



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

You can complete and submit this form electronically via the Planning Portal by visiting [www.planningportal.gov.uk/apply](http://www.planningportal.gov.uk/apply)

**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.

Please complete using block capitals and black ink.

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

**1. Applicant Name and Address**

Title:  First name:

Last name:

Company (optional):

Unit:  House number:  House suffix:

House name:

Address 1:

Address 2:

Address 3:

Town:

County:

Country:

Postcode:

**2. Agent Name and Address**

Title:  First name:

Last name:

Company (optional):

Unit:  House number:  House suffix:

House name:

Address 1:

Address 2:

Address 3:

Town:

County:

Country:

Postcode:

### 3. Site Address Details

Please provide the full postal address of the application site.

Unit:  House number:  House suffix:

House name: **CARTBRIDGE BASIN MARINA**

Address 1: **TANNERY LANE**

Address 2:

Address 3:

Town: **SEND. WOKING**

County: **SURREY**

Postcode (optional): **GU23 7EF**

Description of location or a grid reference. (must be completed if postcode is not known):

Easting:  Northing:

Description: **LAND TO THE NORTH OF TANNERY LANE EAST OF WHARF LANE**

### 4. 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).

Please tick if the full contact details are not known, and then complete as much as possible:

Officer name:

Reference:

Date (DD/MM/YYYY):  (must be pre-application submission)

Details of pre-application advice received?

### 5. Description Of Your Proposal

Please provide a description of the approved development as shown on the decision letter, including the application reference number and date of decision in the sections below:

**REMOVAL OF CONDITION 9 CYCLEWAY.  
REVISION OF CONDITION 2 - APPLICATION SITE PLAN DESIGN & ACCESS STATEMENT**

Reference number: **14/P/02289** Date of decision (DD/MM/YYYY): **11/09/2014** (date must be pre-application submission)

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

1.		6.	
2.	<b>TO REMOVE CYCLEWAY ELEMENTS</b>	7.	
3.		8.	
4.		9.	<b>PROVISION OF CYCLEWAY.</b>
5.		10.	

Has the development already started?  Yes  No

If Yes, please state when the development started (DD/MM/YYYY): **05/04/2015** (date must be pre-application submission)

Has the development been completed?  Yes  No

If Yes, please state when the development was completed (DD/MM/YYYY):  (date must be pre-application submission)

### 6. Condition(s) - Removal

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

**THE GRAVEL & GRASS PATHWAY WE PUT IN PLACE IS UNUSED. SECURITY AT WHARF LANE IS A CONCERN TO BERTH HOLDERS. SPEED LIMIT TANNERY LANE REDUCED FROM 40 TO 30 MPH 01/02/15.**

If you wish the existing condition to be changed, please state how you wish the condition to be varied:  
**REMOVAL OF CONDITION 9.  
AMENDED CONDITION 2 TO REFLECT REMOVAL OF CONDITION 9 (AS ABOVE)**

**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.

Or signed - Agent:

Date (DD/MM/YYYY):

25/02/2024

**CERTIFICATE OF OWNERSHIP - CERTIFICATE B**

**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

Signed - Applicant:

Or signed - Agent:

Date (DD/MM/YYYY):

### 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

Signed - Agent:

Date (DD/MM/YYYY):

(date cannot be pre-application)

25/02/2024

### 10. Applicant Contact Details

Telephone numbers

Country code: National number:

Extension number:

[Redacted] [Redacted] [Redacted]

Country code: Mobile number (optional):

[Redacted] [Redacted]

Country code: Fax number (optional):

[Redacted] [Redacted]

Email address (optional):

[Redacted]

### 11. Agent Contact Details

Telephone numbers

Country code: National number:

Extension number:

[Redacted] [Redacted] [Redacted]

Country code: Mobile number (optional):

[Redacted] [Redacted]

Country code: Fax number (optional):

[Redacted] [Redacted]

Email address (optional):

[Redacted]

### 12. 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? (Please select only one)

Agent

Applicant

Other (if different from the agent/applicant's details)

If Other has been selected, please provide:

Contact name:

Geoff Cook

Telephone number:

Email address:

[Redacted]

