

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:	<input type="text" value="Mr &amp; Mrs"/>	First name:	<input type="text" value="William"/>	Surname:	<input type="text" value="Colquhoun"/>		
Company name:	<input type="text"/>						
Street address:	<input type="text" value="Handywater House,"/> <input type="text" value="Pound Lane"/>			Telephone number:	<input type="text"/>	<input type="text"/>	<input type="text"/>
Town/City:	<input type="text" value="Sibford Gower"/>			Mobile number:	<input type="text"/>	<input type="text"/>	<input type="text"/>
County:	<input type="text" value="Oxfordshire"/>			Fax number:	<input type="text"/>	<input type="text"/>	<input type="text"/>
Country:	<input type="text" value="United Kingdom"/>			Email address:	<input type="text"/>		
Postcode:	<input type="text" value="OX15 5AE"/>						
Are you an agent acting on behalf of the applicant?				<input checked="" type="radio"/> Yes <input type="radio"/> No			

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

Title:	<input type="text" value="Mr"/>	First Name:	<input type="text" value="Tim"/>	Surname:	<input type="text" value="Colquhoun"/>		
Company name:	<input type="text" value="Tim Colquhoun Architects Ltd"/>						
Street address:	<input type="text" value="Slaley Wood"/> <input type="text" value="Little Loveston"/> <input type="text" value="Cresselly"/>			Telephone number:	<input type="text"/>	<input type="text" value="01834 891555"/>	<input type="text"/>
Town/City:	<input type="text" value="Kilgetty"/>			Mobile number:	<input type="text"/>	<input type="text"/>	<input type="text"/>
County:	<input type="text" value="Pembrokeshire"/>			Fax number:	<input type="text"/>	<input type="text"/>	<input type="text"/>
Country:	<input type="text" value="United Kingdom"/>			Email address:	<input type="text" value="timcolquhoun@btinternet.com"/>		
Postcode:	<input type="text" value="SA68 0NR"/>						

### 3. Site Address Details

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

House:  Suffix:

House name:

Street address:

Town/City:

County:

Postcode:

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

Easting:

Northing:

Description:

### 4. Pre-application Advice

Has assistance or prior advice been sought from the local authority about this application?  Yes  No

### 5. Description of Proposal

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

Application reference number:  Date of decision:

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:

Mrs Colquhoun has a progressive form of Parkinson's disease with accompanying dementia. The prognosis is that she will continue to deteriorate over the coming 5 to 10 years and will soon require round the clock care. Confidential medical notes will be sent under separate cover. She has expressed a wish to stay at home during the progression of her disease, and this will require a carer to be living on site as her husband is 82 and unable to look after her on his own. Additional accommodation is required for a carer as there is already great pressure upon the existing house with children / grandchildren staying regularly and a limited number of bedrooms.

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

### 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:  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

