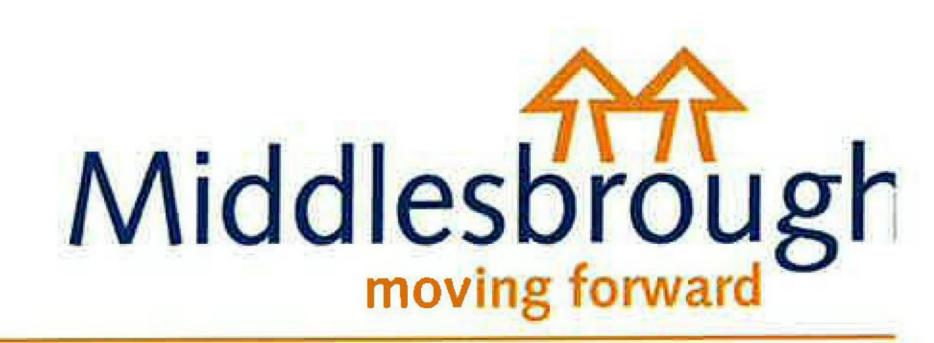
## Middlesbrough Council

www.middlesbrough.gov.uk

Planning, Housing and Regeneration Programmes
PO Box 99A, Town Hall, Middlesbrough TS1 2QQ
Tel: (01642) 729377 Fax: (01642) 729971
--mail: developmentcontrol@middlesbrough.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

## 'ublication of applications on planning authority websites

lease note that the information provided on this application form and in supporting documents may be published on the luthority's website. If you require any further darification, please contact the Authority's planning department.

lease complete using block capitals and black ink.

is important that you read the accompanying guidance notes as incorrect completion will delay the processing of your application.

1. Applic	ant Name and Address	][2. /
Title:	MR First name: Peter	Title
Last name:	Bland	Last
Company (optional):	Middlesbrough College	Con (opt
Unit:	House House number:	
House name:		Hou
Address 1:	Middlesbrough College	Add
Address 2:	Dock Street	Add
Address 3:		Add
Town:	Middlesbrough	Tow
County:		Cou
Country:		Cou
Postcode:	TS2 1AD	Post

z. Agent	Name and Address						
Title:	First name: Afshan						
Last name:	McKay						
Company (optional):	Bond Bryan Architects						
Unit:	House number: House suffix:						
House name:							
Address 1:	Bond Bryan Architects						
Address 2:	The Church Studio						
Address 3:	Springvale Road						
Town:	Sheffield						
County:							
Country:							
Postcode:	S10 1LP						

Agent Name and Address

3. Site	e Address	Details			1	4. P	re-applica	ation Advice		
Please	provide the fu	ıll postal addr	ess of the ap	plication site	).			prior advice been sought f	rom the local	
Unit:		House number:		House suffix:		autho	rity about th	nisapplication?	X Yes	No
House name:		I Mulliber, I		J Sullix.			860 <del>1</del> H	plete the following inform This will help the authority		
Addres	s1:						cation more			
Addres	s2:							ull contact details are not complete as much as poss	ble:	
Addres	s3:					Office	er name:			
Town:						Pet	er Wilson			
County							ence:			
County	<u></u>					Ema		May 2021 - 20042 MC T		
(option	al):					Date (DD/MM/YYYY): 19/05/2021 (must be pre-application submission)				
Descrip (must b	tion of location tipe completed	on or a grid re if postcode is	»ference. «not known):					olication advice received?		
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	•	and a student		iii ig classiool	1115, 11					
F Doc	orintian C	f Your Pro								
Please	provide a des		• e approved d	evelopment	as shown	on the	decision lett	er, including the application	on reference nui	mber
		story educat		ng (D1) with	n associa	ted lar	ndscaping			
	50									
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Pleases	state the con	dition numbe	r(s) to which	this applicati	ion relates	3;				
1,	Planning (	Condition 3				6.				
2.						7				
3.						8.				
4.						9.				
5.						10.				
Hasthe	developmer	nt already star	ted?				X Yes	No		
If Yes, p	olease state w	hen the deve	lopment star	ted (DD/MM	/ <b>Y</b> Y <b>Y</b> Y):		Feb 202	(date must be presubmission)	-application	
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6. Disc	charge Of (	Condition								
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nts-Checklist re you have sent all the ation being deemed inv ted.	information in support of your proposal. Failure to submidalid. It will not be considered valid until all information re	it all equired by			
The cor in	original and 3 copies of other plans and drawings formation necessary to describe the subject of the application:				
nsent as described in th ny/our knowledge, any n.	facts stated are true and accurate and any opinions given	ional are the			
	Or signed - Agent:				
	Afshan McKay				
	for and on behalf of Bond Bryan Architects				
oe pre-application)		<u> </u>			
	11. Agent Contact Details				
Extension number:	Telephone numbers  Country code: National number:  0114	Extension number:			
	Email address (optional).				
c footpath, bridleway o	r other public land? X Yes No				
pointment to carry ease select only one)	Agent Applicant Other (if different agent/applican	ent from the nt's details)			
	Telephone number:				
	re you have sent all the stion being deemed invited.  The cor in sent as described in the hy/our knowledge, any of the pre-application.  Extension number:	re you have sent all the information in support of your proposal. Failure to submitted being deemed invalid. It will not be considered valid until all information reced.  The original and 3 copies of other plans and drawings or information necessary to describe the subject of the application or information necessary to describe the subject of the application or information necessary to describe the subject of the application or information necessary to describe the subject of the application or information necessary to describe the subject of the application or information necessary to describe the subject of the application or information necessary to describe the subject of the application or information necessary to describe the subject of the application or information necessary to describe the subject of the application or information necessary to describe the subject of the application or information necessary to describe the subject of the application or information necessary to describe the subject of the application or information necessary to describe the subject of the application necessary to describe the subject of			

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