SOUTH HOLLAND DISTRICT COUNCIL

Application for a non-material amendment following a grant of planning permission.
Town and Country Planning 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:		First Name:		Surname:	UBS Triton Property Fund
Company name:	UBS Triton Property Fund				
Street address:	c/o SLR Outlets				
			Telephone number:		
			Mobile number:		
Town/City:			Fax number:		
Country:			Email address:		
Postcode:					

Are you an agent acting on behalf of the applicant? (•) Yes ( ) No

2. Agent Name, Address and Contact Details

Title:	Mrs	First Name:	Rachael	Surname:	Martin
Company name:	ID Planning				
Street address:	7th Floor				
	The Balance		Telephone number:		07860607892
	2 Pinfold Street		Mobile number:		
Town/City:	SHEFFIELD		Fax number:		
Country:			Email address:		
Postcode:	S1 2GU		rachael.martin@idplanning.co.uk		

3. Site Address Details

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

House: Suffix:

House name: Springfields Outlet Centre, Festival Gardens

Street address: Camel Gate

Town/City: Spalding

Postcode: PE12 6EU

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

Easting: 526465

Northing: 324067

Description:

4. Eligibility

Do you, or the person on whose behalf you are making this application, have an interest in the part of the land to which this amendment relates? (•) Yes ( ) No

If you are not the sole owner, has notification under article 10 of the Town and Country Planning (Development Management Procedure) (England) Order 2015 been given? (•) Yes ( ) No ( ) Not Applicable

Person notified	Address	Date of notification (DD/MM/YYYY)
D Horton - Springfields Horticultural Society	Number: Suffix: House name: Street: Festival Gardens Camel Gate Town: Spalding Postcode: PE12 6EU	08/06/2018

5. Description of Your Proposal

Description of Approved Development:

Proposed Family Entertainment Centre, including change of use of Playbarn from Class D1 (leisure) to Class A3 (cafe and restaurant) use and associated works

Reference number: H16-0645-17

*Date of decision (DD/MM/YYYY): 13/09/2017

What was the original application type?

Full planning permission

For the purpose of calculating fees, which of the following best describes the original application type?

( ) **Householder development:** Development to an existing dwelling-house or development within its curtilage

(•) **Other:** anything not covered by the above category

6. Non-Material Amendment(s) Sought

*Please describe the non-material amendment(s) you are seeking to make:

6. Non-Material Amendment(s) Sought

Minor design amendments to the proposed Diner (A3 Cafe and restaurant) as follows;
- move the location of the toilet block slightly
- add fire escape stairs out of the mezzanine floor

Are you intending to substitute amended plans or drawings? (•) Yes ( ) No

Old plan/drawing numbers: QQ1395_(90)005A

New plan/drawing numbers: PP1130_(90)011 Rev E

Please state why you wish to make this amendment:

Minor amendments to provide a more efficient design and improve safety in the unit

7. 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):

Officer name:

Title: Mr First name: David Surname: Gedney

Reference:

Date (DD/MM/YYYY): 23/04/2018 (Must be pre-application submission)

Details of the pre-application advice received:

8. 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

9. Authority Employee/Member

With respect to the Authority, I am:
(a) a member of staff
(b) an elected member
(c) related to a member of staff
(d) related to an elected member

Do any of these statements apply to you? ( ) Yes (•) No

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. ☑ Date 07/06/2018