

For office use only,
Application No.3/2021/0705

Date received 05/07/2 L

Fee paid £ LB C Receipt No:

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

Tel: 01200 425111

2. Agent Name and Address

vww.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.

Title:	Hrs	First nar	ne: C	Catharine		1001	
Last name:	Flemina						
Company (optional):	Brobins Trust						
Unit:		House number:	21		House suffix:		
House name:					-		
Address 1:	Kirklands						
Address 2:	Chipp	ing					
Address 3:							
Town:	Preston						
County:	Lancashire						
Country:	England						
Postcode:	PR3	2.GN					

Title:	Mr First name: Luke							
Last name:	McKevitt							
Company (optional):	SYM Partnership LLP							
Unit:	House House suffix:							
House name:								
Address 1:	28 Sceptre Way							
Address 2:	Bamber Bridge							
Address 3:								
Town:	Preston							
County:	Lancashire							
Country:	England							
Postcode:	PRS GAW							

	Address Details vide the full postal address of the application site. House number: 20-22 House suffix:	Has as author	re-application Advice ssistance or prior advice been sought from the local prity about this application? Yes No				
name: Address 1 Address 2	Chipping	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:					
Address 3		Officer name: Adrian Dowd					
Town:	Preston, Chipping	1					
County:	Lancashire	Reference: RV/2019/ENQ/00096					
Postcode	Dec 0 -	D-4- (DD (44460000)).					
	(optional): VK3 ZQE Description of location or a grid reference.		(must be pre-application submission)				
(must be d	completed if postcode is not known):		lls of pre-application advice received?				
Description	362314 Northing: 443327	. 3	consultertion with Historic England. Soinery Report for works to doors and windows.				
Reference	920010101	16/04	(Date must be pre-application				
1.	te the condition number(s) to which this application relat	6.					
2.	of the programmed with the	7.	Some State of the				
3.		8.					
4,		9.	/				
5.		10.					
Has the d	evelopment already started?		Yes No				
If Yes, ple	ase state when the development started (DD/MM/YYYY):		(date must be pre-application				
	avalanment has rempleted?		submission)				
Has the d	evelopment been completed?	100000					
Has the d	evelopment been completed? ease state when the development was completed (DD/MN	I/YYYY):	submission) Yes No				
Has the d If Yes, ple 6. Disch Please pro		hat are b	submission) Yes No (date must be pre-application submission) peing submitted for approval:				
Has the d If Yes, ple 6. Disch Please pre	narge Of Condition ovide a full description and/or list of the materials/details the materials of the materials.	hat are b	submission) Yes No (date must be pre-application submission) peing submitted for approval:				
Has the d If Yes, ple 6. Disch Please pro Constitution 7. Part Are you s	ease state when the development was completed (DD/MN narge Of Condition ovide a full description and/or list of the materials/details to	hat are b	submission) Yes No (date must be pre-application submission) peing submitted for approval:				

8. Planning Application Requirements - Please read the following checklist to make sure yo information required will result in your application the Local Planning Authority has been submitted.	ou have sent all th	e information in so walid. It will not b	upport of your pro e considered vallo	oposal. Failure to I until all informat	submit all ion required by
The original and 3 copies of a completed and dated application form:	e original and 3 copies of other plans and drawings information necessary to describe the subject of the application:				
The correct fee:					
9. Declaration I/we hereby apply for planning permission/consent information. I/we confirm that, to the best of my/ou genuine opinions of the person(s) giving them. Signed - Applicant:	as described in t ir knowledge, an	his form and the a y facts stated are t	ccompanying pla rue and accurate a	ns/drawings and a and any opinions	additional given are the
Date (DD/MM/YYYY):					BUTTER
05/07/2021 (date cannot be pre	-application)				
Telephone numbers Country code: Fax number (optional): Email address (optional):	Extension number:	T. Agent C	ontact Details		Extension number:
I 2. Site Visit Can the site be seen from a public road, public footp	ath, bridleway or	other public land?	Yes	No	
the planning authority needs to make an appointmut a site visit, whom should they contact? (Please se	nent to carry	Agent	Applicant	Other (if di	fferent from the licant's details)
Other has been selected, please provide:		T-1-1		-34.14.4hh	wetails/
Contact name:		Talanhana.numl	sor		-
Luke McKeritt					
mail address					

