

320170983P

For office use only Application No

Date received
Fee paid £

Receipt No:

Council Offices, Church Walk, Clitheroe, Lancashire, BB7 2RA

Tel: 01200 425111

/ww.ribblevalley.gov.uk

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. Applic	cant Name and Address	2. Agent Name and Address
Title:	MK First name: KeviN	Title: First name:
Last name:	Fueq.	Last name:
Company (optional):	BARRATT DEVELOPMENTS	Company (optional):
Unit:	House number: 4 House suffix:	Unit: House House
House name:		House name:
Address 1:	Broseley Road	Address 1:
Address 2:	MANCHESTER.	Address 2:
Address 3:		Address 3:
Town:		Town:
County:		County:
Country:		Country:
Postcode:	MI6 9 Ka.	Postcode:

3. Site Address Details Please provide the full postal address of the application site. Unit: House House Suffix: House Suffix: House Number: Suffix: House Suffix: Hous	Has assistance or prior advice been sought from the local authority about this application? 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: Stephen Kurmant J. Reference: Date (DD/MM/YYYY): (must be pre-application submission) Details of pre-application advice received?				
	7. mm/s/1.00				
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: DEVELOPMENT OF UP TO 1863 HOMES WILLIAMS ARE MONTHS FIL MERISTRUM ARE MONTHS CAR PARK AND ARCHIVEN FACILITY.					
Reference number: 3/2014/0764 Date of decision:	30011133011/(001111111111111111111111111				
Please state the condition number(s) to which this application relate					
1. CONDITION II - CONSTRUCTION INTERMEDIANT PLAN.	6.				
2.	7.				
3.	8.				
4.	9.				
5.	10.				
Has the development already started?	Yes No				
If Yes, please state when the development started (DD/MM/YYYY): OCT 2017. (date must be pre-application submission)					
Has the development been completed?					
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:					
7. Part Discharge Of Condition(s)					
Are you seeking to discharge only part of a condition? If Yes, please indicate which part of the condition your application relates to:					
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\$Date: 2012-07-17 #5 \$Revision: 4635 \$

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:	original and 3 copies of other plans and drawings formation necessary to describe the subject of the application:			
The correct fee:				
9. Declaration I/we hereby apply for planning permission/consent as described in the information. I/we confirm that, to the best of my/our knowledge, any genuine opinions of the person(s) giving them. Signed - Applicant: Date (DD/MM/YYYY): 20 · 10 . 17. (date cannot be pre-application)	nis form and the accompanying plans/drawings and additional facts stated are true and accurate and any opinions given are the Or signed - Agent:			
10 Applicant Contest Details				
Telephone numbers Country code: National number: + 444	Telephone numbers Country code: National number: Extension number: Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional):			
12. 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? (Please select only one) If Other has been selected, please provide: Contact name: Telephone number: Email address:				
Email address:				

