



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.

Applicant Name and Address				
Title:	MQS First name: SARAH			
Last name:	PYLLEN			
Company (optional):	•			
Unit:	House number: House suffix:			
House name:	THE OLD RECTORY			
Address 1:	BADLESMERE LEES			
Address 2:	BADLESMERE			
Address 3:				
Town:	FAVERSHAM			
County:	KENT			
Country:	EMGLAND			
Postcode:	ME/3 OHX			

2. Agent Name and Address				
Title:	MQ. First name: Jo4x/			
Last name:	HARMER			
Company (optional):	JAD ARCHITECTURE UK LAD			
Unit:	House number: House suffix:			
House name:	TOWER FARM HOUSE			
Address 1:	FAVERSHAM ROAD			
Address 2:	BOUGHTON ALUPH			
Address 3:				
Town:	ASHFORD			
County:	KENT.			
Country:	ENGLAND			
Postcode:	TAP25 447.			

	dress Details		e-application Advice		
Please provide the full postal address of the application site. House House			Has assistance or prior advice been sought from the local authority about this application?		
Unit:	number: suffix:				
House name: THE OLD RELTICALY			If Yes, please complete the following information about the advice you were given. (This will help the authority to deal with this		
Address 1: BADLESMERE LEES		application more efficiently). Please tick if the full contact details are not			
Address 2: BASCESMERE			known, and then complete as much as possible:		
Address 3:		Officer	r name:		
Town:	Town: FAVERSHAM.		Reference:		
County: LENT.		10.0.0			
Postcode (optional): MEI3 ONX Description of location or a grid reference.			Date (DD/MM/YYYY): (must be pre-application submission) Details of pre-application advice received?		
and the same of th	npleted if postcode is not known):	Details	s of pre-application advice received?		
Easting: Description:	Northing:				
Description.					
Please provid	tion Of Your Proposal de a description of the approved development as shown decision in the sections below: CONVERSION OF EXISTING CON ANNEX ACCOMODATION. Ami		decision letter, including the application reference number		
	ANNEX ACCOMODATION. AMI 27/08/2021	ENDEZ	D PLANS RECEIVED		
Reference nu	mber: 21/503874/Full Date of decision:		(Date must be pre-application submission) (DD/MM/YYYY)		
	the condition number(s) to which this application relates				
	ONDITION 3 - WINDOW JOINTERY DETAILS	6.			
2.	CONDITION 4 - FRAME DETAIL TO WALL	7.			
3.		8.			
4.		9.			
5.		10.			
Has the deve	elopment already started?		Yes No		
If Yes, please	e state when the development started (DD/MM/YYYY):		(date must be pre-application submission)		
Has the deve	elopment been completed?		Yes No		
If Yes, please state when the development was completed (DD/MM/YYYY): (date must be pre-application submission)					
6. Dischar	ge Of Condition				
Please provid	de a full description and/or list of the materials/details th		eing submitted for approval:		
	ATTACHED DRAWNGS				
7. Part Dis	scharge 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:					

8. Planning Application Requirements - Checklist Please read the following checklist to make sure you have sent all the information required will result in your application being deemed in the Local Planning Authority has been submitted.	
The original and 3 copies of a completed and dated application form:	original and 3 copies of other plans and drawings aformation necessary to describe the subject of the application:
The correct fee:	
9. Declaration I/we hereby apply for planning permission/consent as described in the information. I/we confirm that, to the best of my/our knowledge, any genuine opinions of the person(s) giving them.	his form and the accompanying plans/drawings and additional facts stated are true and accurate and any opinions given are the
Signed - Applicant:	Or signed - A
Date (DD/MM/YYYY):	
(date cannot be pre-application)	
Telephone numbers Country code: National number: Extension number: Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional):	Telephone numbers Country code: National number: 0/233 Country code: Mobile number (optional): 0/973 507588 Country code: Fax number (optional): Email address (optional): #kestudio@jpalarch.co.uk
12. Site Visit Can the site be seen from a public road, public footpath, bridleway of lift the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (Please select only one) If Other has been selected, please provide:	r other public land?
Contact name:	Telephone number:

Email address: