

For office use only
Application No.

Date received

Fee paid £ Receipt No:

Council Offices, Church Walk, Clitheroe, Lancashire. BB7 2RA Tel: 01200 425111 www.ribblevalley.gov.uk

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

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.

1. Applicant N	ame, Address and Contact Details	
Title: Mr & Mrs	First Name:	Surname: Davies
Company name:		
Street address:	Springfield, Old Back Lane	
		Telephone number:
		Mobile number:
Town/City:	Wiswell	Fax number:
Country:		Email address:
Postcode:	BB7 9BS	
	acting on behalf of the applicant?	● Yes ○ No
Title: Mr	First Name: PETER	Surname: HITCHEN
Company name:	Peter Hitchen Architects	
Street address:	Peter Hitchen Architects	
	Marathon House	Telephone number: 07850405126
	The Sidings Business Park	Mobile number:
Town/City:	Whalley	Fax number:
Country:	United Kingdom	Email address:
Postcode:	BB7 9SE	peter@peterhitchenarchitects.co.uk

3. Site Addres	ss De	tails						
Full postal addre	ss of th	ne site (includi	ng full postco	ode where availab	le)	Description:		
House:			Suffix:		7			
House name:	Sprin	gfield			Ī			
Street address:	Old B	ack Lane			1			
Town/City:	Wisw	 ell						
Postcode:	BB7 9				_ 			
1 0010000.								
Description of lo								
Easting:	3745		TRIOWITY.		7			
Northing:	4374				_ 			
Northing.	4074							
4. Pre-applica	tion	Advica						
4. Fre-applica	itiOii /	Auvice						
Has assistance of	or prior	advice been s	souaht from t	he local authority	about th	is application?		
	-		_	-			nelp i	the authority to deal with this application more efficiently):
Officer name:				, accuration advises y	04	g (.о.р	and danierty to document the approximent the constant,
Title: Mr		First name:	Stepher	<u> </u>			7 6	Surname: Kilmartin
				1				Surriane.
Reference:		Email corres						
Date (DD/MM/Y)		30/04/2018		be pre-application	submis	sion)		
Details of the pre				th as a section 73	applica	tion (Amending	the c	conditions attached to a permission including seeking
				Section 73 TCPA				
5. Description	n of th	ne Proposa	I					
			-	elopment as show rear including dou				
					bie gara			D . ()
Application refer			3/2017/0	application relate	.0.			Date of decision: 01/12/2017
Condition number		on number(s)	to which this	аррисацоп тегате	·S.			
2								
Has the develop	ment a	lready started	? Q Yes	No				
6. Condition(s) _ D							
o. Condition(5) - IN	Fillovai						
Please state why	/ you w	ish the condit	ion(s) to be r	emoved or change	ed:			
The applicant w	orks fr	om home and	since the de	cision notice the b	usiness	has grown to ar	n exte	tent that a separate office is required.
				lease state how y			be v	varied:
Please accept the	he ame	ended drawing	s which supe	ercede the approv	ed arran	gement		

7. Site	e Visit								
Can th	e site be se	en from a public r	oad, public footpath, b	ridleway 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)									
The agent									
B. Cei	rtificates	(Certificate A)							
				Certificate of Ownership - Cer					
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 (owner is a person with a									
freehol	d interest or le	easehold interest wit	th at least 7 years left to I	date of this application nobody extent) of any part of the land to whice any part of the land to whice any the meaning given by refer	h the application	on relates, and that	none of the	land to which the application	
Title:	Mr	First name:	Peter		Surname:	Hitchen			
Persor	n role:	AGEN	Т	Declaration date:	01/	05/2018] [Declaration made	
			,						
9. De	claration								
drawin	gs and addi	itional information.	. I/we confirm that, to t	cribed in this form and the acc he best of my/our knowledge, opinions of the person(s) givin	any facts stat		Date	01/05/2018	