

For office use only 3 Application No Date received Fee paid £ 116 . OO Receipt No:

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

Tel: 01200 425111 www.ribblevallev.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. Applicant Name and Address		2. Agent Name and Address	
Title:	MR First name:	Title: First name:	
Last name:	ROPER	Last name:	
Company (optional):		Company (optional): DAVID WRIGLEY PLANNING	
Unit:	House House suffix:	Unit: House House suffix:	
House name:		House name:	
Address 1:		Address 1: FAIRFIELD BUSINESS PARK	
Address 2:		Address 2: LONGSIGHT ROAD	
Address 3:		Address 3: CLAYTON - LE - DALE	
Town:		Town: BLACKBURN	
County:		County: LANCASHIRE	
Country:		Country:	
Postcode:		Postcode: BB2 75A	

3. Site Address Details	4. Pre-application Advice				
Please provide the full postal address of the application site.	Has assistance or prior advice been sought from the local authority about this application?				
Unit: House House suffix:	Ties Mills				
House name:	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).				
LINE AUGUST THAT	Please tick if the full contact details are not known, and then complete as much as possible:				
Address 2: CHIPPING ROAD	Officer name:				
Address 3: THORNLEY WITH WHEATLEY	Officer name:				
Town: LONGRIDGE	Reference:				
County: LANCASHIRE					
Postcode (optional): PR3 2 T E	Date (DD/MM/YYYY):				
Description of location or a grid reference.	(must be pre-application submission) Details of pre-application advice received?				
(must be completed if postcode is not known):	Details of pre-application advice received:				
Easting: Northing:					
Description:					
5. Description Of Your Proposal					
Please provide a description of the approved development as showl and date of decision in the sections below:	n on the decision letter, including the application reference number				
PROPOSED CONVERSION OF BAR	NS TO TWO DWELLINGS				
Reference number: 3/2017/0489 Date of decision:	12/07/2017 (Date must be pre-application submission) (DD/MM/YYYY)				
Please state the condition number(s) to which this application relates:					
1. CONDITION 4 LANDSCAPING SCHEME	6.				
2.	7.				
3.	8.				
4.	9.				
5.	10.				
Has the development already started?	(date must be pre-application				
If Yes, please state when the development started (DD/MM/YYYY):	06/01/2020 submission)				
Has the development been completed?	Yes No				
If Yes, please state when the development was completed (DD/MM.	(date must be pre-application submission)				
6. Discharge Of Condition					
Please provide a full description and/or list of the materials/details to	hat are being submitted for approval:				
PLEASE SEE ATTACHED LAND SCAPING	PLAN AND STATEMENT INCLUDING				
STONE WALLS TO GARDEN AND PARK	KING AREAS, PROVISION OF TREES ETC.				
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:					
SUBMISSION OF LANDSCAPING SCHEME FOR THE SITE INCLUDING					
II _	PING AS REQUIRED BY CONDITION 4				

	ikė sure you have sent a pplication being deerne	Il the information in support of your proposal. Failure to submed invalid. It will not be considered valid until all information re	
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	ation: 🛮
The correct fee:			
9. Declaration I/we hereby apply for planning permissio information. I/we confirm that, to the bes genuine opinions of the person(s) giving	st of my/our knowledge,	in this form and the accompanying plans/drawings and addit , any facts stated are true and accurate and any opinions given	ional are the
Signed - Applicant:		Or signed - Agent:	
Date (DD/MM/YYYY): 05/10/2020 (date can	not be		
10. Applicant Contact Details Telephone numbers			
Country code: National number:			
Country code: Mobile number (options	al):		
Country code: Fax number (optional):			
Email address (optional):			
12. Site Visit			
Can the site be seen from a public road, p	oubli		
If the planning authority needs to make a out a site visit, whom should they contact	in ar t? <i>(F</i>		
If Other has been selected, please provide Contact name:	e: 		
Email address:			ħ

