



**WYCOMBE
DISTRICT COUNCIL**

APPLICATION TO MODIFY OR DISCHARGE A SECTION 106 PLANNING OBLIGATION

PLEASE READ THE ACCOMPANYING NOTES TO HELP YOU COMPLETE THIS FORM
COMPLETE THE FORM IN BLOCK CAPITALS USING BLACK INK

For Office Use Only

App.No.	W											
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Wycombe District Council is a Data Controller under the Data Protection Act. We hold information for the purposes specified in our notification to the Information Commissioner and may use this information for any of them. We may get information about you from others, or we may give information to them. If we do it will only be as the law permits, to check the accuracy of information, prevent fraud or detect crime or to protect public funds

Please note that this form and any supporting information (including any personal details eg. Phone number, email address, etc) will be seen by Councillors, the applicant, members of the public, and will be published in full on the Council's web site.

You should use this form when applying for the modification or discharge of a planning obligation within Wycombe District.
For further information refer to The Town and Country Planning (Modification and Discharge of Planning Obligations) Regulations 1992

1. **Type of application** *Please Tick*
- Are you applying to **modify** a planning obligation
 - Are you applying to **discharge** a planning obligation

2. **Name and Address of Applicant**

Name:

Address:

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Postcode:

Email Address:

Daytime Tel.No:

3. **Name and Address of Agent**
(if completed by Agent)

Name:

Address:

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Postcode:

Email Address:

Contact Name:

Daytime Tel.No:

Leave the box opposite blank, unless you wish to be excluded from the weekly list of applications *tick*

4. **Full postal address of the site to which the obligation relates:**

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5. **Nature of the applicant's interest in the land:**

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6. Provide sufficient information to enable the authority to identify the planning obligation (planning reference numbers, etc)

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7. What reason(s) do you have for applying for the modification or discharge of the obligation.

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Signed (Applicant/Agent) Date.....

CHECKLIST

Please tick

- A 6 copies of this form, signed and dated
- B 6 copies of a map identifying the land to which the obligation relates.
- C 6 copies of such other information as you consider relevant to the determination of the application