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 help locate the site - for example "field to the Nor	n of site location must be completed. Please provide the most accurate site description you can, to rth of the Post Office".		
Number	4		
Suffix			
Property Name			
Address Line 1			
St James Avenue			
Address Line 2			
Address Line 3			
Town/city			
Ramsgate			
Postcode			
CT12 6DG			
Description of site to estimate and	he completed if postered is not because		
	be completed if postcode is not known:  Northing (y)		
Easting (x) 637016	166013		
33.3.3	100010		

Redevelopment of residential site within residential area		
Applicant Details		
Name/Company		
Title		
Mr		
First name		
S		
Surname		
HOLLEY		
Company Name		
SJM NEW DEVELOPMENTS LTD		
Address		
Address line 1		
GLASERTON		
Address line 2		
PEAN COURT ROAD		
Address line 3		
Town/City		
WHITSTABLE		
County		
KENT		
Country		
Postcode		
CT5 3BA		
Are you an agent acting on behalf of the applicant?		
○ No		

Description

Contact Details	
Primary number	
Secondary number	
Fax number	_
Email address	
Agent Details	
Name/Company	
Title	7
Mr	
First name	_
IAN	
Surname	
BARBER	
Company Name	
IAN BARBER & ASSOCIATES LTD	
Address	
Address line 1	$\neg$
33a Joseph Wilson Industrial Estate	
Address line 2	_
Millstrood Road	
Address line 3	_
Town/City	
Whitstable	
County	
Country	_

Postcode
CT5 3PS
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
ERECTION OF 1No 3 BED DETACHED DWELLING AND 2No 2 BED SEMI-DETACHED DWELLINGS WITH ASSOCITED ACCESS AND PARKING
Reference number
F/TH/21/1560
Date of decision (date must be pre-application submission)
18/02/2022
Please state the condition number(s) to which this application relates
Condition number(s)
02 DRAWING NUMBERS
Has the development already started?
⊙ Yes
○ No
If Yes, please state when the development was started (date must be pre-application submission)
09/01/2023
Has the development been completed?
○ Yes ⊙ No
Condition(s) - Variation/Removal

If you wish the existing condition to be changed, please state how you wish the condition to be varied  REPLACE FIST FLOOR PLAN ON DRAWING 2651/PL/05 WITH FIRST FLOOR PLAN ON DRAWING 2551/03d  Site Visit  Can the site be seen from a public road, public footpath, bridleway or other public land?  Yes  No  No  If the planning authority needs to make an appointment to carry out a site visit, whom should they contact?  The applicant  Other preson  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  Is any of the land to which the application relates part of an Agricultural Holding?  Yes  No  Certificate Of Ownership - Certificate A  Lertify/The applicant certifies that on the day 21 days before the date of this application nobody except myselff the applicant relates is, or is part of, an agricultural bloding to which the application relates is, and that none of the land to which the application relates 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 tholding" has the meaning given by reference to the definition of "agricultural tenant" in section 65(8) of the Act.  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.	Please state why you wish the condition(s) to be removed or changed
Site Visit  Can the site be seen from a public road, public footpath, bridleway or other public land?  ② Yes  No  Pre-application Advice  Has assistance or prior advice been sought from the local authority about this application?  ③ Yes  ③ 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?  ④ Yes  ③ Yes  ③ Yes  ② Yes  ② Yes  ○ Yes  ○ Yes  ○ Yes  ○ No  Le critificate of Ownership - Certificate A  Lecrtify/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 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.  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	CHANGE OF REAR STUDY ROOM TO PLOTS 1 AND 2 INTO BEDROOM 3
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Person Role
○ The Applicant
Title
Mr
First Name
IAN
Surname
BARBER
Declaration Date
01/03/2024
✓ Declaration made
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
IAN BARBER
Date
04/03/2024