



## Application for approval of details reserved by condition


Council	Mid Suffolk District Council
Application is for	New dwellings and all other types of development
<b>Applicant Name and Address</b>	
Title	Mr
First name	Stephen
Last name	Hodson
Company	
Property name/number	Rishagles Hall
Address line 1	Eye Road
Address line 2	Rishangles
Town/Village	Eye
County	Suffolk
Country	
Postcode	IP23 7LA
Is an agent being used	No
Do you believe you are exempt from the application fee?	No, standard fees will apply
<b>Site Address Details</b>	
Property name/number	Rishagles Hall
Address line 1	Eye Road
Address line 2	Rishangles
Town/Village	Eye
County	Suffolk
Postcode	IP23 7LA
Site easting	
Site northing	



Location description				
<b>Pre-application Advice</b>				
Has assistance or prior advice been sought from the local authority about this application?	No			
Officer name				
Pre-application reference				
Date				
Details of pre-application advice received				
<b>Description Of Your Proposal</b>				
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	Erection on No 1 Dwelling			
Reference number	DC/20/03722			
Date of decision	13/11/2020			
Please state the condition number(s) to which the application relates	<table border="1"> <thead> <tr> <th>Condition Number</th> </tr> </thead> <tbody> <tr> <td>8</td> </tr> <tr> <td>3</td> </tr> </tbody> </table>	Condition Number	8	3
Condition Number				
8				
3				
Has the development already started?	No			
If Yes, please state when the development started				
Has the development been completed?	No			
If Yes, please state when the development was completed				
<b>Discharge Of Condition</b>				
Please provide a full description and/or list of the materials/details that are being submitted for approval	Condition 8 - Please see Outside Lighting Plan.pdf Condition 3 - Please see Landscape plan submission to planning Box House IP21 5DN.pdf and Detailed landscape plan IP21 5DN.pdf			
<b>Part Discharge Of Condition(s)</b>				
Are you seeking to discharge only part of a condition?	No			



If Yes, please indicate which part of the condition your application relates to	
<b>Declaration</b>	
<input checked="" type="checkbox"/> 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	[REDACTED]
Or signed - Agent	
Date	03/04/2021
<b>Applicant Contact Details</b>	
Telephone number	[REDACTED]
Extension number	
Mobile telephone number	[REDACTED]
Fax number	
Email address	[REDACTED]
<b>Agent Contact Details</b>	
Telephone number	
Extension number	
Mobile telephone number	
Fax number	
Email address	
<b>Site Visit</b>	
Can the site be seen from a public road, public footpath, bridleway or other public land?	Yes
If the planning authority needs to make an appointment to carry out a site visit, whom should they contact?	Applicant
Contact name	
Telephone number	
Email address	
<b>Payment</b>	

Are you the applicant or are you an agent working on behalf of the applicant?	
Who will pay for this application?	
Email address (this is the address the payment receipt will be sent to)	
Payment Total	
Payment Receipt Number	
Date & Time	