

## 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

**Privacy Notice** 

This form is provided by Planning Portal and based on the requirements provided by Government for the sole purpose of submitting information to the Local Planning Authority in accordance with the legislation detailed on this form.

Please be aware that once you have downloaded this form, Planning Portal will have no access to the form or the data you enter into it. Any subsequent use of this form is solely at your discretion, including the choice to complete and submit it to the Local Planning Authority in agreement with the declaration section.

Upon receipt of this form and any supporting information, it is the responsibility of the Local Planning Authority to inform you of its obligations in regards to the processing of your application. Please refer to its website for further information on any legal, regulatory and commercial requirements relating to information security and data protection of the information you have provided.

## Local Planning Authority details:



Willow House, Mareham Rd, Horncastle, Lincolnshire, LN9 6PH

T: 08446 60111 - 01507 601111

Mini-com: 01507 329555 www.e-lindsey.gov.uk

Publication of applications on planning authority websites

Information provided on this form and in supporting documents may be published on the authority's planning register and website.

Please ensure that the information you submit is accurate and correct and does not include personal or sensitive information. If you require any further clarification, please contact the Local Planning Authority directly.

If printed, please complete using block capitals and black ink.

It is important that you read the accompanying guidance notes and help text as incorrect completion will delay the processing of your

application.				
Applicant Name and Address				
Title:	Met Mes First name: F AND A			
Last name:	Forty			
Company (optional):				
Unit:	House number: House suffix:			
House name:	Topo's Frem			
Address 1:	MONKSTHORPE			
Address 2:				
Address 3:				
Town:	SPUSBY			
County:	UNCONSHIPE			
Country:				
Postcode:	PE23 5 PP			

2. Agent	Name and Address		
Title:	First name: D		
Last name:	BIGGADIKE		
Company (optional):	DC ARRHATECTURISTERIES LTD		
Unit:	House number: House suffix:		
House name:	THE BARN		
Address 1:	PARTHEY MICC		
Address 2:			
Address 3:			
Town:	SPILSBY		
County:	LINCOLKSHIPF		
Country:			
Postcode:	PEZ3 4PE		

3. Site Address Details	4. Pre-application Advice				
Please provide the full postal address of the application site.	Has assistance or prior advice been sought from the local authority about this application?				
Unit: House number: House suffix:	authority about this application?				
House Topo's Frem	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				
House name: Topo's Fram  Address 1: MonkstacePE					
Address 2:	known, and then complete as much as possible:				
Address 3:	Officer name:  CEMS HUMPHRIES				
Town: SPICSBY	Reference:				
County: UNCS					
Postcode (optional): PE23 SPP	Date (DD/MM/YYYY): (must be pre-application submission)				
Description of location or a grid reference. (must be completed if postcode is not known):	Details of pre-application advice received?				
Easting: Northing:	Lenar				
Description:					
5. Description Of Your Proposal	in the state of th				
Please provide a description of the approved development as show and date of decision in the sections below:	n on the decision letter, including the application reference number				
REMOVE CONDITION Nº	3 (HOCIDAY OCCUPANCY				
RESTRICTION AS IMPOSE	EN ON REFERENCE				
STORY DIONALE FOR PLANNING DE	EDISION FOR CHANGE OF USE COMERINA				
5/064/01040/19 FOR PLATINING PERISION FOR CHANGE OF USE, COMESION OF, EXISTING AGRICULTURAL BULLONG TO PROVIDE HOLDAY ACCOMMODATION					
Reference number: \$\( \( \o\) \( \o\) \( \o\) \( \o\) \( \o\) \( \o\) Date of decision (I	DD/MM/YYYY): 02 (00) (date must be pre-application submission)				
Please state the condition number(s) to which this application relate					
1. THREE	6.				
2.	7.				
3.	8.				
4.	9.				
5.	10.				
Has the development already started?	Yes No				
If Yes, please state when the development started (DD/MM/YYYY): (date must be pre-application submission)					
Has the development been completed?					
If Yes, please state when the development was completed (DD/MM/YYYY): 666623 (date must be pre-application submission)					
6. Condition(s) - Removal					
Please state why you wish the condition(s) to be removed or chang	ed:				
THE PROPAL IS TO					
If you wish the existing condition to be changed, please state how you wish the condition to be varied:					

## 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. Date (DD/MM/YYYY): Signed - Applicant: 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 Date Notice Served Name of Owner / Agricultural Tenant Address

Or signed - Agent:

Signed - Applicant:

Date (DD/MM/YYYY):

8. Planning Application Requirements - Checklist Please read the following checklist to make sure you have sent all t information required will result in your application being deemed i the Local Planning Authority (LPA) has been submitted.	invalid. It will not be considered valid until all information required by
The original and 3 copies* of a completed and dated application form:	The original and 3 copies* of the completed, dated Ownership Certificate (A, B, C or D – as applicable) and Article 14 Certificate (Agricultural Holdings):
The original and 3 copies* of other plans and drawings or information necessary to describe the subject of the application:	1
The correct fee:	
*National legislation specifies that the applicant must provide the total of four copies), unless the application is submitted electronic LPAs may also accept supporting documents in electronic format l You can check your LPA's website for information or contact their	original plus three copies of the form and supporting documents (a ally or, the LPA indicate that a smaller number of copies is required. by post (for example, on a CD, DVD or USB memory stick). planning department to discuss these options.
9. Declaration  I/we hereby apply for planning permission/consent as described in information. I/we confirm that, to the best of my/our knowledge, a genuine opinions of the person(s) giving them.  Signed - Applicant:  Or signed - Agent	in y facts stated are true and document and a second are true are true and a second are
and the state of Patalla	11. Agent Contact Details
10. Applicant Contact Details	
Telephone numbers  Extension	Telephone numbers  Extension
Country code: National number: number:	Country code: National number: number:
	Country code: Mobile number (optional):
Country code: Mobile number (optional):	Country code. Wobile Harrison (optional).
Country code: Fax number (optional):	Country code: Fax number (optional):
Tarnamos (sprioria).	
Email address (optional):	Email address (optional):
12. Site Visit	
Can the site be seen from a public road, public footpath, bridlews	ay 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,	Other (if different from the
If Other has been selected, please provide:	Telephone number:
Contact name:  PANO RIBBATOKE	
Arres Greening	

Email address: