

Development Planning

The Woolwich Centre
35 Wellington Street
Woolwich SE18 6HQ

For office use only
Date received
Date valid
Fee paid
Application No.



Application for Removal or Variation of a Condition following Grant of Planning Permission or
Listed Building Consent

Town and Country Planning Act 1990 (as amended); Planning (Listed Buildings and Conservation
Areas Act) 1990 (as amended)

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.

Site Location

Disclaimer: We can only make recommendations based on the answers given in the questions.

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".

Number	<input type="text" value="257"/>
Suffix	<input type="text"/>
Property Name	<input type="text"/>
Address Line 1	<input type="text" value="Shooters Hill Road"/>
Address Line 2	<input type="text"/>
Address Line 3	<input type="text"/>
Town/city	<input type="text" value="Blackheath"/>
Postcode	<input type="text" value="SE3 8UN"/>

Description of site location must be completed if postcode is not known:

Easting (x)	Northing (y)
<input type="text" value="541367"/>	<input type="text" value="177079"/>

Description

Applicant Details

Name/Company

Title

First name

Surname

Company Name

Address

Address line 1

Address line 2

Address line 3

Town/City

County

Country

Postcode

Are you an agent acting on behalf of the applicant?

Yes

No

Contact Details

Primary number

**** REDACTED ****

Secondary number

Fax number

Email address

**** REDACTED ****

Agent Details

Name/Company

Title

Mr

First name

Courtney

Surname

Dawson

Company Name

MZA Planning

Address

Address line 1

14 Devonshire Mews

Address line 2

Chiswick

Address line 3

Town/City

London

County

Country

United Kingdom

Postcode

W4 2HA

Contact Details

Primary number

***** REDACTED *****

Secondary number

Fax number

Email address

***** REDACTED *****

Description of the Proposal

Please provide a description of the approved development as shown on the decision letter

Change of use of the first floor residential flat (Class C3) to dental practice rooms associated with the ground floor dental clinic (Class E) for a temporary period of two years.

Reference number

21/1105/F

Date of decision (date must be pre-application submission)

01/06/2021

Please state the condition number(s) to which this application relates

Condition number(s)

2

Has the development already started?

- Yes
 No

Condition(s) - Variation/Removal

Please state why you wish the condition(s) to be removed or changed

Please see attached cover letter

If you wish the existing condition to be changed, please state how you wish the condition to be varied

Please see the attached cover letter

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?

- The agent
 The applicant
 Other person

Pre-application Advice

Has assistance or prior advice been sought from the local authority about this application?

- Yes
 No

Ownership Certificates and Agricultural Land Declaration

Certificates under Article 14 - Town and Country Planning (Development Management Procedure) (England) Order 2015 (as amended)

Please answer the following questions to determine which Certificate of Ownership you need to complete: A, B, C or D.

Is the applicant the sole owner of all the land to which this application relates; and has the applicant been the sole owner for more than 21 days?

- Yes
 No

Can you give appropriate notice to all the other owners/agricultural tenants? (Select 'Yes' if there are no other owners/agricultural tenants)

- Yes
 No

Certificate Of Ownership - Certificate B

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; or
 The applicant is the sole owner of all the land or buildings to which this application relates and there are no other owners* and/or agricultural tenants**.

* "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:

***** REDACTED *****

House name:

Number:

17

Suffix:

Address line 1:

Pond Road

Address Line 2:

Town/City:

London

Postcode:

SE3 0SL

Date notice served (DD/MM/YYYY):

28/11/2023

Person Family Name:

Person Role

The Applicant

The Agent

Title

Mr

First Name

Courtney

Surname

Dawson

Declaration Date

28/11/2023

Declaration made

Declaration

I/We hereby apply for Removal/Variation of a condition as described in the questions answered, details provided, 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.

I/We also accept that, in accordance with the Planning Portal's terms and conditions:

- Once submitted, this information will be made available to the Local Planning Authority and, once validated by them, be published as part of a public register and on the authority's website;
- Our system will automatically generate and send you emails in regard to the submission of this application.

I / We agree to the outlined declaration

Signed

Yussuf Mwanza

Date

2023/11/28