Oxford Planning Control and Conservation St Aldate's Chambers, 109-113 St Aldate's Oxford, OX1 1DS

Tel: 01865 249811

1. Site Address

Number

Suffix

Property name

Email: planning@oxford.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.

Oxford Retail Park

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.

| Address line 1 | Ambassador Avenue | | | |
|--|--|--|--|--|
| Address line 2 | | | | |
| Address line 3 | | | | |
| Town/city | Oxford | | | |
| Postcode | OX4 6XJ | | | |
| Description of site location must be completed if postcode is not known: | | | | |
| Easting (x) | 455209 | | | |
| Northing (y) | 203483 | | | |
| Description | | | | |
| | | | | |
| | | | | |
| | | | | |
| 2. Applicant Detai | Is | | | |
| 2. Applicant Detai | Is | | | |
| | Is ERIC | | | |
| Title | | | | |
| Title First name | ERIC | | | |
| Title First name Surname | ERIC | | | |
| Title First name Surname Company name | ERIC HSBC BANK PENSION TRUST (UK) LTD | | | |
| Title First name Surname Company name Address line 1 | ERIC HSBC BANK PENSION TRUST (UK) LTD C/O AGENT | | | |
| Title First name Surname Company name Address line 1 Address line 2 | ERIC HSBC BANK PENSION TRUST (UK) LTD C/O AGENT | | | |
| Title First name Surname Company name Address line 1 Address line 2 Address line 3 | ERIC HSBC BANK PENSION TRUST (UK) LTD C/O AGENT Kempsey | | | |

| 2. Applicant Detai | ls | | | | |
|---|--|------------|--|--|--|
| Country | United Kingdom | | | | |
| Postcode | WR5 3JZ | | | | |
| Are you an agent acting | on behalf of the applicant? | ■ Yes ■ No | | | |
| Primary number | | | | | |
| Secondary number | | | | | |
| Fax number | | | | | |
| Email address | | | | | |
| | | | | | |
| 3. Agent Details Title | | | | | |
| | ERIC | | | | |
| | | | | | |
| | HALL | | | | |
| Company name | TDH ESTATES LTD | | | | |
| Address line 1 | 11 Old Road North | | | | |
| Address line 2 | Kempsey | | | | |
| Address line 3 | | | | | |
| Town/city | Worcester | | | | |
| Country | United Kingdom | | | | |
| Postcode | WR5 3JZ | | | | |
| Primary number | | | | | |
| Secondary number | | | | | |
| Fax number | | | | | |
| Email | | | | | |
| 4. Description of the Proposal Please provide a description of the approved development as shown on the decision letter Replacement of existing south west and north west elevations. | | | | | |
| Reference number | | | | | |
| 19/03236/FUL | | | | | |
| Date of decision (date must be pre-application submission) | 11/03/2020 | | | | |
| | Please state the condition number(s) to which this application relates | | | | |
| Condition number(s) CONDITION 2 (LIST OF APPROVED PLANS) | | | | | |
| SONDITION 2 (LIGITO | | | | | |

| 4. Description of the Proposal | | | | |
|---|--|---|-------------------------------|--|
| Has the development a | Iready started? | □Yes | No | |
| 5. Condition(s) - R | emoval/Variation | | | |
| Please state why you w | rish the condition(s) to be removed or changed | | | |
| TENANT REQUIREME | NTS | | | |
| If you wish the existing | condition to be changed, please state how you wish the | condition to be varied | | |
| REFER TO COVERING | ELETTER FOR LIST OF REPLACEMENT PLANS | | | |
| 6. Site Visit | | | | |
| Can the site be seen from | om a public road, public footpath, bridleway or other pub | lic land? | ■ No | |
| If the planning authority needs to make an appointment to carry out a site visit, whom should they contact? The agent The applicant Other person | | | | |
| 7. Pre-application | Advice | | | |
| Has assistance or prior | advice been sought from the local authority about this a | pplication? | ■No | |
| If Yes, please complete efficiently): | e the following information about the advice you we | re given (this will help the authority to deal with | this application more | |
| Officer name: | | | | |
| Title | | | | |
| First name | | | | |
| Surname | | | | |
| Reference | | | | |
| Date (Must be pre-appl | ication submission) | | | |
| | | | | |
| Details of the pre-applic | ation advice received | | | |
| | | | | |
| | | | | |
| CERTIFICATE OF OWI under Article 14 | rificates and Agricultural Land Declaration NERSHIP - CERTIFICATE A - Town and Country Plan certifies that on the day 21 days before the date of the | ning (Development Management Procedure) (E | | |
| part of the land or buil holding** | ding to which the application relates, and that none | of the land to which the application relates is, o | r is part of, an agriculturál | |
| reference to the defini | ith a freehold interest or leasehold interest with at lease tion of 'agricultural tenant' in section 65(8) of the Act | | | |
| NOTE: You should sig land is, or is part of, a | n Certificate B, C or D, as appropriate, if you are the agricultural holding. | sole owner of the land or building to which the | application relates but the | |
| Person role The applicant The agent | | | | |
| Title | | | | |

| 8. Ownership Ce | ertificates and Agricultural Land Declaration | |
|--------------------------------------|---|--|
| First name | ERIC | |
| Surname | HALL | |
| Declaration date (DD/MM/YYYY) | 13/01/2021 | |
| Declaration made | | |
| | | |
| 9. Declaration | | |
| | | I the accompanying plans/drawings and additional information. I/we confirm d any opinions given are the genuine opinions of the person(s) giving them. |
| Date (cannot be pre- application) | 13/01/2021 | |
| | | |
| | | |
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