

FLANGER

For office use only
Application No. 3\2021 | 0890

Date received 31 | 812021

Fee paid £ Receipt No:

Council Offices, Church Walk, Clitheroe, Lancashire. BB7 2F/A

ATTENTION OF

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				
Title:	MR First name: VINCENT			
Last name:	MURRAY			
Company (optional):				
Unit:	House number: 6 House suffix:			
House name:				
Address 1:	DOWNHAM ROAD			
Address 2:	CHATBURN			
Address 3:				
Town:	CLITHEROF			
County:	LANCASHIRE			
Country:	ENGLAND			
Postcode:	387 4AU			

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			e-application Advice			
Please provide the full postal address of the application site.			sistance or prior advice been sought from the local rity about this application?			
Unit:	House humber: 6 House suffix:		rity about this application? Yes No			
House name:	named. Same		please complete the following information about the advice ere given. (This will help the authority to deal with this			
Address 1:	Address 1: DOWNHAM ROAD		ation more efficiently). tick if the full contact details are not			
Address 2:	Address 2: CHATBURN		n, and then complete as much as possible:			
Address 3:		Office	er name:			
Town:	CITHEROE		ence:			
County:	inty: LANCASHIRE					
Postcode (optional): 887 4AU Description of location or a grid reference.		(must	Date (DD/MM/YYYY): be pre-application submission)			
(must be co	ompleted if postcode is not known):	Detai	s of pre-application advice received?			
Easting:	Northing:					
Description						
STON						
House	E IN CHATBURN VILLAGE					
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: Denocition of the Majority of the Rear Outbuildings And the Refulbisment of Part to Engage of Studies Studi						
that is lefter it weeks 2 town to						
Reference n	number: 3/2021/0388 Date of decision:	17/0	(Date must be pre-application submission) (DD/MM/YYYY)			
	e the condition number(s) to which this application relate					
1. C	ONDITION 3: SPECIELEATION AND/OR	6.				
	AMPLES OF EXTERNAL SURFACES.	7.				
3.		8.				
4.		9.				
5.		10.				
Has the dev	velopment 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?						
If Yes, please state when the development was completed (DD/MM/YYYY): **N A (date must be pre-application submission)						
	rge Of Condition					
	ide a full description and/or list of the materials/details th		eing submitted for approval:			
STONE USED IN SURROUND TO OPENINGS + PLINTH.						
Roof S	SLATE: RENOVA + TIMBER ET	rc.	DN SITE			
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:						

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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 coples 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:	□N/A.	(PLANS / DRAWINGS ALREADY APPROVED BY) RUBC				
9. Declaration I/we hereby apply for planning permission information. I/we confirm that, to the best genuine opinions of the person(s) giving	t of my/our k	s described in th knowledge, any	his form and the accompanying plans/drawings and additional y facts stated are true and accurate and any opinions given are the			
			Or signed - Agent:			
		pplication)				
1			11. Agent Contact Details			
			Telephone numbers			
		Extension	Extension			
-		number:	Country code: National number: number:			
<u> </u>			Country code: Mobile number (optional):			
<u>c</u>		, 1	Country code: Fax number (optional):			
			X			
E			optional):			
Ī.						
			? Yes No			
f Ol			Applicant Other (If different from the agent/applicant's details)			
f						
<u>C</u>			ber:			
			n la			

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