



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

Privacy Notice

This 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).

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:

Durham County Council

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



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.

Applicant Name and Address		2. Agent Name and Address
Title:	MR First name: GRADEY	Title: MR First name: Scott
Last name:	FAIRBURN	Last name: THOMPSON
Company (optional):		Company (optional):
Unit:	House NO House suffix:	Unit: 3205 House number: House suffix:
House name:		House name:
Address 1:	FOWLER WYND	Address 1: MAYORAL WAY
Address 2:		Address 2: TEAM VALLEY TRADING ESTATE
Address 3:		Address 3:
Town:	DURHAM	Town: GATESHEAD
County:		County:
Country:		Country:
Postcode:	DHI 3EZ	Postcode: NEII ORT

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				
Unit: House suffix:	authority about this application?				
House name: AVENIVE 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: PARK HOUSE ROAD.	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: DURHAM					
County:	Reference:				
Postcode (optional): OHIZP	· Pote (DD/MMARCOS)				
Description of location or a grid reference.	Date (DD/MM/YYYY): (must be pre-application submission)				
(must be completed if postcode is not known): Easting: 429811 Northing: 539670	Details of pre-application advice received?				
Description:					
	1				
,					
5. Development Description					
g see the second of the second	d under this application:				
Please Indicate which reserved matter(s) you require to be determined					
Please Indicate which reserved matter(s) you require to be determined	scaping Layout Scale				
Please Indicate which reserved matter(s) you require to be determined Access Appearance Land	scaping Layout Scale				
Please Indicate which reserved matter(s) you require to be determined. Access Appearance Land Please provide a description of the approved development as shown	scaping Layout Scale on the decision letter:				
Please Indicate which reserved matter(s) you require to be determined. Access Appearance Aland Please provide a description of the approved development as shown NEW OWELLING	Scaping Layout Scale on the decision letter: OR 08 22 (date must be pre-application submission) (DD/MM/YYYY) e seeking consent. Please state if the outline planning application				
Please Indicate which reserved matter(s) you require to be determined. Access Appearance Appearance Please provide a description of the approved development as shown NEW OWELLING Reference number: OM 22 outline Date of decision: Please provide a description of the reserved matters for which you at was an environment impact assessment application and, if so, confir	Scaping Layout Scale on the decision letter: OR 08 22 (date must be pre-application submission) (DD/MM/YYYY) e seeking consent. Please state if the outline planning application				
Please Indicate which reserved matter(s) you require to be determined. Access Appearance Appearance Please provide a description of the approved development as shown NEW OWELLING Reference number: OM 22 outline Date of decision: Please provide a description of the reserved matters for which you at was an environment impact assessment application and, if so, confir	Scaping Layout Scale on the decision letter: OR 08 22 (date must be pre-application submission) (DD/MM/YYYY) e seeking consent. Please state if the outline planning application				
Please Indicate which reserved matter(s) you require to be determined. Access Appearance Appearance Please provide a description of the approved development as shown NEW OWELLING Reference number: OM 22 outline Date of decision: Please provide a description of the reserved matters for which you at was an environment impact assessment application and, if so, confir	Scaping Layout Scale on the decision letter: OR 08 22 (date must be pre-application submission) (DD/MM/YYYY) e seeking consent. Please state if the outline planning application				
Please Indicate which reserved matter(s) you require to be determined Access Appearance Appearance Access Please provide a description of the approved development as shown NEW OWELLING Reference number: OM 22 01/27 01/27 Date of decision: Please provide a description of the reserved matters for which you all was an environment impact assessment application and, if so, confirmant authority at that time.	Scale on the decision letter: O8 08 22 (date must be pre-application submission) (DD/MM/YYYY) e seeking consent. Please state if the outline planning application in that an environmental statement was submitted to the planning Yes No				
Please Indicate which reserved matter(s) you require to be determined. Access Appearance Aland Please provide a description of the approved development as shown NEW OWELLING Reference number: OW 22 OULTOW Date of decision: Please provide a description of the reserved matters for which you at was an environment impact assessment application and, if so, confirmant authority at that time. Has the development already started?	Scaping				

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 f conclude that there was blas on the part of the decision-makers.	air-minded and informed o	hserver having considered the facts would			
Do any of the following statements apply to you and/or age		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	u are related to them.				
7. Supporting Information					
Please provide the following information:					
List of all relevant drawings, including reference numbers, the original decision:	nat were approved as part	List of drawing numbers submitted with this application for approval:			
Drawing	Reference Number	Drawing Number			
LOCATION PLAN		PL-01 LOCATION PLAN			
		PL-62 PROPOSEID SITTE PLAN			
*.		PL-03 PROPOSED PLANS/ELE/SECTIONS			
		PL-04 PROPOSIED BOUNDARY TREATMENT			
		CHARACTER STATEMENT			
		CONSTRUCTION METHOD STARDMENT.			
Reasons for any changes to the original drawings (if applicab	le):				
•					
		σ			
	*				
•		•			

	8. Planning Application Requirements - Checklist					
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 the Local Planning Authority (LPA) has been submitted.						
The original and 3 copies* of a completed and dated application form:	The correct fee:					
The original and 3 copies* of other plans and drawings or information necessary to describe the subject of the application:	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 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 slaned - Agent:					
Date (DD/MM/YYYY):						
03 05 2023 (date cannot be pre-application)						
10. Applicant Contact Details	11. Agent Contact Details					
Telephone numbers	Telephone numbers					
Country code: New York Table 1	Extension					
Country code: National number: Extension number:						
Country code: National number: number:	Extension					
	Extension					
Country code: National number: number: Country code: Mobile riumber (optional):	Country code: National number: Extension number:					
Country code: National number: number:	Country code: National number: Extension number:					
Country code: National number: number: Country code: Mobile riumber (optional):	Country code: National number: Country code: National number: Country code: Wiobile number (optional):					
Country code: National number: number: Country code: Mobile riumber (optional):	Country code: National number: Country code: National number: Country code: Wiobile number (optional):					
Country code: Mobile number: number:	Country code: National number: Country code: Middle number (optional): Country code: Fax number (optional):					
Country code: National number: number; Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional):	Country code: National number: Country code: Middle number (optional): Country code: Fax number (optional):					
Country code: National number: number: Country code: Mobile riumber (optional): Country code: Fax number (optional): Email address (optional):	Country code: National number: Country code: Michael number (optional): Country code: Fax number (optional): Email address (optional):					
Country code: National number: 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	Country code: National number: Country code: Miobile number (optional): Country code: Fax number (optional): Email address (optional):					
Country code: National number: number: Country code: Mobile riumber (optional): Country code: Fax number (optional): Email address (optional):	Country code: National number: Country code: Millional number (optional): Country code: Fax number (optional): Email address (optional): Other public land? Yes No					
Country code: National number: 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	Country code: National number: Country code: Miconie number (optional): Country code: Fax number (optional): Email address (optional): Other public land?					
Country code: National number: number: Country code: Mobile riumber (optional): Country code: Fax number (optional): Email address (optional): Email address (optional): 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)	Country code: National number: Country code: Micolie number (optional): Country code: Fax number (optional): Email address (optional): Other public land? Yes No					