



Arun District Council
Maltravers Road
Littlehampton
West Sussex BN17 5LF
Tel: 01903 737756
www.arun.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	The former Croft Surgery
Address Line 1	Barnham Road
Address Line 2	
Address Line 3	
Town/city	Eastergate
Postcode	PO20 3RP

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

Easting (x)	Northing (y)
494674	105543

Description

Applicant Details

Name/Company

Title

Mr

First name

Ross

Surname

McIntyre

Company Name

Springfield Gospel Trust

Address

Address line 1

The Gospel Hall

Address line 2

Nyton Road

Address line 3

Aldingbourne

Town/City

Chichester

County

Country

United Kingdom

Postcode

PO20 3TX

Are you an agent acting on behalf of the applicant?

- ☒ Yes
- ☐ No

Applicant Contact Details

Primary number

***** REDACTED *****

Secondary number

Fax number

Email address

***** REDACTED *****

Agent Details

Name/Company

Title

Mr

First name

John

Surname

Shephard

Company Name

Address

Address line 1

62 Park Road

Address line 2

Moggerhanger

Address line 3

Town/City

Bedford

County

Country

GB

Postcode

MK44 3RN

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 of the existing building and associated facilities from a doctor surgery (Use Class E) to a place of worship (Use Class F) and all associated works and infrastructure.

Reference number

BN/130/25/PL

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

03/03/2026

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

Condition number(s)

4 and 6

Has the development already started?

☐ Yes

☒ No

Condition(s) - Variation/Removal

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

Both conditions fail to meet the tests of being necessary and reasonable.

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

Both conditions should be removed.

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

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

Is any of the land to which the application relates part of an Agricultural Holding?

- ☐ Yes
☒ No

Certificate Of Ownership - Certificate A

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**

* "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.

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.

Person Role

- ☐ The Applicant
☒ The Agent

Title

Mr

First Name

John

Surname

Shephard

Declaration Date

05/05/2026

☒ 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

John Shephard

Date

05/05/2026