Horsham District Council

Application for Approval of Details Reserved by Condition

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

Christs Hospital School

Address Line 1

The Avenue

Address Line 2

Address Line 3

West Sussex

Town/city

Christs Hospital

Postcode

RH13 0LJ

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

Easting (x)

514853

Northing (y)

128504

Description

Applicant Details

Name/Company

Title

Mr

First name

Francis

Surname

Pulvermacher

Company Name

Christ's Hospital School

Address

Address line 1

Christs Hospital School,

Address line 2

The Avenue

Address line 3

Christ's Hospital

Town/City

Horsham

County

Sussex

Country

UK

Postcode

RH13 0LJ

Are you an agent acting on behalf of the applicant?

- [x] Yes
- [ ] No

Contact Details

Primary number

Secondary number

Fax number

Email address

***** REDACTED ******

Agent Details

Name/Company

Title

Mrs

First name

Charmain

Surname

Hawkins

Company Name

Brighter Planning Ltd

Address

Address line 1

Lewis House

Address line 2

Great Chesterford Court

Address line 3

Town/City

Great Chesterford

County

Country

United Kingdom

Postcode

CB10 1PF

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

Proposed two-storey extension to the existing sports centre to provide two new swimming pools, spa facilities, two class studios, a fitness suite and cafe. Construction of a six-lane, all-weather running track with eight-lane sprint track and ancillary athletic facilities and floodlighting. Construction of a 3G artificial grass pitch with floodlighting. Relocation of spoil on land to the east. Creation of an unlit outdoor adventure area with 15 stations east of the new track. Associated car parking for 272 cars, and a new permanent access to Christ Hospital Road, closure of the existing Infirmary Drive access with conversion of disused section of drive to a sprint track. Erection of associated equipment store, fencing and lighting. Christs Hospital School The Avenue Christs Hospital Horsham

Reference number

DC/24/0063

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

08/05/2024

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

Condition number(s)

Condition 19 secure and covered cycle facilities

Has the development already started?

- [x] Yes
- [ ] No

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

29/07/2024

Has the development been completed?

- [ ] Yes
- [x] No

Part Discharge of Conditions

Are you seeking to discharge only part of a condition?

◯ Yes
⊘ No

Discharge of Conditions

Please provide a full description and/or list of the materials/details that are being submitted for approval

See submitted drawings

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

Declaration

I/We hereby apply for Approval of details reserved by a condition (discharge) 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

Charmain Hawkins

Date

11/09/2024