HILLINGDON
LONDON
London Borough of Hillingdon, Residents Services, 3N Civic Centre, High Street, Uxbridge, Middlesex UB8 1UW
Tel: 01895 250230 Web: www.hillingdon.gov.uk

# 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

**You can complete and submit this form electronically via the Planning Portal by visiting www.planningportal.gov.uk/apply**

### 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.**

Please complete using block capitals and black ink.
It is important that you read the accompanying guidance notes as incorrect completion will delay the processing of your application.

### 1. Applicant Name and Address

| | | | | | |
|---|---|---|---|---|---|
| Title: | MR | First name: | MANJEET | | |
| Last name: | SINGH | | | | |
| Company (optional): | B & K REALTY LTD | | | | |
| Unit: | | House number: | | House suffix: | |
| House name: | UNIT 8 HAYES TRADE CITY | | | | |
| Address 1: | HAYES ROAD | | | | |
| Address 2: | | | | | |
| Address 3: | | | | | |
| Town: | | | | | |
| County: | | | | | |
| Country: | | | | | |
| Postcode: | UB2 5BE | | | | |

### 2. Agent Name and Address

| | | | | | |
|---|---|---|---|---|---|
| Title: | MRS | First name: | MARIA | | |
| Last name: | TSANGADA | | | | |
| Company (optional): | ARCHER ARCHITECTS LTD | | | | |
| Unit: | | House number: | | House suffix: | |
| House name: | | | | | |
| Address 1: | ~~GF~~ SUITE B4 | | | | |
| Address 2: | MINDENHALL COURT | | | | |
| Address 3: | HIGH STREET | | | | |
| Town: | STEVENAGE | | | | |
| County: | | | | | |
| Country: | | | | | |
| Postcode: | SG1 3UN | | | | |

## 3. Site Address Details

Please provide the full postal address of the application site.

Unit: | House number: 91 & 93 | House suffix:

House name:

Address 1: FALLING LANE

Address 2:

Address 3:

Town: WEST DRAYTON.

County:

Postcode (optional): UB7 8AD.

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

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:

ERECTION OF A THREE STOREY BUILDING WITH HABITABLE ROOFSPACE TO CONTAIN 8.x SELF CONTAINED FLATS WITH ASSOCIATED PARKING AND LANDSCAPING, INVOLVING DEMOLITION OF THE EXISTING DWELLING HOUSES.

Reference number: 59314/APP/2016/2898 Date of decision (DD/MM/YYYY): 23/12/2016 (date must be pre-application submission)

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

| | | | |
|---|---|---|---|
| 1. | (2) IN ACCORDANCE TO APPROVED PLANS | 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): (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): (date must be pre-application submission)

## 6. Condition(s) - Removal

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

FURTHER TO TECHNICAL DESIGN. ~~THE~~ AND FURTHER DEVELOPMENT OF THE APPROVED SCHEME THE ROOF NEEDS TO BE SUPPORTED ON THE

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

IN ACCORDANCE TO THE NEW SUBMITTED PLANS