

Application for approval of reserved matters following outline approval. Town and Country Planning (Development Management Procedure) (England) Order 2015

Privacy Notice

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Please be aware that once you have downloaded this form, Planning Portal will have no access to the form or the data you enter into it. Any subsequent use of this form is solely at your discretion, including the choice to complete and submit it to the Local Planning Authority in agreement with the declaration section.

Upon receipt of this form and any supporting information, it is the responsibility of the Local Planning Authority to inform you of its obligations in regards to the processing of your application. Please refer to its website for further information on any legal, regulatory and commercial requirements relating to information security and data protection of the information you have provided.

Local Planning Authority details:



Planning Services

Council Offices, Weeley, Essex, CO16 9AJ

Email: planning.services@tendringdc.gov.uk

Website: www.tendringdc.gov.uk Telephone: 01255 686161

Publication of applications on planning authority websites

Information provided on this form and in supporting documents may be published on the authority's planning register and website.

Please ensure that the information you submit is accurate and correct and does not include personal or sensitive information. If you require any further clarification, please contact the Local Planning Authority directly.

If printed, please complete using block capitals and black ink.

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

1. Applic	cant Name and Address
Title:	First name:
Last name:	C. Rowland and R. Murfitt
Company (optional):	
Unit:	House number: House suffix:
House name:	
Address 1:	59 Harwich Road
Address 2:	Lawford
Address 3:	
Town:	
County:	Essex
Country:	
Postcode:	CO11 2LP

2. Agent	Name and Address			
Title:	First name: M			
Last name:	Foley			
Company (optional):	Stanfords			
Unit:	House number: House suffix:			
House name:	The Livestock Market			
Address 1:	Wyncolls Road			
Address 2:				
Address 3:				
Town:	Colchester			
County:	Essex			
Country:				
Postcode:	CO4 9HU			

Version 2018 1

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3. Site Address Details			4. Pre-applica		am the level
Please provide the full postal	200		authority about th	prior advice been sought from his application?	* <u></u> ;
Unit:	1900	190	•		☐ Yes ✓ No
House name:			you were given. (7	plete the following informa This will help the authority t	
Address 1: Land adj 59 Ha	rwich Road		application more	efficiently). ull contact details are not	
Address 2: Lawford				complete as much as possit	ble:
Address 3:			Officer name:		
Town:					
County: Essex			Reference:		Î
Postcode CO11 2LP					
(optional): Description of location or a g	grid reference.	- 11,		Date (DD/MM/YYYY): lication submission)	
(must be completed if postcode is not known):				olication advice received?	3
Easting:	Northing:				
Description:					
			(L		
			_		
5. Development Descr	ription		30		
5. Development Descr Please indicate which reserve	**************************************	o be determined	under this applica	tion:	2
	**************************************	o be determined	나 하는 문자가 있는 아이들은 아이트를 보고 있다.	tion:	Scale
Please indicate which reserve	ed matter(s) you require to Appearance	Landsca	caping	Layout	Scale
Please indicate which reserve	ed matter(s) you require to Appearance	Landsca	caping	Layout	Scale
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6. Authority Employee / Member It is an important principle of decision-making that the process is open and transparent. For the purposes of this question "relating to"					
means related, by birth or otherwise, closely enough that a fair-n	ninded and informed o	observer, having considered the facts, would			
conclude that there was bias on the part of the decision-maker in	* <u></u>				
Do any of the following statements apply to you and/or agent?	With respect to the authority, I am: (a) a member of staff				
		(b) an elected member			
		(c) related to a member of staff (d) related to an elected member			
If Yes, please provide details of their name, role and how you are related to them.					
7. Supporting Information Please provide the following information:					
List of all relevant drawings, including reference numbers, that wof the original decision:	List of drawing numbers submitted with this application for approval:				
Drawing	Reference Number	Drawing Number			
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		8			
		*			
		*			
Reasons for any changes to the original drawings (if applicable):					
The about of any orange of the original drawings (if approache).					
New access					

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B. Planning Application Requirements - Checklist Please read the following checklist to make sure you have sent all th information required will result in your application being deemed in the Local Planning Authority (LPA) has been submitted.	e information in support of your proposal. Failure to submit all valid. It will not be considered valid until all information required by
The original and 3 copies* of a completed and dated application	The correct fee:
The original and 3 copies* of other plans and drawings or	The original and 3 copies* of such plans and drawings as are necessary to deal with the matters reserved in the outline planning permission.
National legislation specifies that the applicant must provide the or otal of four copies), unless the application is submitted electronicall LPAs may also accept supporting documents in electronic format by You can check your LPA's website for information or contact their pl	riginal plus three copies of the form and supporting documents (a ly or, the LPA indicate that a smaller number of copies is required. post (for example, on a CD, DVD or USB memory stick).
9. Declaration /we hereby apply for planning permission/consent as described in to a new properties of the person (s) giving them. Signed - Applicant:	this form and the accompanying plans/drawings and additional y facts stated are true and accurate and any opinions given are the Or signed - Agent:
Date (DD/MM/YYYY): 27.09.21 (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: Extension number: Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional):
12. Site Visit Can the site be seen from a public road, public footpath, bridleway of the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (Please select only one) of Other has been selected, please provide: Contact name:	or other public land? Yes No Agent Applicant Other (if different from the agent/applicant's details) Telephone number:
CONTROL HAIRE.	relephone number.

Em ail address: