

If you would rather make this application online, you can do so on our website: 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

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:



Forest of Dean District Council Council Offices, High Street, Coleford, Glos. GL16 8HG Tel. No. 01594 810000

email: planning @fdean.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 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.

1. Applicant Name and Address					
Title:	Me	First name:	CHRISTOPHOR	Titl	
Last name:	ne: Faronam				
Company (optional):				Cor (op	
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Country:	UK	- 1		Cou	
Postcode:	GLIS	- GAE		Pos	

2. Agent	Name a	and Addr	ess		
Title:		First na	F		
Last name:					
Company (optional):					Contraction
Unit:		House number:		House suffix:	
House name:		1 .			, in
Address 1:					
Address 2:			Section 1		
Address3:		· · · · · · · · · · · · · · · · · · ·			
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Postcode:					

. Site Addre	ess Details	Has assistance or prior advice been sought from the local		
Please provide t	he full postal address of the application site.	Has assistance of prior advice been sought from the latter authority about this application?		
Unit:	House House suffix:	If Yes, please complete the following information about the advice		
House A	WHIRE, OUDERDAN HOUSE	you were given. (This will help the authority to deal with this		
Address 1:	midden Romo	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:	LAKONSY	Reference:		
County: G	rios			
Postcode (optional):	-LIEARE	Date (DD/MM/YYYY): (must be pre-application submission)		
Description of	location or a grid reference. bleted if postcode is not known):	Details of pre-application advice received?		
Easting:	Northing:			
Description:				
	- CAN - Promond			
Doom provid	ion Of Your Proposal e a description of the approved development	t as shown on the decision letter, including the application reference number		
and date of d	edson in the sections below.	THE DISTRIBUTION OF THE ASTROPAL		
Listin	balding Constat of oxi	ANNEXT / HOLDAYLET, ERRICHOF SHOTTOR.		
ALTER	ATIONS TO CRUTATE ACC	(Date must be pre-application		
Reference nu	mber: P1561/21/USC Date of c	decision: [[MARE L'Z] submission) (DD/MM/YYYY)		
	the condition number(s) to which this applica	ation relates: Acc Completions		
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2.	1 200 M. 4 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	7.		
3.		8.		
4.		9.		
5.		10.		
Hasthe dev	relopment already started?	Yes No		
	se state when the development started (DD/N	MM/YYYY): (date must be pre-application submission)		
	velopment been completed?	☐ Yes ☐ X\(\text{Vo}\)		
If Yes niea	se state when the development was complete	ed (DD/MM/YYYY): (date must be pre-application submission)		
	arge Of Condition vide a full description and/or list of the materi	als/details that are being submitted for approval:		
Sas pion	EMALL ALRADY A	religion and acknowledged by		
FE	DOC PLANNING			
7 Dort D	Discharge Of Condition(s)			
	discharge only part of a condition?	☐ Yes ☐ No		
If Yes, plea	see indicate which part of the condition your a	application relates to:		

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	e original and 3 copies* of other plans and drawings information necessary to describe the subject of the application:				
The correct fee:	, and the staylest of the application.				
*National legislation specifies that the applicant must provide the or total of four copies), unless the application is submitted electronical LPAs may also accept supporting documents in electronic format by You can check your LPA's website for information or contact their plants.	ry or, the LPA indicate that a smaller number of copies is required.				
9. Declaration					
I/we hereby apply for planning permission/consent as described in t information. I/we confirm that, to the best of my/our knowledge, any genuine opinions of the person(s) giving them	hisform and the accompanying plans/drawings and additional y facts stated are true and accurate and any opinions given are the				
garamo obilio 130/1116 Del Allia IIII del III					
	Or signed - Agent:				
(date cannot be pre-application)					
10. Applicant Contact Details	11. Agent Contact Details				
Telephone numbers	Telephone numbers				
Country code: + 44 Country code: Country code: Country code: Fax number (optional):	Country code: National number: Extension number: Country code: Mobile 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 if the planning authority needs to make an appointment to carry but a site visit, whom should they contact? (Hease select only one) if Other has been selected, please provide: Contact name: Between selected and please provide:	other public land? Yes No Applicant Other (if different from the agent/applicant's details)				