

Application for Removal or Variation of a Condition following Grant of Planning Permission or  
 Listed Building Consent

Town and Country Planning Act 1990 (as amended); Planning (Listed Buildings and Conservation  
 Areas Act) 1990 (as amended)

**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.

## Site Location

**Disclaimer:** We can only make recommendations based on the answers given in the questions.

If you cannot provide a postcode, the description of site location must be completed. Please provide the most accurate site description you can, to help locate the site - for example "field to the North of the Post Office".

Number

Suffix

Property Name

Address Line 1

Address Line 2

Address Line 3

Town/city

Postcode

Description of site location must be completed if postcode is not known:

Easting (x)

Northing (y)

Description

## Applicant Details

### Name/Company

Title

First name

Surname

Company Name

### Address

Address line 1

Address line 2

Address line 3

Town/City

Country

Postcode

Are you an agent acting on behalf of the applicant?

Yes

No

### Contact Details

Primary number

Secondary number

\*\*\*\*\* REDACTED \*\*\*\*\*

Fax number

Email address

\*\*\*\*\* REDACTED \*\*\*\*\*

## Agent Details

Name/Company

Title

First name

Matthew

Surname

Anderson

Company Name

Anderson Architecture

## Address

Address line 1

Foxlea

Address line 2

Giddynap Lane

Address line 3

Amberley

Town/City

Stroud

Country

Postcode

GL5 5BA

## Contact Details

Primary number

\*\*\*\*\* REDACTED \*\*\*\*\*

Secondary number

Fax number

Email address

## Description of the Proposal

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

Reference number

Date of decision (date must be pre-application submission)

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

Condition number(s)

Has the development already started?

Yes

No

If Yes, please state when the development was started (date must be pre-application submission)

Has the development been completed?

Yes

No

If Yes, please state when the development was completed (date must be pre-application submission)

## Condition(s) - Variation/Removal

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

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

The revised location of the ductwork to be approved.

## 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?

- The agent  
 The applicant  
 Other person

## Pre-application Advice

Has assistance or prior advice been sought from the local authority about this application?

- Yes  
 No

## Ownership Certificates and Agricultural Land Declaration

### Certificates under Article 14 - Town and Country Planning (Development Management Procedure) (England) Order 2015 (as amended)

Please answer the following questions to determine which Certificate of Ownership you need to complete: A, B, C or D.

Is the applicant the sole owner of all the land to which this application relates; and has the applicant been the sole owner for more than 21 days?

- Yes  
 No

Is any of the land to which the application relates part of an Agricultural Holding?

- Yes  
 No

### Certificate Of Ownership - Certificate A

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, 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.

**NOTE:** 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.

Person Role

- The Applicant  
 The Agent

Title

First Name

Surname

Declaration Date

Declaration made

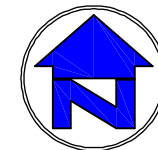
## Declaration

I / We hereby apply for Removal/Variation of a condition as described in this form and 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 persons giving them. I / We also accept that: Once submitted, this information will be transmitted to the Local Planning Authority and, once validated by them, be made available as part of a public register and on the authority's website; our system will automatically generate and send you emails in regard to the submission of this application.

