## **Delegated Decision Notification**

This form is used both to give notice of an officer's intention to make a Key decision and to record any delegated decision which has been taken. The decision set out on this form therefore reflects the decision that it is intended will be made, or that has been made. Although set out in the past tense a decision for which notice is being given may be subject to amendment or withdrawal.

LEAD DIRECTOR <sup>1</sup> :	Director of City Development			
SUBJECT":	Proposed sale of land at Barrack Road to the Education Skills Funding Agency.			
DECISION	The Director of City Development has given approval to;			
DETAILS":	Declare the subject site surplus to Council requirements.			
	2) Approve the terms for the sale of the site.			
TYPE OF	☐ Key Decision (Executive)			
DECISION:	Is the decision eligible for call-in?iv  Yes  No			
	Is the decision exempt from call-in? <sup>v</sup> Yes  No			
	Significant Operational Decision (Council or Executive <sup>vi</sup> – not subject to call-			
	in)			
	☐ Administrative Decision (Council or Executive <sup>vii</sup> – not subject to publication			
	or call-in)			
NOTICEVIII / CALL-	Date the decision was published in the List of Forthcoming Key Decisions:			
IN (KEY				
DECISIONS	If not on the List of Forthcoming Key Decisions for at least 28 clear days, the			
ONLY):	reason why it would be impracticable to delay the decision:-			
	If exempt from call-in, the reason why call-in would prejudice the interests of the Council or the public:-			
AFFECTED				
WARDS:	Chapel Allerton Ward			
DETAILS OF	Executive Member Date consulted: Interest disclosed? Interest disclosed?			
CONSULTATION	Councillor Richard 20.06.17			
UNDERTAKEN:	Lewis No			

	Ward Councillor: Cllr J Dowson Cllr E Taylor Cllr M Rafique	Date consulted: 22.03.17 22.03.17 22.03.17	Interest disclosed?  ☐ Yes (Date of dispensation: )  ☑ No	
	Others <sup>x</sup> (please specify: )	Date consulted:	Interest disclosed?  Yes (Date of dispensation: )  No	
CAPITAL	N/A			
INJECTION	Injection approval requ	uired?	s 🗆 No	
APPROVAL	(If yes, you must complete the Approval box below)			
REQUIRED:	(ii yee, yea must complete the Approval box below)			
CAPITAL			Capital Scheme Number:	
INJECTION	N/A		XXXXX / XXX / XXX	
APPROVAL		(Name: )	700000,7000,7000	
		(Title: )	Date:	
CONTRACT	Contract Reference No	•	Contract Title	
DETAILS			N/A	
(PROCUREMENT	N/A			
DECISIONS ONLY)				
			Supplier	
			N/A	
IMPLEMENTATION	Officer accountable for	r implementation		
(KEY DECISIONS		·		
ONLY)	Timescales for implementation <sup>xi</sup>			
·	· 			
CONTACT			Telephone number <sup>xii</sup> :	
PERSON:	Ben Smithson		0113 3787690	
DECISION MAKER	-	-	Date:	
/ AUTHORISED		4	1 (1 0	
SIGNATORYXIII:			27/6/17	
	(Name: Martin Farringt	on)	<u>-</u>	