

For office use only
Application No.

Date received

Fee paid £ Receipt No:

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

Tel: 01200 425111

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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:	N	
Last name:	MACDONALD			
Company (optional):	SIMPLY NATIVE			
Unit:		House number:		House suffix:
House name:				
Address 1:	BOWLAND WILD BOAR PARK			
Address 2:	WARDSLEY RD			
Address 3:	CHIPPING			
Town:	PRE S'TON			
County:				
Country:	1			
Postcode:	PR3 ZQT			

2. Agent Name and Address					
Title:	mrs First name: MARY				
Läst name:	MILLER				
Company (optional):	RURAL FUTURES (NW) LTO				
Unit:	House number: House suffix:				
House name:	HIGH House				
Address 1:	GONDER LANE				
Address 2:	CLANGHTON ON BROCK				
Address 3:					
Town:	PRESTON				
County:					
Country:					
Postcode:	PR3 OP Q				

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:	authority about this application?				
House name:	If Yes, please complete the following information about the advice you were given. (This will help the authority to deal with this				
Address 1: BOWLAND WILD BOAR PARK	application more efficiently). Please tick if the full contact details are not				
Address 2: WARDSLEY RD	known, and then complete as much as possible:				
Address 3: CHIPPING	Officer name:				
Town: PRESTON	Reference:				
County:					
Postcode (optional): Description of location or a grid reference. (must be completed if postcode is not known):	Date (DD/MM/YYYY): (must be pre-application submission) Details of pre-application advice received?				
Easting: 36 5 2 3 0 Northing: 44 5 0 3 2					
Description:					
5. Description Of Your Proposal					
and date of decision in the sections below:	n on the decision letter, including the application reference number				
LANGE OF WE OF LAND TO ERECT	NINE HOLIDAY LODGES WITH PARKING				
AND AN ASSOCIATED PACKAGE SEWAG	E TREATMENT PLANT				
Reference number: 3/2020/0579 Date of decision:	(Date must be pre-application submission) (DD/MM/YYYY)				
Please state the condition number(s) to which this application relate	6.				
1. CONDITION NO. 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):	(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:					
THE COMMENTS THE BOOKINGS					
MANAGEMENT PLAN					
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:					
in the product material part of the containent your appropriate terms.					

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:	riginal and 3 copies of other plans and drawings ormation 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. Signed - Applicant: Or signed - Agent: Date (DD/MM/YYYY):					
(date cannot be pre-application)					
Telephone numbers Country code: National number: Extension number: Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional):	Telephone numbers Country Country Country Country Country Country				
12. Site Visit Can the site be seen from a public road, public footpath, bridleway of lifthe 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:	r other public land? Yes No Agent Applicant Other (if different from the agent/applicant's details) Telephone number:				

