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



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

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	ame, Address a	nd Contact Details								
Title: Ms	First Name:	Tonia		Surname:	Sinclair					
Company name:	Notting Hill Genesi	S								
Street address:	Atelier House									
	64 Pratt Street		Telephone number:							
			Mobile number:							
Town/City:	London		Fax number:							
Country:			Email address:							
Postcode:	NW1 0DL									
Are you an agent	acting on behalf of th	ne applicant?	Yes	lo						
2. Agent Name	, Address and C	Contact Details								
Title: Mr	First Name:	Alex		Surname:	Woolcott					
Company name:	Winckworth Sherwood LLP									
Street address:	Minerva House									
	Montague Close		Telephone numb	er: 0207	5935000					
			Mobile number:							
Town/City:	London		Fax number:							
Country:			Email address:							
Postcode:	SE1 9BB		awoolcott@wsla	w co uk						

3. Site Addres	ss Deta	ıils																				
Full postal addre	ess of the	site (inc	cluding	full po	stcode	wher	e ava	ilable))	Des	scription	on:										
House:			S	Suffix:																		
House name:																						
Street address:	8-18 (ir	nclusive)	Stanbo	rough	 າ Clos∈																	
								_														
								_														
Town/City:	WELW	YN GAR	DEN C	ITY																		
Postcode:	AL8 6X	 .B																				
Description of lo (must be comple					:																	
Easting:	523409																					
Northing:	212054																					
1																						
4. Pre-applica	ation A	dvice																				
Has assistance of	or prior a	dvice be	en sou	ght fro	m the	local a	autho	rity ab	out th	nis ap	plicati	on?			(0)	Yes	0	No				
If Yes, please co	omplete t	ne follow	ing info	rmati	on abo	ut the	advid	ce you	ı were	e give	en (this	will he	elp th	e autho	rity to	o deal v	with thi	s appli	ication n	nore effi	cientl	y):
Officer name:																						
Title: Ms	First name: Louise Surname: Sahlke																					
Reference:																						
Date (DD/MM/Y)	YYY):			(Mı	ust be	pre-ap	plica	tion s	ubmis	ssion))											
Details of the pre				ived:																		_
Informal pre-app	plication	discussio	ons																			
5. Description	n of the	Propo	osal																			
Please provide a	a descrip	tion of th	e appro	oved c	levelor	oment	as sh	nown (on the	e deci	ision le	etter										
Demolition of ex													ersor	ns bunda	alow	s, car p	parking	, lands	scaping	and alte	ration	าร
to highway				_										1								
	reference number: N6/1994/0338/FP											Da	ite o	f decis	ion:	29/0	9/1994					
Please state the Condition number		1 numbe	r(s) to v	vhich	this ap	plicati	on re	lates:														
Condition 10																						
Has the develop	ment alre	eady sta	rted?		Yes	○ No)	If Yes	s, plea	ase st	tate w	nen the	e dev	elopmer	nt wa	as start	ed:	01/1	1/1994			
Has the develop	ment be	en comp	leted?		Yes (O No)	If Yes	s. plea	ase si	tate w	nen the	e dev	elopmer	nt wa	as com	pleted:	01/0	7/1996			
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	<u> </u>																					
6. Condition(s	s) - Rei	novai																				
Please state why	y you wis	h the co	ndition(s) to I	oe rem	oved (or cha	anged	:													
Please see cove	ering lette	эr																				
If you wish the existing condition to be changed, please state how you wish the condition to be varied:																						
Please see cove	ering lette	∍r		—																		

7. 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 sh	nould they contact? (Please select only one)							
The agent								
B. Certificates (Certificate A)								
Certificate of Ownership - Certificate of Owners								
I certify/The applicant certifies that on the day 21 days before the date of this application nobody ex freehold interest or leasehold interest with at least 7 years left to run) of any part of the land to whic relates is, or is part of, an agricultural holding ("agricultural holding" has the meaning given by refer-	ch the application relates, and that none of the land to which the application							
Title: Ms First name: Tonia	Surname: Sinclair							
Person role: APPLICANT Declaration date:	11/05/2018							
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. Date								