Lambeth Planning

Post: PO Box 734, Winchester, SO23 5DG Tel: 020 7926 1180 Email: planning@lambeth.gov.uk Web: www.lambeth.gov.uk/planning



# 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	49			
Suffix				
Property Name				
Address Line 1				
Leigham Court Road				
Address Line 2				
Address Line 3				
Lambeth				
Town/city				
London				
Postcode				
SW16 2NF				
Description of site location must be completed if postcode is not known:				
Easting (x)	Northing (y)			
530425	172530			

# Applicant Details

# Name/Company

#### Title

#### First name

#### Surname

.

#### Company Name

DNA Vetcare

## Address

#### Address line 1

c/o 4d planning

#### Address line 2

3rd Floor

#### Address line 3

86-90 Paul Street

#### Town/City

Hackney London

County

Country

# Postcode

EC2A 4NE

Are you an agent acting on behalf of the applicant?

⊘ Yes

() No

# **Contact Details**

Primary number

***** REDACTED ******	*****	REDACTED	*****
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Secondary number

Fax number

Email address

\*\*\*\*\* REDACTED \*\*\*\*\*\*

# **Agent Details**

# Name/Company

Title

Mr

First name

James

Surname

Μ

#### Company Name

4D Planning

## Address

# Address line 1 4D Planning Address line 2 3rd Floor Address line 3 86-90 Paul Street Town/City Hackney London County County

#### Postcode

EC2A 4NE

# **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 lower ground floor premises to form a veterinary centre with external rear MRI unit

Reference number

23/01883/FUL

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

09/01/2024

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

Condition number(s)

8

Has the development already started?

⊖ Yes

⊘ No

# Condition(s) - Variation/Removal

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

Refer to planning Statement

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

Refer to planning Statement. A suggested varied condition is as follows:

"The use hereby permitted shall not be open to members of the public outside the hours:

08:00 Hours to 19:00 Hours - Monday through to Friday

09:00 Hours to 16:00 Hours - Saturdays

09:00 Hours to 12:00 Hours - Sundays, Bank Holidays or Public Holidays

Outside of these hours the premises shall operate on an emergency basis only."

## 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

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):

Officer name:

Title

\*\*\*\*\* REDACTED \*\*\*\*\*\*

#### First Name

\*\*\*\*\* REDACTED \*\*\*\*\*\*

Surname

\*\*\*\*\* REDACTED \*\*\*\*\*\*

Reference

Date (must be pre-application submission)

17/01/2024

Details of the pre-application advice received

E-mail and phone correspondence with Micheal Clawson on 17th January 2024

# 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) ② Yes

O 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

**Owner/Agricultural Tenant** 

	Name of Owner/Agricultural Tenant: ***** REDACTED *****			
	House name:			
	Number:			
	Suffix:			
	Address line 1: C/o Unit 10, 9-11 Gleneldon Road, Streatham, London,			
	Address Line 2:			
	Town/City:			
	Postcode: SW16 2AU			
	Date notice served (DD/MM/YYYY): 19/01/2024			
	Person Family Name:			
F	Person Role			
⊘ The Applicant				
○ The Agent				
Title				
First Name				
Surname				

Declaration Date

19/01/2024

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

James M

#### Date

19/01/2024