email address:						
	1					