



**RIBBLE VALLEY  
BOROUGH COUNCIL**

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 Name, Address and Contact Details**

Title:  First name:  Surname:

Company name:

Street address:

Town/City:

County:

Country:

Postcode:

Telephone number: 

Country Code	National Number	Extension Number
<input type="text"/>	<input type="text"/>	<input type="text"/>

Mobile number: 

Country Code	National Number	Extension Number
<input type="text"/>	<input type="text"/>	<input type="text"/>

Fax number: 

Country Code	National Number	Extension Number
<input type="text"/>	<input type="text"/>	<input type="text"/>

Email address:

Are you an agent acting on behalf of the applicant?  Yes  No

**2. Agent Name, Address and Contact Details**

Title:  First Name:  Surname:

Company name:

Street address:

Town/City:

County:

Country:

Postcode:

Telephone number: 

Country Code	National Number	Extension Number
<input type="text"/>	<input type="text" value="01706 218200"/>	<input type="text"/>

Mobile number: 

Country Code	National Number	Extension Number
<input type="text"/>	<input type="text"/>	<input type="text"/>

Fax number: 

Country Code	National Number	Extension Number
<input type="text"/>	<input type="text"/>	<input type="text"/>

Email address:

### 3. Site Address Details

Full postal address of the site (including full postcode where available)

Description:

House:	<input type="text"/>	Suffix:	<input type="text"/>
House name:	<input type="text" value="Wolfen Mill"/>		
Street address:	<input type="text" value="Chipping"/>		
Town/City:	<input type="text" value="Preston"/>		
County:	<input type="text"/>		
Postcode:	<input type="text" value="PR3 2GR"/>		

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

Easting:	<input type="text" value="361113"/>
Northing:	<input type="text" value="444198"/>

### 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):

Officer name:

Title:	<input type="text" value="Mr"/>	First name:	<input type="text" value="Gareth"/>	Surname:	<input type="text" value="Fort"/>
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Reference:

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

Details of the pre-application advice received:

Please see submitted letter from the LPA

### 5. Description of Proposal

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

CONVERSION OF EXISTING DWELLING AND COTTAGE TO NINE HOLIDAY LETS

Application reference number:	<input type="text" value="3/01/0781/P"/>	Date of decision:	<input type="text" value="03/12/2001"/>
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Please state the condition number(s) to which this application relates:

Condition number(s):

Has the development already started?	<input checked="" type="radio"/> Yes <input type="radio"/> No	If Yes, please state when the development was started:	<input type="text" value="04/12/2001"/>
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Has the development been completed?	<input checked="" type="radio"/> Yes <input type="radio"/> No	If Yes, please state when the development was completed:	<input type="text" value="04/01/2002"/>
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### 6. Condition(s) - Removal

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

Please see submitted Planning statement

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

Deletion of condition no 4

### 7. 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)

The agent  The applicant  Other person

## 8. Certificates (Certificate A)

### Certificate of Ownership - Certificate A

#### Town and Country Planning (Development Management Procedure) (England) Order 2010 Certificate under Article 12

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 freehold interest or leasehold interest with at least 7 years left to run) of any part of the land or building to which the application relates.

Title:  First name:  Surname:

Person role:  Declaration date:   Declaration made

## 8. Certificates (Agricultural Land Declaration)

### Agricultural Land Declaration

#### Town and Country Planning (Development Management Procedure) (England) Order 2010 Certificate under Article 12

Agricultural Land Declaration - You Must Complete Either A or B

(A) None of the land to which the application relates is, or is part of an agricultural holding.

(B) I have/The applicant has given the requisite notice to every person other than myself/the applicant who, on the day 21 days before the date of this application, was a tenant of an agricultural holding on all or part of the land to which this application relates, as listed below:

If any part of the land is an agricultural holding, of which the applicant is the sole tenant, the applicant should complete part (B) of the form by writing 'sole tenant - not applicable' in the first column of the table below

Title:  First Name:  Surname:

Person role:  Declaration date:   Declaration Made

## 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.

Date