

Civic Centre, Castle Hill Avenue, Folkestone, Kent, CT20 2QY
planning@folkestone-hythe.gov.uk
01303 853538



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	1
Suffix	
Property Name	Unit 1
Address Line 1	Riverside Business and Craft Center
Address Line 2	West Hythe Road
Address Line 3	
Town/city	Hythe
Postcode	CT21 4NB

Description of site location must be completed if postcode is not known:

Easting (x)	Northing (y)
612595	134149

Description

Applicant Details

Name/Company

Title

Mrs

First name

Surname

Giles

Company Name

Address

Address line 1

1 Unit 1 Riverside Business and Craft Center

Address line 2

West Hythe Road

Address line 3

Town/City

Hythe

County

Country

Postcode

CT21 4NB

Are you an agent acting on behalf of the applicant?

☒ Yes

☐ No

Contact Details

Primary number

***** REDACTED *****

Secondary number

Fax number

Email address

***** REDACTED *****

Agent Details

Name/Company

Title

Mr

First name

Giles

Surname

Fitch

Company Name

Blueprint Projects

Address

Address line 1

Unit 7

Address line 2

Riverside Business and Craft Centre

Address line 3

Town/City

West Hythe

County

Country

United Kingdom

Postcode

CT214NB

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

CHANGE OF USE FROM INDUSTRIAL UNIT TO CLASS A4 USE AS A BAR IN CONNECTION WITH THE ADJACENT BREWERY.

Reference number

Y15/0139/SH

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

18/05/2015

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

Condition number(s)

NO. 3

Has the development already started?

☒ Yes

☐ No

If Yes, please state when the development was started (date must be pre-application submission)

01/06/2015

Has the development been completed?

☒ Yes

☐ No

If Yes, please state when the development was completed (date must be pre-application submission)

15/07/2015

Condition(s) - Variation/Removal

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

Under licensing Unit 1 can apply for 15 temporary licenses which enables there opening hours to change for these 15 singular events. The planning department has written to the owners stating these hours do not match the hours listed in the planning approval. We would like to change the opening hours to 09.00 - 01.00 Monday - Sunday for 15 times a year maximum to match the temporary licenses. The opening hours for the rest of the year are to remain as is.

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

The use hereby permitted shall not be open to customers outside the following times: 09.00 - 22.00 Monday - Sunday. Except for 15 times a year when applied via the licensing department for opening hours from 09.00 to 01.00

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

Date (must be pre-application submission)

09/10/2023

Details of the pre-application advice received

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:

Hayne Barn

Number:

Suffix:

Address line 1:

Grange Road

Address Line 2:

Saltwood

Town/City:

Hythe

Postcode:

CT21 4BH

Date notice served (DD/MM/YYYY):

11/10/2023

Person Family Name:

Person Role

- ☐ The Applicant
☒ The Agent

Title

Mr

First Name

Giles

Surname

Fitch

Declaration Date

11/10/2023

☒ Declaration made

Declaration

I/We hereby apply for Removal/Variation of a condition as described in the questions answered, details provided, 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.

I/We also accept that, in accordance with the Planning Portal's terms and conditions:

- Once submitted, this information will be made available to the Local Planning Authority and, once validated by them, be published 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

Giles Fitch

Date

12/10/2023