I / We agree to the outlined declaration

Signed

Date



**AS SUBMITTED FOR  
PLANNING PERMISSION**

Gloucestershire Health and Care   
NHS Foundation Trust



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ARCHITECTURE

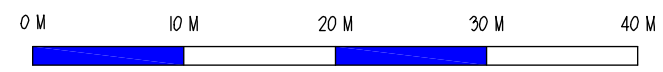
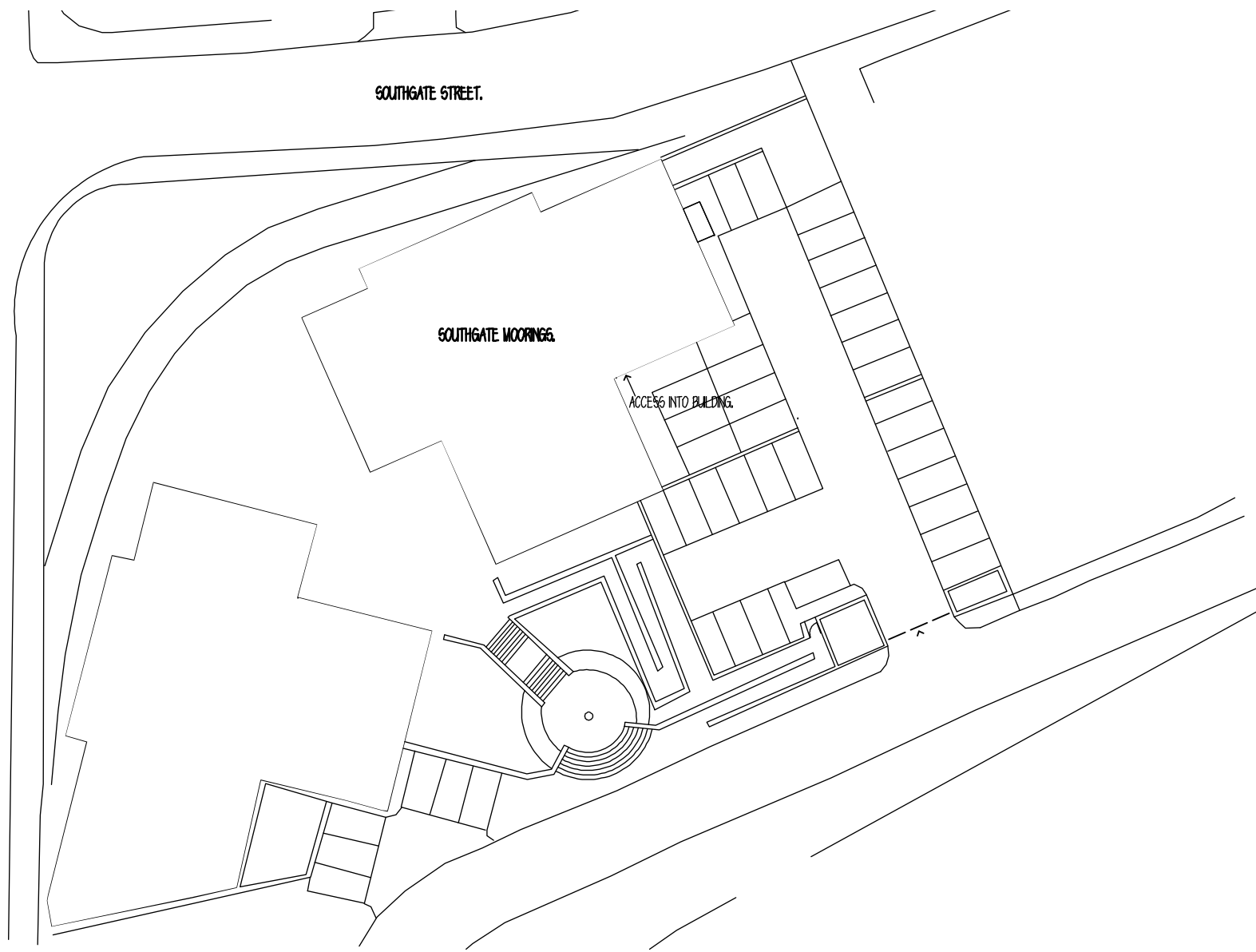
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Nailsworth, Stroud, Gloucestershire GL6 0RW  
  
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*client*  
GLOUCESTERSHIRE HEALTH AND CARE  
NHS FOUNDATION TRUST

*project*  
INTERNAL ALTERATIONS TO GROUND FLOOR  
OF SOUTHGATE MOORINGS,  
SOUTHGATE STREET, GLOUCESTER.

*description*  
EXISTING BLOCK PLAN

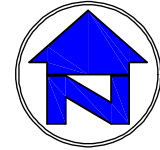
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SCALE BAR 1:500

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rev	details of revision	by	ch'd	date
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Gloucestershire Health and Care   
NHS Foundation Trust



