



FOR ASSISTANCE IN COMPLETING THIS FORM CONTACT

Economy and Environment
Planning Service
Number One Riverside
Smith St
Rochdale
OL16 1XU

Phone : 01706 924305

EMAIL : development.control@rochdale.gov.uk

WEB : www.rochdale.gov.uk

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

Moto Birch Eastbound Services

Applicant Details

Name/Company

Title

Mr

First name

Darren

Surname

Spruce

Company Name

Moto Hospitality Ltd

Address

Address line 1

PO Box 218

Address line 2

Address line 3

Town/City

Luton

County

Bedfordshire

Country

Postcode

LU5 6QG

Are you an agent acting on behalf of the applicant?

☒ Yes

☐ No

Contact Details

Primary number

Secondary number

Fax number

Email address

***** REDACTED *****

Agent Details

Name/Company

Title

Mr

First name

Daren

Surname

Hamblett

Company Name

KMB Ltd

Address

Address line 1

The Old Bakehouse

Address line 2

Willington Road

Address line 3

Town/City

Kirton

County

Country

United Kingdom

Postcode

PE201EH

Contact Details

Primary number

***** REDACTED *****

Secondary number

Fax number

Email address

***** REDACTED *****

Description of the Proposal

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

Installation of a pre-fabricated changing places facility

Reference number

22/00603/FUL

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

19/08/2022

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

Condition number(s)

2 This permission relates to the following plans and documents:-
Location Plan (ref: 7667_01)
Site Plan (ref: 7667_101 Rev A)
Plan & Elevations as Proposed & as Existing (ref: 7667_102 Rev B)
and the development shall be carried out in complete accordance with these drawings
hereby approved.

Has the development already started?

☐ Yes

☒ No

Condition(s) - Variation/Removal

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

Due to the discovery of hidden services in the ground in the original proposed location it would be considerably less complicated to move the location of the proposed Changing Places pod around the corner of the glazed walkway. This will have the benefit of also moving the pod closer to the point of public access to the sites WC accommodation.

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

Change Plan and Elevations as Proposed & as Existing (ref:7667_102 Rev B) to ref: 7667_102 Rev D.

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

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

***** REDACTED *****

First Name

***** REDACTED *****

Surname

***** REDACTED *****

Reference

23/00423/ANM

Date (must be pre-application submission)

05/05/2023

Details of the pre-application advice received

Advice was to withdrawn the NMA and make either a S73 application or a new full application to deal with the proposed relocation of the Changing Places Pod.

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

Can you give appropriate notice to all the other owners/agricultural tenants? (Select 'Yes' if there are no other owners/agricultural tenants)

- ☒ Yes
☐ No

Certificate Of Ownership - Certificate B

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; or
☐ The applicant is the sole owner of all the land or buildings to which this application relates and there are no other owners* and/or agricultural tenants**.

* "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

Owner/Agricultural Tenant

Name of Owner/Agricultural Tenant:

***** REDACTED *****

House name:

Bridge House

Number:

1

Suffix:

Address line 1:

1 Walnut Tree Close

Address Line 2:

Town/City:

Guildford

Postcode:

GU1 2LZ

Date notice served (DD/MM/YYYY):

09/05/2023

Person Family Name:

Person Role

- ☐ The Applicant
☒ The Agent

Title

Mr

First Name

Daren

Surname

Hamblett

Declaration Date

09/05/2023

☒ 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 options 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

Daren Hamblett

Date

09/05/2023