If you would rather make this application online, you can do so on our website:
https://www.planningportal.co.uk/apply

PLANNING PORTAL

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 formation to the Local Planning Authority in accordance with the legislation detailed on this form.

ease 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. Any 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.

pon 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:

Development Management, Economic Development and Planning,
County Hall, Bythesea Road, Trowbridge, BA14 8JN
Tel: 0300 456 0114 Email: developmentmanagement@wiltshire.gov.uk

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 ebsite.

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. Applicant Name and Address

Title:	MR
First name:	MARK
Last name:	TYLOR
Company (optional):	
Unit:	
House number:	39
House suffix:	
House name:	
Address 1:	WESTBOURNE CLOSE
Address 2:	LAVERSTOCK
Address 3:	
Town:	SALISBURY
County:	WILTSHIRE
Country:	U.K
Postcode:	SP1 2RU

2. Agent Name and Address

Title:	
First name:	
Last name:	
Company (optional):	
Unit:	
House number:	
House suffix:	
House name:	
Address 1:	
Address 2:	
Address 3:	
Town:	
County:	
Country:	
Postcode:	

3. Site Address Details

Please provide the full postal address of the application site.

Unit: | House number: 39 | House suffix:

House name:

Address 1: WESTBOURNE CLOSE

Address 2: LAVERSTOCK

Address 3:

Town: SALISBURY

County: WILTSHIRE

Postcode (optional): SP1 2RU

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

Easting: 415393 Northing: 130047

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).

Please tick if the full contact details are not known, and then complete as much as possible: ☐

Officer name:

Reference:

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

Details of pre-application advice received?

5. Description Of Your Proposal

Please provide a description of the approved development as shown on the decision letter, including the application reference number and date of decision in the sections below:

ERECT A GARAGE/WORKSHOP

Reference number: PL/2021/10685 Date of decision (DD/MM/YYYY): 12/09/2022 (date must be pre-application submission)

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

1.	CONDITION 2	6.	
2.		7.	
3.		8.	
4.		9.	
5.		10.	

Has the development already started? ☑ Yes ☐ No

If Yes, please state when the development started (DD/MM/YYYY): 09/04/2023 (date must be pre-application submission)

Has the development been completed? ☑ Yes ☐ No

If Yes, please state when the development was completed (DD/MM/YYYY): 14/07/2023 (date must be pre-application submission)

6. Condition(s) - Removal

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

THE PITCH OF THE ROOF IS STEEPER THAN IN THE ORIGINAL PLAN TO ENABLE ME TO USE ROOF TILES SIMILARLY MATCHED TO THE ROOF OF THE HOUSE

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

THE PITCH OF THE ROOF TO BE INCREASED AND SUBSEQUENTLY THE HEIGHT OF THE ROOF TO INCREASE BY 1 METRE

9. Planning Application Requirements - Checklist

Please read the following checklist to make sure you have sent all the information in support of your proposal. Failure to submit all information required will result in your application being deemed invalid. It will not be considered valid until all information required by the Local Planning Authority (LPA) has been submitted.

The original and 3 copies* of a completed and dated application form: ☐

The original and 3 copies* of other plans and drawings or information necessary to describe the subject of the application: ☐

The correct fee: ☐

The original and 3 copies* of the completed, dated Ownership Certificate (A, B, C or D – as applicable) and Article 14 Certificate (Agricultural Holdings): ☐

National legislation specifies that the applicant must provide the original plus three copies of the form and supporting documents (a total of four copies), unless the application is submitted electronically or, the LPA indicate that a smaller number of copies is required. LPAs may also accept supporting documents in electronic format by post (for example, on a CD, DVD or USB memory stick). You can check your LPA's website for information or contact their planning department to discuss these options.

10. 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.

Signed - Applicant:

Or signed - Agent:

Date (DD/MM/YYYY): 18/07/2023 (date cannot be pre-application)

10. Applicant Contact Details

Telephone numbers

Country code: | National number: | Extension number:

Country code: | Mobile number (optional):

Country code: | Fax number (optional):

Email address (optional):

11. Agent Contact Details

Telephone numbers

Country code: | National number: | Extension number:

Country code: | Mobile number (optional):

Country code: | Fax number (optional):

Email address (optional):

12. 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)* ☐ Agent ☑ Applicant ☐ Other (if different from the agent/applicant's details)

If Other has been selected, please provide:

Contact name:

Telephone number:

Email address: