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

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

Privacy Notice

This 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.

Please 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 subsequent use of this form is solely at your discretion, including the choice to complete and submit it to the Local Planning Authority in agreement with the declaration section.

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

Local Planning Authority details:

SOUTH HOLLAND DISTRICT COUNCIL

Publication of applications on planning authority websites

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

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

If printed, please complete using block capitals and black ink.

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

1. Applicant Name and Address

Title:	MS	First name:	SHRADHA		
Last name:	MISHRA				
Company (optional):	UNIVERSITY OF LINCOLN				
Unit:		House number:		House suffix:	
House name:					
Address 1:	CAMPUS WAY				
Address 2:					
Address 3:					
Town:	LINCOLN				
County:	LINCOLNSHIRE				
Country:	UNITED KINGDOM				
Postcode:	LN6 7TS				

2. Agent Name and Address

Title:	MR	First name:	IAN		
Last name:	PHILLIPS				
Company (optional):	WILLMOTT DIXON				
Unit:		House number:		House suffix:	
House name:	GROUND FLOOR, LOCK HOUSE				
Address 1:	CASTLE MEADOW ROAD				
Address 2:					
Address 3:					
Town:	NOTTINGHAM				
County:	NOTTINGHAMSHIRE				
Country:	UNITED KINDOM				
Postcode:	NG2 1AG				

3. Site Address Details

Please provide the full postal address of the application site.

Unit:	
House number:	
House suffix:	
House name:	CENTRE OF EXCELLENCE
Address 1:	LAND OFF A151
Address 2:	FOOD ENTERPRISE ZONE
Address 3:	
Town:	HOLBEACH
County:	LINCOLNSHIRE
Postcode (optional):	PE12 7BF

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? [X] 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: [X]

Officer name: DAVID GEDNEY

Reference: NONE GIVEN

Date (DD/MM/YYYY): 15/01/2021
(must be pre-application submission)

Details of pre-application advice received?

TELEPHONE CONVERSATION HELD, CONFIRMING THE REQUIREMENT TO SUBMIT A "MODIFICATION" APPLICATION TO THE CURRENT PLANNING PERMISSION FOR ROOF MOUNTED FLUE'S AND MINOR AMMENDMENTS TO LANDSCAPE LAYOUT.

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:

PROPOSED CENTRE OF EXCELLENCE IN AGRI-FOOD WITH ASSOCIATED ROADS, CAR PARKING AND LANDSCAPING – OUTLINE H09-0771-16

Reference number: H09-0230-18 Date of decision (DD/MM/YYYY): 13/04/2018 (date must be pre-application submission)

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

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

Has the development already started? [X] Yes [ ] No

If Yes, please state when the development started (DD/MM/YYYY): 20/01/2020 (date must be pre-application submission)

Has the development been completed? [ ] Yes [X] 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:

CONDITION CHANGE – AMMENDMENT TO ROOFTOP MOUNTED EXTRACT FLUES FOR FUME CUPBOARDS, FOLLOWING FUME DISPERSAL STUDY RESULTS.

CONDITION CHANGE – MINOR AMMENDMENTS TO LANDSCAPE LAYOUT

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

ELEVATIONS SHOWING ROOF MOUNTED FLUES, DETAILS SHOWN ON DRW M00439-PEV-V1-ZZ-DR-A-3100_C06_ELES-EXT-PROPOSED ELEVATIONS

LANDSCAPE PLAN SHOWING MINOR AMMENDMENTS. DETAILS SHOWN ON DRW M00439-ALA-00-XX-DR-L-0003 C07

7. Ownership Certificates and Agricultural Land Declaration

One Certificate A, B, C, or D, must be completed with this application form

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, or is part of, an agricultural holding**

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.

** "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):
	IAN PHILLIPS [redacted]	15/01/2021

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 day 21 days before the date of this application, was the owner* and/or agricultural tenant** of any part of the land or building to which this application relates.

** "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):

8. 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: [X]

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

The correct fee: [X]

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

*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.

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.

Signed - Applicant:	Or signed - Agent:	Date (DD/MM/YYYY):	
	IAN PHILLIPS [redacted]	15/01/2021	(date cannot be pre-application)

10. Applicant Contact Details

Telephone numbers

Country code:	National number:	Extension number:
01522	837033	

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):
	07971513603

Country code:	Fax number (optional):

Email address (optional): IAN.PHILLIPS@WILLMOTTDIXON.CO.UK

12. Site Visit

Can the site be seen from a public road, public footpath, bridleway or other public land? [X] 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)* [X] Agent [ ] Applicant [ ] Other (if different from the agent/applicant's details)

If Other has been selected, please provide:

Contact name:	Telephone number:
IAN PHILLIPS 01522 837033	07971513603

Email address: IAN.PHILLIPS@WILLMOTTDIXON.CO.UK