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

## 'rivacy Notice

his form is provided by Planning Portal and based on the requirements provided by Government for the sole purpose of submitting information to the Local Planning Authority in accordance with the legislation detailed on this form.

lease be aware that once you have downloaded this form, Planning Portal will have no access to the form or the data you enter into it. It is ubsequent use of this form is solely at your discretion, including the choice to complete and submit it to the Local Planning Authority in greement with the declaration section.

Ipon receipt of this form and any supporting information, it is the responsibility of the Local Planning Authority to inform you of its bligations in regards to the processing of your application. Please refer to its website for further information on any legal, regulatory and ommercial requirements relating to information security and data protection of the information you have provided.

## .ocal Planning Authority details:



## **South Tyneside Council**

## Planning Group

South Tyneside Council, Town Hall & Civic Offices, Westoe Road, South Shields, Tyne and Wear, NE33 2RL Email: planningapplications@southtyneside.gov.uk Tel: 0191 424 7421

'ublication of applications on planning authority websites

nformation provided on this form and in supporting documents may be published on the authority's planning register and vebsite.

lease ensure that the information you submit is accurate and correct and does not include personal or sensitive information. If you require ny further clarification, please contact the Local Planning Authority directly.

printed, please complete using block capitals and black ink.

is important that you read the accompanying guidance notes and help text as incorrect completion will delay the processing of your pplication.

1. Applic	cant Name and Address	2. Agent Name and Address
Title:	MR First name: STEPHEN	Title: First name:
Last name:	TATE	Last name:
Company (optional):		Company (optional):
Unit:	House number: 15 House suffix:	Unit: House House suffix:
House name:		House name:
Address 1:	CENTRAL AVENUE	Address 1:
Address 2:	WHITBURN	Address 2:
Address 3:		Address 3:
own:	7 T	Town:
county:	SOUTH TYNESIDE	County:
SST CODE	5R6 7LB	

Unit:	House number: 15 House suffix:	auth	nority about this application?				
House name:		If Ye.	s, please complete the following information about the adv were given. (This will help the authority to deal with this				
Address 1:	CENTRAL AVENUE	appl	ication more efficiently).				
Address 2:	WHITBURN	knov	Please tick if the full contact details are not known, and then complete as much as possible:				
Address 3:		Offic	cer name:				
Town:							
County:	SOUTH TYNESIDE	Refe	rence:				
Postcode (optional):	SRG7LB	7111-	ST / 6617 / 20 / H FUL Date (DD/MM/YYYY):				
Description of location or a grid reference. (must be completed if postcode is not known):			(must be pre-application submission)				
Easting:		Deta	ils of pre-application advice received?				
Description:	Northing:	411					
2 deditipation.		7111					
		1111					
5. Descript	ion Of Your Proposal						
			decision letter, including the application reference number				
DORM	GR LOPT CONVERSION PROVIDING	AOPITE	ONAL BEDFOOM AND EN-SUITE.				
40 S	H) WIHRICH GOUNDTRO MODANTH CITY	E 137 FL	OR DEVELOPMENT, (FIRST FLOOR GATENSION)				
VA VA	RIATION OF CONDITION 2 PORPP	STIO	617/20/11/20 1/20 - 1/20 - 1/20				
			WINDOW				
Reference num	Bute of decision		YYY): 27-07-2021 (date must be pre-application submission)				
	e condition number(s) to which this application rela	tes:					
1.	^	6.					
	hove Plans,	7.					
3.		8.					
4.		9.					
5.	lx	10.					
Has the develop	oment already started?	·	Yes No				
If Yes, please sta	ate when the development started (DD/MM/YYYY):	(	01/03/2023 (date must be pre-application submission)				
Has the develop	oment been completed?	1,000	Yes No				
If Yes, please sta	ate when the development was completed (DD/MM	/YYYY): [					
5. Condition	(s) - Removal						
	you wish the condition(s) to be removed or change	ed:					
THE AD	MINAL WILDOW WAS CHIEFED IN	110.0	FROM THE ORIGINAL APPLICATION				
AND	E KEQUESTING TO ADD THE WINDOW TO PLANNING PERMISSIONS,	TAEA	PPCILATION TO COMPAY WITH PROCESS				

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

nformation required will result in your application in the Local Planning Authority (LPA) has been sub-	on being deemed ir mitted.	nvalid. It will not be considere	d valid until all inform	ation required b
The original and 3 copies* of a completed and dated application form:		The original and 3 copie Ownership Certificate (A	B (, or l) – as applica	hle)
The original and 3 copies* of other plans and dra nformation necessary to describe the subject of	wings or the application:	and Article 14 Certificate	(Agricultural Holding	s):
The correct fee:				
'National legislation specifies that the applicant rotal of four copies), unless the application is sub- PAs may also accept supporting documents in e You can check your LPA's website for information	electronic format by	y or, the LPA indicate that a sr	naller number of copie	
	nt as described in th our knowledge, any Or signed - Agent:	nis form and the accompanyin facts stated are true and accu	ng plans/drawings and trate and any opinions Date (DD/MM/YYYY)	s given are the
10. Applicant Contact Details		11. Agent Contact De	tails	
Country code:  Mobile number (optional):  Country code: Fax number (optional):  Email address (optional):	Extension number:		umber: mber (optional): er (optional):	Extension number:
12. Site Visit  Can the site be seen from a public road, public foot of the planning authority needs to make an appoint out a site visit, whom should they contact? (Please's fother has been selected, please provide:  Contact name:  Geoff Cutherford (Builder)	ment to carry select only one)	other public land? Yes Agent Applic Telephone number:	ant   / Other (if u	ifferent from the licant's details)
Email address:		8 F		
ii.	1 5			"

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 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, s part of, an agricultural holding\*\*

VOTE: 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.

\* "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.

Signed - Applicant: Or signed - Agent: Date (DD/MM/YYYY 31-5-2023 CERTIFICATE OF OWNERSHIP - CERTIFICATE B Town and Country Planning (Development Management Procedure) (England) Order 2015 Certificate under Article 14

I certify/ The applicant certifies that I have/the applicant has given the requisite notice to everyone else (as listed below) who, on the days before the date of this application, was the owner\* and/or agricultural tenant\*\* of any part of the land or building to which the owner" is a person with a freehold interest or leasehold interest with at least 7 years left to run. \*\* "agricultural tenant" has the meaning given in section 65(8) of the Town and Country Planning Act 1990 Name of Owner / Agricultural Tenant Address **Date Notice Served** Signed - Applicant: Or signed - Agent: Date (DD/MM/YYYY):