

For office use only
Application No. 3/2021/0590

Date received 28/5/21.

Fee paid £

Receipt No:

www.ribblevalley.gov.uk

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

Tel: 01200 425111

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:	Mrs	First name:	Cotherine !	- 101	Title:	Mr	First name: Luke	
Last name:	Fleming				Last name:	McK	evi++	
Company (optional):	Brabins Trust				Company (optional):	ZIM	Partnership LLP	
Unit:	House number: 2 I House suffix:				Unit:		House number: House suffix:	
House name:					House name:			
Address 1:	Kirklands				Address 1:	28 5	ceptre Way	
Address 2:	dress 2: Chippins						er Bridge	
Address 3:					Address 3:			
Town:	Preston				Town:	Preste	on en	
County:	Lancashire				County:	Lanc	coshire	
Country:	England				Country:	Engle	and	
Postcode:	stcode: PR3 2GN					PRS	6AW	

\$Date:: 2012-07-17 #\$ \$Revision: 4636 \$

	ddress Details		application Advice ance or prior advice been sought from the local			
rease prov Unit:	ide the full postal address of the application site. House number: 20-32 House suffix	authority	about this application?			
House name:	number: 20-22 suffix:	If Yes, ple	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			
Address 1:	20-22 Talbot Street	application				
Address 2:	Chipping		nd then complete as much as possible:			
Address 3:		Officer n	Officer name:			
own:	Preston	Prodrie	Adrian Donal			
			Reference:			
County: Postcode	Lancashire	RV/2	RV/2019/ENQ/00096			
optional): Description	of location or a grid reference.	11	Date (DD/MM/YYYY): (must be pre-application submission) Oq/12/2016			
	empleted if postcode is not known):	Details o	f pre-application advice received?			
	Northing: 443327	- 30	nsultation with Historic England lineary Report for works to doors			
Description	ц	an	d wholows.			
		_][No. of the last of			
replace			notestake Structural & damp repair ent windows (like for like), rion of new rainwower goods. (Date must be pre-application submission) (DD/MM/YYYY)			
	e the condition number(s) to which this application re		submission) (DD/MM/TTTY)			
1.	NT. The	6.	Joseph Market Company			
2.	Cigi	7.	The state of			
3.	/	8.				
4.		9.				
5.		10.				
Has the de	velopment already started?		Yes 📝 No			
If Yes, plea	ise state when the development started (DD/MM/YYY	Y):	(date must be pre-application submission)			
Has the de	velopment been completed?		Yes No			
If Yes, plea	ise state when the development was completed (DD/	MM/YYYY):	(date must be pre-application submission)			
6. Discha	arge Of Condition					
Please pro	vide a full description and/or list of the materials/deta					
Condi	tion 03 - All mosterious are li	steal in t	he document titled			
, Cono	dition 3 - Desculs of samples ar	nal mouter	ichs to be approved.			
7. Part D	ischarge Of Condition(s)					
	eking to discharge only part of a condition?		Yes No			
	se indicate which part of the condition your application	on relates to:				
			\$Date: 2012 07-17 #\$ \$Revision: 4636 \$			

8. Planning Application Requirements - Checklist Please read the following checklist to make sure you have sent all information required will result in your application being deemed the Local Planning Authority has been submitted.	the information in support of your proposal. Fallure to submit all invalid. It will not be considered valid until all information required by				
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 information. I/we confirm that, to the best of my/our knowledge, a genuine opinions of the person(s) giving them.	n this form and the accompanying plans/drawings and additional any facts stated are true and accurate and any opinions given are the				
Signed - Applicant:					
Date (DD/MM/YYYY):					
28/05/2021 (date cannot be pre-application)					
Telephone numbers Extension number: Country code: Fax number (optional): Email address (optional):	Telephone numbers Country code: National number: Country code: Fax number (optional):				
12. Site Visit Can the site be seen from a public road, public footpath, bridleway 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: Luke Mckavitt Email address:	y or other public land? Yes No Agent Applicant Other (if different from the agent/applicant's details)				