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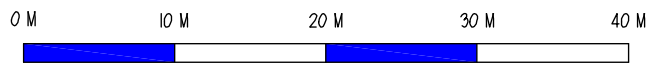
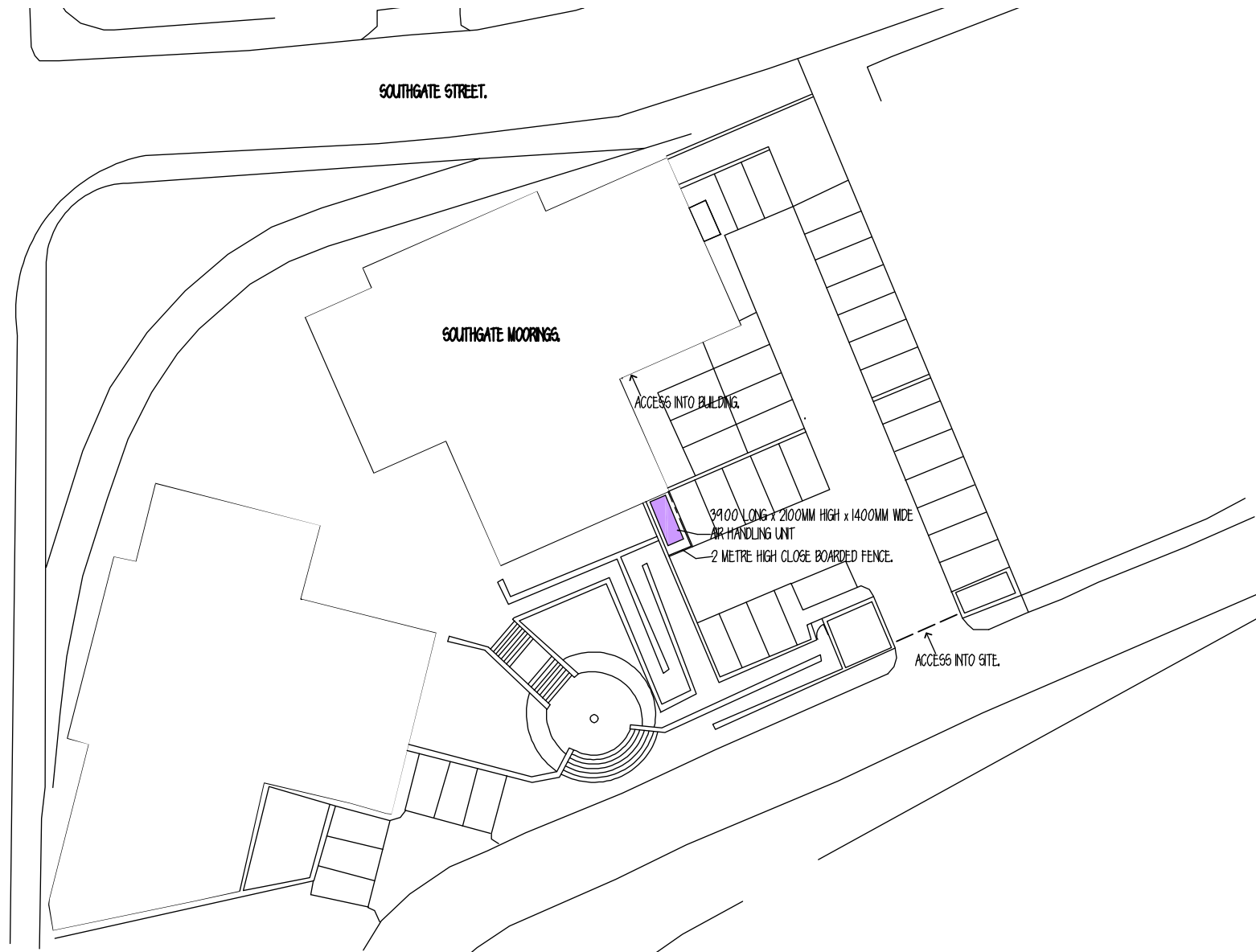
**client**  
GLOUCESTERSHIRE HEALTH AND CARE  
NHS FOUNDATION TRUST

**project**  
INTERNAL ALTERATIONS TO GROUND FLOOR  
OF SOUTHGATE MOORINGS,  
SOUTHGATE STREET, GLOUCESTER.

**description**  
BLOCK PLAN

<b>scale</b> 1:1250	<b>date</b> MAY 2021
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<b>drawn</b> IR	<b>checked</b> IR	<b>drawing no</b> 1812-41	<b>drg.size</b> A 4
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SCALE BAR 1: 500

