



PLANNING

11 APR 2017

FOR ATTENTION OF

For office use only

Application No.

Date received 11-4-17

Fee paid £ 28.00 Receipt No: 029604

Council Offices, Church Walk, Clitheroe, Lancashire, BB7 2RA Tel: 01200 425111 www.ribblevalley.gov.uk

320170338P

Application for approval of details reserved by condition.

Town and Country Planning Act 1990

Planning (Listed Buildings and Conservation Areas) Act 1990

You can complete and submit this form electronically via the Planning Portal by visiting www.planningportal.gov.uk/apply**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.

Please complete using block capitals and black ink.

It is important that you read the accompanying guidance notes as incorrect completion will delay the processing of your application.

1. Applicant Name and Address

Title:	Dr	First name:	HAROLD
Last name:	GEE		
Company (optional):	—		
Unit:	House number:	House suffix:	
House name:	BASHALLS FARM		
Address 1:	HOTHERSALL LANE		
Address 2:	HOTHERSALL		
Address 3:			
Town:	PRESTON		
County:	LANCS		
Country:			
Postcode:	PR3 2XB		

2. Agent Name and Address

Title:		First name:	
Last name:			
Company (optional):			
Unit:	House number:	House suffix:	
House name:			
Address 1:			
Address 2:			
Address 3:			
Town:			
County:			
Country:			
Postcode:			

3. Site Address Details

AS OVER

Please provide the full postal address of the application site.

Unit:

House

number:

House

suffix:

House
name:

Address 1:

Address 2:

Address 3:

Town:

County:

Postcode
(optional):

Description of location or a grid reference.

(must be completed if postcode is not known):

Easting:

Northing:

Description:

4. Pre-application AdviceHas 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).

Please tick if the full contact details are not known, and then complete as much as possible: ☐

Officer name:

Reference:

Date (DD/MM/YYYY):

(must be pre-application submission)

Details of pre-application advice received?

5. Description Of Your Proposal

Please provide a description of the approved development as shown on the decision letter, including the application reference number and date of decision in the sections below:

~~DISCHARGE CONDITION~~
REPLACEMENT GROUND FLOOR STUDY, REAR SINGLE STOREY ORANGERY

Reference number: 3/2016/0397 Date of decision: 14/06/2016 (Date must be pre-application submission) (DD/MM/YYYY)

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

1.		6.	
2.		7.	
3.	SAMPLES OF 1) WINDOWS 2) EXTENSION FRAME	8.	
4.	- TRIPLE GLAZING.	9.	
5.	3) EXTENSION CLADDING.	10.	

Has the development already started?

☒ Yes☐ No

If Yes, please state when the development started (DD/MM/YYYY):

18/11/2016

(date must be pre-application submission)

Has the development been completed?

☐ Yes☒ No

If Yes, please state when the development was completed (DD/MM/YYYY):

(date must be pre-application submission)

6. Discharge Of Condition

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

① WINDOW FRAME ② EXTENSION CLADDING MATERIAL
③ ALUMINIUM GLAZING FRAMES FOR EXTENSION (SOUTH ASPECT)**7. Part Discharge Of Condition(s)**

Are you seeking to discharge only part of a condition?

☐ Yes☒ No

If Yes, please indicate which part of the condition your application relates to:

8. Planning Application Requirements - Checklist

Please read the following checklist to make sure you have sent all the information in support of your proposal. Failure to submit all information required will result in your application being deemed invalid. It will not be considered valid until all information required by the Local Planning Authority has been submitted.

The original and 3 copies of a completed and dated application form: ☐

The original and 3 copies of other plans and drawings or information necessary to describe the subject of the application: ☐

The correct fee: ☐

9. Declaration

I/we hereby apply for planning permission/consent as described in this form 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.

Or signed - Agent:

11/04/2017

(date cannot be pre-application)

10. Applicant Contact Details

Telephone numbers

Country code:	Extension number:
<input type="text"/>	<input type="text"/>
Country code:	<input type="text"/>
<input type="text"/>	<input type="text"/>
Country code:	<input type="text"/>
<input type="text"/>	<input type="text"/>
Email:	<input type="text"/>
<input type="text"/>	<input type="text"/>

11. Agent Contact Details

Telephone numbers

Country code:	National number:	Extension number:
<input type="text"/>	<input type="text"/>	<input type="text"/>
Country code:	Mobile number (optional):	
<input type="text"/>	<input type="text"/>	
Country code:	Fax number (optional):	
<input type="text"/>	<input type="text"/>	
Email address (optional):		
<input type="text"/>		

12. Site

Can the application be carried out on a highway or other public land? ☒ Yes ☐ No

If the application is carried out on a highway or other public land, please provide details of the landowner(s) (if different from the agent/applicant's details): ☐ Agent ☒ Applicant ☐ Other (if different from the agent/applicant's details)

If Other has been selected, please provide:

Contact name:

Telephone number:

Email address: