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https://www.planningportal.co.uk/apply

Application for approval of details reserved by condition. Town and Country Planning Act 1990 Planning (Listed Buildings and Conservation Areas) Act 1990

Privacy Notice

his form is provided by Planning Portal and based on the requirements provided by Government for the sole purpose of submitting nformation to the Local Planning Authority in accordance with the legislation detailed on this form and 'The Town and Country Planning Development Management Procedure) (England) Order 2015 (as amended).

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 greement with the declaration section.

Jpon receipt of this form and any supporting information, it is the responsibility of the Local Planning Authority to inform you of its bligations 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.

ocal Planning Authority details:



For O	fficial Use Only
Receipt	
Date	
Amount	

Sevenoaks District Council Council Offices Argyle Road Sevenoaks Kent **TN13 1HG**

Tel: 01732 227000

Publication of applications on planning authority websites nformation provided on this form and in supporting documents may be published on the authority's planning register and vebsite.

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

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

TNIB IAG

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

. Applicant Name and Address	2. Agent Name and Address ~~~~~		
itle: MR First name: COLIN	Title: First name:		
ast name: Hook	Last name:		
optional):	Company (optional):		
Init: House number: House suffix:	Unit: House number: House suffix:		
louse iame:	House name:		
Address 1: GRANGE CLOSE	Address 1:		
ddress 2:	Address 2:		
ddress 3:	Address 3: SEVENCA (S / ISTRICT COUNCIL		
OWN: WESTERHAH	Town: REC'D 2 6 APR 2022		
ounty: KENT	County: COMMUNITY & PLANNING SERVICES		
ountry-	Country		

Please prov Unit: House name: Address 1: Address 2: Address 3: Town: County: Postcode (optional):	WESTERHAM	Has as author lf Yes, you wapplicate Reference Reference	e-application Advice sistance or prior advice been sought from the local rity about this application? Yes No please complete the following information about the advice ere given. (This will help the authority to deal with this ation more efficiently). tick if the full contact details are not n, and then complete as much as possible: The name: Chy Martin Para 20/003 40 Date (DD/MM/YYYY): be pre-application submission) 24(09/2020	
(must be c Easting: Descriptio	completed if postcode is not known): Northing:		TENTIALLY COMPLY	
Please pro and date o	number: 21/04026/FUL Date of decision:	m H		
1	te the condition number(s) to which this application relates			
1,		6.	SOFT LANDSCAPING SCREENING	
2.		7.	PROTECT MATURE TREE	
3.		8.	TRANSPORT HAWAGEMENT PLAN	
4.		9.		
5. E	LECTRIC VEHICLE CHARGING POINT	10.		
Has the de	evelopment already started?		Yes No	
If Yes, plea	ase state when the development started (DD/MM/YYYY):	ĺ	(date must be pre-application submission)	
Has the de	evelopment been completed?		Yes No	
If Yes, plea	ase state when the development was completed (DD/MM/	YYYY): [(date must be pre-application submission)	
	arge Of Condition vide a full description and/or list of the materials/details th	iat are be	eing submitted for approval:	
ちどど	ATTACHED		SEVENGATO IL STENCE COUNCIL	
7. Part D	ischarge Of Condition(s)		RECTU 2 5 APR 2022	
Are you seeking to discharge only part of a condition? If Yes, please indicate which part of the condition your application relates to:				

the Lo Planning Authority (LPA) has be	en submitted.					
The original and 3 copies* of a completed and dated application form:	The or in	original and 3 copies* of other plans and drawings formation necessary to describe the subject of the application:				
The correct fee:	PLEASE PHONE	FOR CREDIT CARD 07976 668946				
*National legislation specifies that the applicant must provide the original plus three copies of the form and supporting documents (a total of four copies), unless the application is submitted electronically or, the LPA indicate that a smaller number of copies is required. LPAs may also accept supporting documents in electronic format by post (for example, on a CD, DVD or USB memory stick). You can check your LPA's website for information or contact their planning department to discuss these options.						
9. Declaration 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 (DD/MM/YYYY): 24 /64 /2022 (date can	not be pre-application)					
10. Applicant Contact Details		11. Agent Contact Details				
Telephone numbers	_	Telephone numbers				
Country code: National number: Country code: Mobile number (optional): Country code: Ax number (optional):	Extension number:	Country code: National number: Country code: Mobile number (optional): Country code: Fax number (optional): Extension number: Country code: Mobile number (optional): Email address (optional):				
12. Site Visit						
Can the site be seen from a public road, public the planning authority needs to make an out a site visit, whom should they contact? If Other has been selected, please provide: Contact name:	appointment to carry (Please select only one)	other public land? Yes No Agent Applicant Other (if different from the agent/applicant's details) Telephone number:				
Email address:						

Please read the following checklist to make sure you have sent all the information in support of your proposal. Failure to submit all

information required will result in your application being deemed invalid. It will not be considered valid until all information required by

8. Planning Application Requirements - Checklist

SEVENCA GUISTRIOT COUNCIL

REC'D 26 APR 2022

COMMUNITY 2 PLANG SERVICES