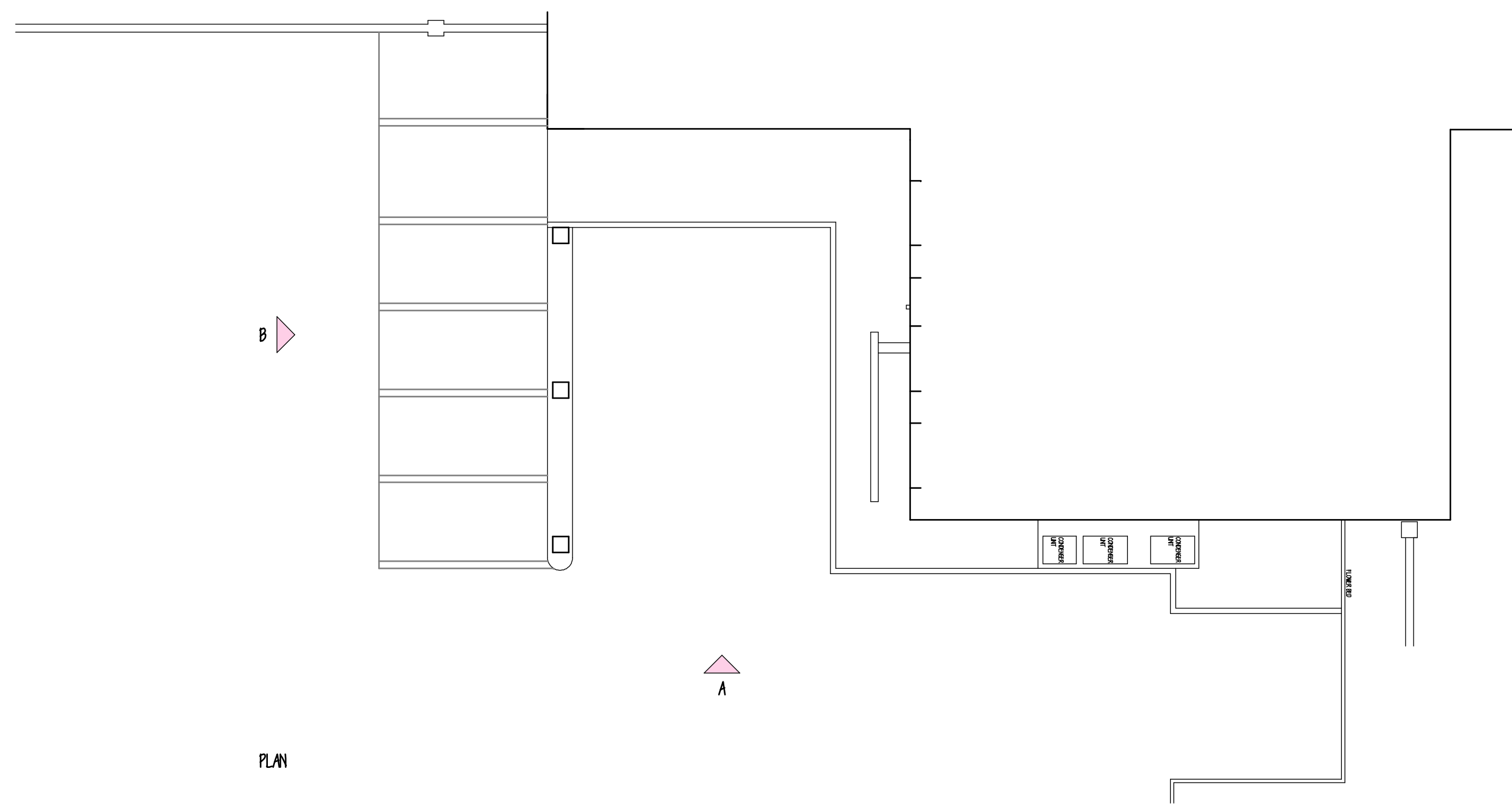




ELEVATION A



ELEVATION B



PLAN

SCALE BAR 1:100  
1M 2M 3M 4M 5M

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Gloucestershire Health and Care **NHS**  
NHS Foundation Trust

