



The City of Liverpool

www.liverpool.gov.uk • Planning & Building Control, Municipal Buildings, Dale Street, L2 2DH • 0151 233 3021

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

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:	<input type="text"/>	First name:	<input type="text"/>	Surname:	<input type="text"/>
Company name:	<input type="text" value="ASDA Stores Limited"/>				
Street address:	<input type="text" value="C/O Agent"/>				
	<input type="text"/>	Telephone number:	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	Mobile number:	<input type="text"/>	<input type="text"/>	<input type="text"/>
Town/City:	<input type="text"/>	Fax number:	<input type="text"/>	<input type="text"/>	<input type="text"/>
County:	<input type="text"/>	Email address:	<input type="text"/>		
Country:	<input type="text"/>				
Postcode:	<input type="text"/>				
Are you an agent acting on behalf of the applicant? <input checked="" type="radio"/> Yes <input type="radio"/> No					

2. Agent Name, Address and Contact Details

Title:	<input type="text" value="Mr"/>	First Name:	<input type="text" value="Steven"/>	Surname:	<input type="text" value="Roberts"/>
Company name:	<input type="text" value="Deloitte LLP"/>				
Street address:	<input type="text" value="1 City Square"/>				
	<input type="text"/>	Telephone number:	<input type="text" value="+44"/>	<input type="text" value="11329"/>	<input type="text" value="21706"/>
	<input type="text"/>	Mobile number:	<input type="text"/>	<input type="text"/>	<input type="text"/>
Town/City:	<input type="text" value="Leeds"/>	Fax number:	<input type="text"/>	<input type="text"/>	<input type="text"/>
County:	<input type="text" value="West Yorkshire"/>	Email address:	<input type="text" value="stroberts@deloitte.co.uk"/>		
Country:	<input type="text"/>				
Postcode:	<input type="text" value="LS1 2AL"/>				

3. Site Address Details

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

House:	<input type="text"/>	Suffix:	<input type="text"/>
House name:	<input type="text" value="Asda Stores Ltd"/>		
Street address:	<input type="text" value="St. Marys Road"/>		
	<input type="text" value="Garston"/>		
Town/City:	<input type="text" value="Liverpool"/>		
County:	<input type="text"/>		
Postcode:	<input type="text" value="L19 1SJ"/>		

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

Easting:	<input type="text" value="339963"/>
Northing:	<input type="text" value="384708"/>

Description:

4. Pre-application Advice

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

☐ Yes ☒ No

5. Description of Proposal

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

To vary condition 5 attached to 91P/2161 (to erect a 880 sq.m food retail unit) so as to allow the store to open between 7:00 am and 10:00 pm and that there shall be no loading or unloading of delivery vehicles at the premises or shopping trolley collection outside the hours of 07:00 am and 11:00 pm Monday to Sunday.

Application reference number:	<input type="text" value="13F/1405"/>	Date of decision:	<input type="text" value="27/08/2013"/>
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Please state the condition number(s) to which this application relates:

Condition number(s):

Has the development already started? ☐ Yes ☒ No

6. Condition(s) - Removal

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

As part of ASDA's continual commitment to improve their service, they seek to ensure that their stores can operate efficiently and effectively whilst providing the services and facilities that are requested by their customers.

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

The premises shall not be open to the public outside the hours of 00:00 Monday to 22:00 Saturday and from 10:00 to 17:00 on Sundays.

7. 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

8. Certificates (Certificate A)

Certificate of Ownership - Certificate A

Town and Country Planning (Development Management Procedure) (England) Order 2010 Certificate under Article 12

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 (*owner is a person with a freehold interest or leasehold interest with at least 7 years left to run*) of any part of the land to which the application relates, and that none of the land to which the application relates is, or is part of, an agricultural holding (*"agricultural holding" has the meaning given by reference to the definition of "agricultural tenant" in section 65(8) of the Act*).

Title:	<input type="text" value="Mr"/>	First name:	<input type="text" value="Steven"/>	Surname:	<input type="text" value="Roberts"/>
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Person role: Declaration date: ☒ Declaration made

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.

☒ Date