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## 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 information 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).

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Jpon 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.

## ocal Planning Authority details:



For Official 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

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.

printed, please complete using block capitals and black ink.

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

Para Para Para Para Para Para Para Para		
. Applic	ant Name and Address	2. Agent Name and Address いっいそ
itle:	MR First name: COLIN	Title: First name:
ast name:	Hook	Last name:
company optional):		Company (optional):
Init:	House number: \ House suffix:	Unit: House number: House suffix:
louse ame:		House name:
ddress 1:	GRANGE CLOSE	Address 1:
ddress 2:		Address 2:
ddress 3:		Address 3: SEVENCA AS ASTRICT COUNCIL
own:	WESTERHAH	Town: REC'D 2 6 APR 2022
ounty:	KENT	County: COMMUNITY & PLAMNING SERVICES
ountry:		Country:

3. Site Address Details Please provide the full postal address of the application site.			e-application Advice sistance or prior advice been sought from the local			
Unit:	House House	autho	rity about this application? Yes No			
House name:	number: suffix:		please complete the following information about the advice ere given. (This will help the authority to deal with this			
Address	1: GRANGE CLOSE		ation more efficiently). tick if the full contact details are not			
Address	2:	know	n, and then complete as much as possible:			
Address	3:	Office	r name:			
Town:	WESTERHAM	Refer	GUY MARTIN			
County:	KENT		PA/20/00340			
Postcode (optiona	THIS IAG		Date (DD/MM/YYYY):  he pre-application submission)  24-(09/2020			
Descript	ion of location or a grid reference. completed if postcode is not known):	,	be pre-application submission)  s of pre-application advice received?			
Easting:	Northing:		TENTIALLY COMPLY			
Descript						
	HOUSE NEXT TO GRANGE CLOSE					
DEMOLISH CARAGE AND BUILD A NEW HOUSE						
	e number: 21/04026/FUL Date of decision: ate the condition number(s) to which this application relates		(Date must be pre-application submission) (DD/MM/YYYY)			
1,	(*)	6.	SOFT LANDSCAPING SCREENING			
2.		7.	PROTECT MATURE TREE			
3.		8.	TRANSPORT MANAGEMENT PLAN			
4.		9.				
5.	ELECTRIC VEHICLE CHARGING POINT	10.				
Has the	development already started?		Yes No			
If Yes, pl	ease state when the development started (DD/MM/YYYY):	[	(date must be pre-application submission)			
Has the o	development been completed?		Yes No			
If Yes, pl	If Yes, please state when the development was completed (DD/MM/YYYY): (date must be pre-application submission)					
	harge Of Condition rovide a full description and/or list of the materials/details th	at are be	eing submitted for approval:			
35	E ATTACHED		SEVENGATO E STRICT COUNCIL			
7 D	RECTU 7 6 APR 2022					
Y. Part Discharge 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:						
res, piease maioate which part of the condition your application relates to:						

Information required will result in your application being deemed invalid. It will not be considered valid until all information required by the Lo Planning Authority (LPA) has been 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.							
Declaration  /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.  Or signed - Applicant:							
Date (DD/MM/YYYY): 24 /64 /2022 (date can	not be pre-application)						
10. Applicant Contact Details Telephone numbers		11. Agent Contact Details					
Country code: National number:  Country code: Mobile number (optional)	Extension number:	Telephone numbers  Country code: National number:  Country code: Mobile number (optional):  Country code: Fax number (optional):  Email address (optional):					
Country code: National number:	ublic footpath, bridleway or n appointment to carry ? (Please select only one)	Country code: National number:  Country code: Mobile number (optional):  Country code: Fax number (optional):  Email address (optional):					
Country code: National number:  Country code: Mobile number (optional number)  Can the site be seen from a public road, put the planning authority needs to make an out a site visit, whom should they contact of Other has been selected, please provide	ublic footpath, bridleway or n appointment to carry ? (Please select only one)	Country code: National number: number:  Country code: Mobile number (optional):  Country code: Fax number (optional):  Email address (optional):  Other public land? Yes No  Agent Applicant Other (if different from the agent/applicant's details)					

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

8. Planning Application Requirements - Checklist