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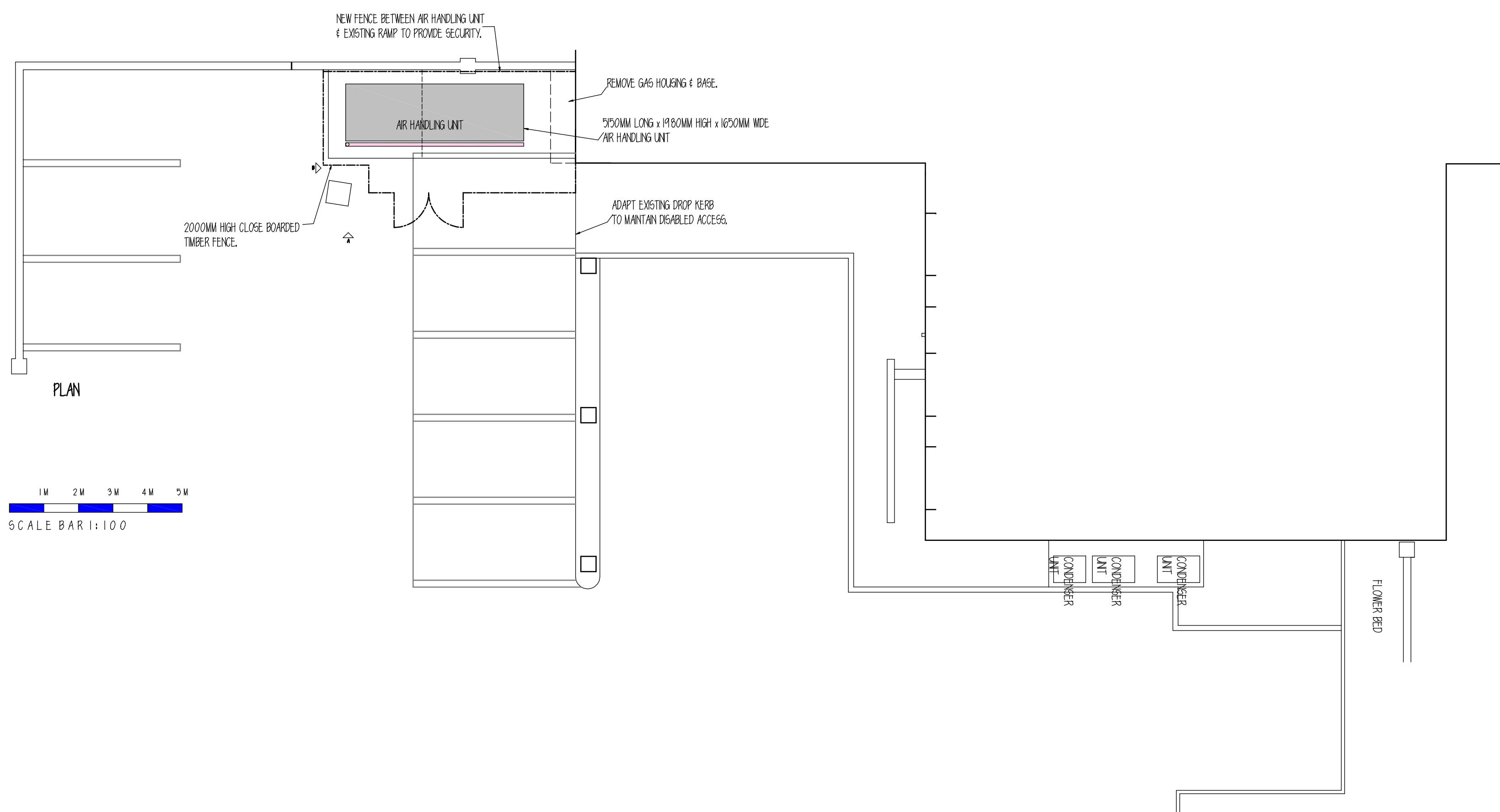
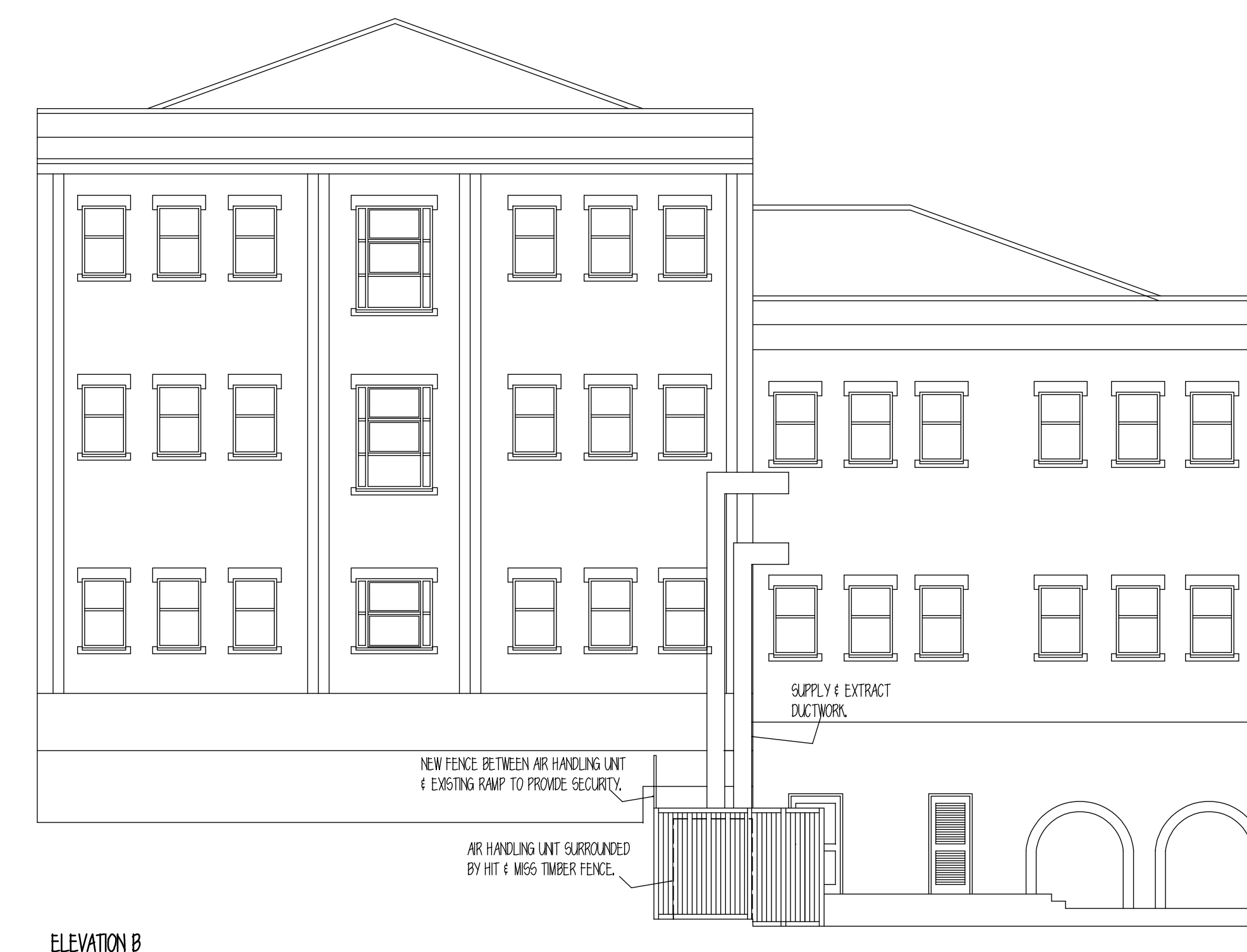
Winarth House, Lower Newmarket Road, Newmarket,  
Nailsworth, Stroud, Gloucestershire GL6 0RW

client  
GLOUCESTERSHIRE HEALTH & CARE  
NHS FOUNDATION TRUST

project  
REFURBISHMENT OF DENTAL SUITE,  
SOUTHGATE MOORINGS.

description  
SITE PLAN & EXISTING ELEVATIONS

scale	date	drawn	checked	drawing no	drg.site
1-100	MAY 2021	IR	IR	1012 / 40	A1



**AS SUBMITTED  
FOR  
PLANNING PERMISSION.**

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client GLOUCESTERSHIRE HEALTH & CARE NHS FOUNDATION TRUST	
project REFURBISHMENT OF DENTAL SUITE, SOUTHGATE MOORINGS.	
description FENCING TO AIR HANDLING UNIT	
scale 1:100	date APRIL 2022
drawn IR	checked IR
drawing no 1812 / 47	drg.size A1