

Development Management

Eastleigh House, Upper Market Street, Eastleigh, SO50 9YN

Tel: 023 8068 8264 www.eastleigh.gov.uk

Office hours: Mon-Thurs 8.30am - 5pm, Friday 8.30am - 4.30pm



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

Suffix

Property Name

Address Line 1

Address Line 2

Address Line 3

Town/city

Postcode

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

Easting (x)

Northing (y)

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

Secondary number

Fax number

Email address

Agent Details

Name/Company

Title

Ms

First name

Laura

Surname

Grimason

Company Name

Gillings Planning

Address

Address line 1

2 Wessex Business Park

Address line 2

Colden Common

Address line 3

Town/City

Winchester

County

Country

Postcode

SO21 1WP

Contact Details

Primary number

***** REDACTED *****

Secondary number

***** REDACTED *****

Fax number

Email address

***** REDACTED *****

Description of the Proposal

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

Temporary change of use to House of Multiple Occupation (HMO) (sui generis) for up to 20 persons for a period of 6 months.

Reference number

F/22/92732

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

09/06/2022

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

To allow the approved HMO use to continue for a further 6-months.

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

Condition: The use hereby permitted shall be for a limited period expiring on 10th June 2023. On or before this date the permitted use shall cease and the building shall revert back to its former use.

Reason: To enable the Local Planning Authority to assess the impact of the proposed development.

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)

01/12/2022

Details of the pre-application advice received

Please see covering letter.

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

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**

* "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 relates but the land is, or is part of, an agricultural holding.

Person Role

- ☐ The Applicant
- ☒ The Agent

Title

Ms

First Name

Laura

Surname

Grimason

Declaration Date

06/12/2022

☒ Declaration made

Declaration

I / We hereby apply for Removal/Variation of a condition as described in this form and 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 options of the persons giving them. I / We also accept that: Once submitted, this information will be transmitted to the Local Planning Authority and, once validated by them, be made available 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

Laura Grimson

Date

06/12/2022