



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

rivacy 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).

'lease 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. An ubsequent 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.

Ipon 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 ommercial requirements relating to information security and data protection of the information you have provided.

.ocal Planning Authority details:



Trinity Road, Cirencester, Glos. GL7 1PX
Tel: 01285 623000 Fax: 01285 623905
Email: planning@cotswold.gov.uk .www.cotswold.gov.uk



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

vebsite.

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

printed, please complete using block capitals and black ink.

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
Title: MR First name: DOMINIC	Title: First name:
Last name: Cocu ~ S	Last name: MAUK
Company (optional):	Company (optional): TYACK ARCHITECTS GO
Unit: House number: House suffix:	Unit: House number: House suffix:
House hame: AccesTRA Park House	House name: THE MANN INSTITUTE
Address 1: AXESTASP	Address 1: OX GRD STREET
Address 2: MOLETON IN MACY	Address 2: MOLETON IN MARSH
Address 3:	Address 3: Gus
Town:	Town:
County:	County: GLS6 OLA
Country:	Country:
Postcode: GL56 OYN	Postcode:

3. Site Address Details	4. Pre-application Advice
Please provide the full postal address of the application site.	Has assistance or prior advice been sought from the local authority about this application?
Unit: House number: House suffix:	authority about this application? Yes No
House name: ADLESTROP PARK HOUSE	If Yes, please complete the following information about the advice you were given. (This will help the authority to deal with this
Address 1: ADLESTEOP	application more efficiently). Please tick if the full contact details are not
Address 2:	known, and then complete as much as possible:
Address 3:	Officer name:
Town: MORETON-IN-MARSH	Reference:
County: GLOUCESTERSHIRE	Note: State of the
Postcode (optional): GL56 DYN	Date (DD/MM/YYYY):
Description of location or a grid reference. (must be completed if postcode is not known):	(must be pre-application submission) Details of pre-application advice received?
Easting: Northing:	
Description:	
5. Description Of Your Proposal	
Please provide a description of the approved development as show and date of decision in the sections below:	n on the decision letter, including the application reference number
AMENDMENTS TO APPLICATION	16/00632/FUL - New garden nom
,	
Reference number: 20/03250/Fuu Date of decision:	(Date must be pre-application submission) (DD/MM/YYYY)
Please state the condition number(s) to which this application relat	Jan
1. 3	6.
2.	7.
3.	8.
4.	9.
5.	10.
Has the development already started?	Yes No
If Yes, please state when the development started (DD/MM/YYYY):	O1/09/2021 (date must be pre-application submission)
Has the development been completed?	Yes No
If Yes, please state when the development was completed (DD/MN	(date must be pre-application submission)
6. Discharge Of Condition	
Please provide a full description and/or list of the materials/details	that are being submitted for approval:
Zinc Cladding for Road and well	17
7. 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:
THIS SAMPLE RELATED TO ROOF	ING MATERIALS & PARTOF THE
WALL MATERIANS	

the Local Planning Authority (LPA) has been the original and 3 copies* of a completed and dated application form:			considered valid until all information	bmit all n required by
	☐ The or in	original and 3 copie formation necessar	es* of other plans and drawings y to describe the subject of the app	lication:
The correct fee:				
*National legislation specifies that the app total of four copies), unless the application LPAs may also accept supporting docume You can check your LPA's website for infor	is submitted electronically nts in electronic format by	y or, the LPA indicat post (for example, c	te that a smaller number of copies is on a CD, DVD or USB memory stick).	
9. Declaration				
/we hereby apply for planning permission nformation. I/we confirm that, to the best genuine opinions of the person(s) giving t	of my/our knowledge, any	nis form and the acc facts stated are tru	companying plans/drawings and add e and accurate and any opinions giv	litional en are the
Signed - Applicant:		Or signed - Agent		
Date (DD/MM/YYYY):				
	not be pre-application)	ă		
10. Applicant Contact Details		11. Agent Co	ntact Details	
Telephone numbers		Telephone numb		
	Extension number:	Telephone numb	pers	Extension number:
Country code: National number:	Extension number:	Telephone numb	National number:	
	number:	Telephone numb	oers National number:	
Country code: National number:	number:	Telephone numb	National number:	
Country code: National number:	number:	Telephone numb Country code: + ++ Country code:	National number:	
Country code: Country code: Country code: Mobile number (optional):	number:	Telephone numb Country code: + ++ Country code: - ' Country code:	National number: National number: Nobile number (optional): Fax number (optional):	
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Country code: Country code: Mobile number (optional): Fax number (optional): Email address (optional):	ublic footpath, bridleway o	Telephone number Country code: + + + + Country code: Country code: Country code: Email address (o	National number: 1608 650490 Mobile number (optional): Fax number (optional): ptional):	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 road	ublic footpath, bridleway on appointment to carry ? (Please select only one)	Telephone number Country code: + + + Country code: Country code: Email address (or cother public land?	National number: National number: No 8 650490 Mobile number (optional): Fax number (optional): ptional): Yes Applicant Other (if difference agent/applice)	number:
Country code: Mobile number (option: Country code: Fax number (optional): Email address (optional): Ta. Site Visit Can the site be seen from a public road,	ublic footpath, bridleway on appointment to carry ? (Please select only one)	Telephone number Country code: + + + Country code: Country code: Email address (of the country code) Tother public land?	National number: National number: No 8 650490 Mobile number (optional): Fax number (optional): ptional): Yes Applicant Other (if difference agent/applice)	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 road	ublic footpath, bridleway on appointment to carry ? (Please select only one)	Telephone number Country code: + + + Country code: Country code: Email address (or cother public land?	National number: National number: No 8 650490 Mobile number (optional): Fax number (optional): ptional): Yes Applicant Other (if difference agent/applice)	number: