




Application for approval of details reserved by condition

Council	Mid Suffolk District Council
Application is for	New dwellings and all other types of development
Applicant Name and Address	
Title	Mr
First name	Alan
Last name	Sherwood
Company	Crown Gate Homes
Property name/number	Westside House
Address line 1	Westside Centre
Address line 2	London Road
Town/Village	Stanway, Colchester
County	Essex
Country	UK
Postcode	CO3 8PH
Is an agent being used	Yes
Do you believe you are exempt from the application fee?	No, standard fees will apply
Agent Name and Address	
Title	Mr
First name	Alan
Last name	Sherwood
Company	Crown Gate Homes
Property name/number	Westside House
Address line 1	Westside Centre
Address line 2	London Road
Town/Village	Stanway, Colchester

County	Essex
Country	UK
Postcode	CO3 8PH
Site Address Details	
Property name/number	Westside House
Address line 1	Westside Centre
Address line 2	London Road
Town/Village	Stanway, Colchester
County	Essex
Postcode	CO3 8PH
Site easting	
Site northing	
Location description	
Pre-application Advice	
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	
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	Erection of 4no detached single storey dwellings with associated parking facilities, private access drive and landscaping
Reference number	DC/20/05234
Date of decision	18/01/2021

Please state the condition number(s) to which the application relates	Condition Number	
	6	
	8	
	10	
	13	
	14	
15		
16		
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		
Discharge Of Condition		
Please provide a full description and/or list of the materials/details that are being submitted for approval	See attached schedule	
Part Discharge Of Condition(s)		
Are you seeking to discharge only part of a condition?	No	
If Yes, please indicate which part of the condition your application relates to		
Declaration		
<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		
Or signed - Agent		
Date	26/07/2021	
Applicant Contact Details		
Telephone number	01206 210398	
Extension number		
Mobile telephone number		

Fax number	
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Email address	
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Agent Contact Details

Telephone number	
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Extension number	
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Mobile telephone number	
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Fax number	
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Email address	
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Site Visit

Can the site be seen from a public road, public footpath, bridleway or other public land?	Yes
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If the planning authority needs to make an appointment to carry out a site visit, whom should they contact?	Agent (if one is being used)
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Contact name	
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Telephone number	
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Email address	
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Payment

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