

For office use only

Application No. 31201870894

Date received 21/01/18

Fee paid £ NIL Receipt No: _____

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:	MR	First name:	FRANCIS
Last name:	NOON		
Company (optional):			
Unit:		House number:	13-15
		House suffix:	
House name:	YEW TREE COTTAGE		
Address 1:	HELLIFIELD RD,		
Address 2:	BOURN BY BOWLAND		
Address 3:			
Town:	CLITHEROE		
County:	LANCASHIRE		
Country:	ENGLAND		
Postcode:	BB7 4NS		

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

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 Advice

Has 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:

Reference number: Date of decision: (Date must be pre-application submission) (DD/MM/YYYY)

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

1. <input type="text" value="MUST BEGIN WITHIN 3 YEARS."/>	6. <input type="text" value="WALL TO BE REBUILT WITHIN 12M OF CABLE ST."/>
2. <input type="text" value="MUST BE IN ACCORDANCE WITH PLANS OF 03/7/18"/>	7. <input type="text"/>
3. <input type="text" value="IF RATS ALLOWED CONSULT BIOLOGIST"/>	8. <input type="text"/>
4. <input type="text" value="SAMPLES OF MATERIALS TO BE SUBMITTED."/>	9. <input type="text"/>
5. <input type="text" value="PROTECT SPECIES OF WORKS TO BE SUBMITTED."/>	10. <input type="text"/>

Has the development already started?

☒ Yes

☐ No

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

HEALTH AND SAFETY
NOTICE FROM RBVC
(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:

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:

Application Requirements - Checklist

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

1 and 3 copies of a
dated and dated application form: ☐

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

Direct fee: ☐

Declaration

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:

(Signature)
Location)

Extension
number:

11. Agent Contact Details

Telephone numbers

Country code: National number:

Extension
number:

Country code: Mobile number (optional):

Country code: Fax number (optional):

Email address (optional):

bridleway or other public land? ☒ Yes

☐ No

to carry
(only one)

☐ Agent

☒ Applicant

☐ Other (if different from the
agent/applicant's details)

Telephone number:

Email address:

8. Planning A
Please read the
information for
the Local Plan
The original
complete
The coo

9.
14
15