Durham County Council

Regeneration and Economic Development Planning Development County Hall Durham DH1 5UL



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.

1. Applicant Name and Address				
Title:	MR/MRS First name: JOHN & VIVIENNE MARY			
Last name:	BUSSEY			
Company (optional):	J & V M BUSSEY			
Unit:	House number: House suffix:			
House name:	CARRIAGE HOUSE			
Address 1:	16 FRONT STREET			
Address 2:	STAINDROP			
Address 3:				
Town:	DARLINGTON			
County:	DURHAM			
Country:	ENGLAND			
Postcode:	DL2 3NH			

2. Agent Name and Address				
Title:	First name:			
Last name:				
Company (optional):				
Unit:	House number: House suffix:			
House name:				
Address 1:				
Address 2:				
Address 3:				
Town:				
County:				
Country:				
Postcode:				

3. Site Address Details			Pre-application Advice		
Please provide the full postal address of the application site. House House			assistance or prior advice been sought from the local prity about this application?		
Unit:	number: suffix:	16.77			
House name:	EASTFIELD	If Yes, please complete the following information about the advice you were given. (This will help the authority to deal with this			
Address 1:	MICKLETON	application more efficiently). Please tick if the full contact details are not			
Address 2:	BARNARD CASTLE		n, and then complete as much as possible:		
Address 3:			er name: .L CONWAY		
Town:			rence:		
County:	DURHAM	DN	DM/19/01467 VOC		
Postcode (optional):	DL12 0LP	(may set	Date (DD/MM/YYYY): 17/01/23		
Description (must be co	of location or a grid reference. ompleted if postcode is not known):	'	t be pre-application submission) ils of pre-application advice received?		
Easting:	Northing:		DAM WILLIAMSON		
Description	:		OOD WINDOWS IILDING TO MOVE 1 METRE FOR VISION		
BARN C	CONVERSION				
)				
5. Description Of Your Proposal Please provide a description of the approved development as shown on the decision letter, including the application reference number and date of decision in the sections below: BARN CONVERSION - 3 STOREY DEPOSITED 15/11/22					
PLAN NO	O. BC/22/04936/IN DM/19/01467/VOC	ACCI	EPTED		
Deference	number: DM/19/01467/VOC Date of decision:	04/07	(Date must be pre-application		
Reference number: DM/19/01467/VOC Date of decision: 04/07/19 (Date must be pre-application submission) (DD/MM/YYYY) Please state the condition number(s) to which this application relates:					
1.	e the condition hamber(s) to which this application relate	6.			
2.		7.			
3. /		8.	/		
4.		9.			
5.		10.			
Has the dev	velopment already started?		// Yes No		
	ise state when the development started (DD/MM/YYYY):		23/09/19 (date must be pre-application submission)		
Has the dev	velopment been completed?	l	Yes / No		
	If Yes, please state when the development was completed (DD/MM/YYYY): (date must be pre-application submission)				
6 Discha	arge Of Condition				
	vide a full description and/or list of the materials/details the	hat are b	being submitted for approval:		
3 & 8					
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: Yes // No					

8. Planning Application Requirements - Checklist Please read the following checklist to make sure you have sent all t information required will result in your application being deemed in the Local Planning Authority has been submitted.	he information in support of your proposal. Failure to submit all nvalid. It will not be considered valid until all information required by		
The original and 3 copies of a completed and dated application form:	original and 3 copies of other plans and drawings formation necessary to describe the subject of the application:		
The correct fee:			
9. Declaration I/we hereby apply for planning permission/consent as described in information. I/we confirm that, to the best of my/our knowledge, any genuine opinions of the person(s) giving them.			
Signed - Applicant:	Or signed - Agent:		
JOHN BUSSEY			
Date (DD/MM/YYYY):			
17/02/23 (date cannot be pre-application)			
10. Applicant Contact Details	11. Agent Contact Details		
Telephone numbers	Telephone numbers		
Country code: National number: Extension number:	Country code: National number: Extension number:		
- TOTAL TOTA			
Country code: Mobile number (optional):	Country code: Mobile number (optional):		
Country code: Fax number (optional):	Country code: Fax number (optional):		
Email address (optional):	Email address (optional):		
12. Site Visit			
Can the site be seen from a public road, public footpath, bridleway	or other public land? / Yes No		
If the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (Please select only one)	Agent / Applicant Other (if different from the agent/applicant's details)		
If Other has been selected, please provide:	Telephone number		

JOHN BUSSEY

Email address: