



Planning and Regeneration

Civic Centre, Marlowes Hemel Hempstead, Herts, HP1 1HH

E-mail: planning@dacorum.gov.uk Telephone: 01442 867861
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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:

| | | |
|----------------------|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> |
|----------------------|----------------------|----------------------|

Fax 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="01923 293117"/> | <input type="text"/> |

Mobile number:

| | | |
|----------------------|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> |
|----------------------|----------------------|----------------------|

Fax 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)

| | | | |
|-----------------|--|---------|----------------------|
| House: | <input type="text"/> | Suffix: | <input type="text"/> |
| House name: | <input type="text" value="Adeyfield Free Church"/> | | |
| Street address: | <input type="text" value="Leverstock Green Road"/> | | |
| | <input type="text"/> | | |
| Town/City: | <input type="text" value="Hemel Hempstead"/> | | |
| County: | <input type="text" value="Hertfordshire"/> | | |
| Postcode: | <input type="text" value="HP2 4HL"/> | | |

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

| | |
|-----------|-------------------------------------|
| Easting: | <input type="text" value="507760"/> |
| Northing: | <input type="text" value="207101"/> |

Description:

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="Paul"/> | Surname: | <input type="text" value="Newton"/> |
|--------|---------------------------------|-------------|-----------------------------------|----------|-------------------------------------|

Reference:

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

Details of the pre-application advice received:

5. Description of Proposal

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

| | | | |
|-------------------------------|---|-------------------|---|
| Application reference number: | <input type="text" value="4/00518/13/MFA"/> | Date of decision: | <input type="text" value="11/04/2013"/> |
|-------------------------------|---|-------------------|---|

Please state the condition number(s) to which this application relates:

Condition number(s):

Has the development already started? ☐ Yes ☒ No

6. Condition(s) - Removal

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

Condition 12 this is only relevant if the investigation under condition 11 reveals contamination and would be unnecessarily restrictive
Condition 13 prevents the implementation of the planning permission to keep the permission alive - it requires significant upfront work and cost- in advance of capital receipts by the church- we would like to agree another trigger rather than prior to commencement of development"/>

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

Condition 12 we would like re worded to state- 'in the event that contamination is found during the investigations under condition 11 or at any time during the development there shall be put in place a monitoring and maintenance scheme to include monitoring the long-term effectiveness of the proposed remediation over a period of 5 years. This shall be submit to and approved in writing by the local authority prior to first occupation of any or the properties on the site.....etc
Condition 13 we would like the timing to be altered to state no demolition shall take place until a written scheme of investigation has been submitted to and approved by the local planning authority in writing..... etc"/>

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 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 freehold interest or leasehold interest with at least 7 years left to run*) of any part of the land to which the application relates, and that none of the land to which the application relates is, or is part of, an agricultural holding (*“agricultural holding” has the meaning given by reference to the definition of “agricultural tenant” in section 65(8) of the Act*).

| | | | | | |
|--------------|------------------------------------|-------------------|---|-------------------------------------|-------------------------------------|
| Title: | <input type="text" value="Mr"/> | First name: | <input type="text" value="Jonathan"/> | Surname: | <input type="text" value="Tucker"/> |
| Person role: | <input type="text" value="Agent"/> | Declaration date: | <input type="text" value="29/01/2016"/> | <input checked="" type="checkbox"/> | 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.

| | | |
|-------------------------------------|------|---|
| <input checked="" type="checkbox"/> | Date | <input type="text" value="29/01/2016"/> |
|-------------------------------------|------|---|