

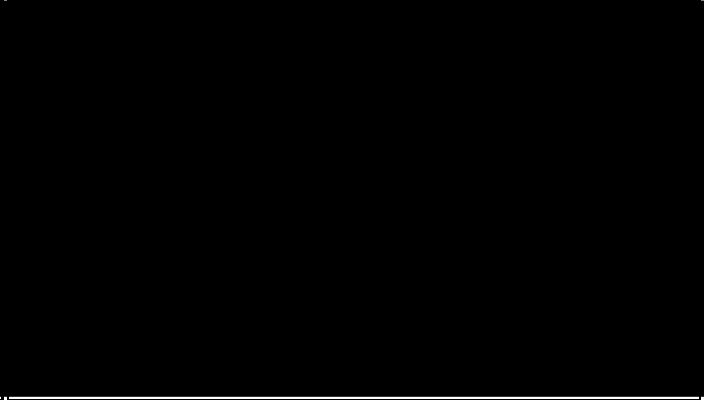


Application for approval of details reserved by condition

Council	Mid Suffolk District Council
Application is for	Householder applications (extensions/outbuildings/fences)
Applicant Name and Address	
Title	Mr
First name	Russell
Last name	Richards
Company	
Property name/number	Castle Farm
Address line 1	Felsham
Address line 2	
Town/Village	Bury St Edmunds
County	Suffolk
Country	UK
Postcode	IP30 0PT
Is an agent being used	No
Do you believe you are exempt from the application fee?	No, standard fees will apply
Site Address Details	
Property name/number	Castle Farm
Address line 1	Felsham
Address line 2	
Town/Village	Bury St Edmunds
County	Suffolk
Postcode	IP30 0PT
Site easting	
Site northing	

Location description			
Pre-application Advice			
Has assistance or prior advice been sought from the local authority about this application?	Yes		
Officer name	Mr Pinner		
Pre-application reference	DC/22/06033		
Date	13/01/2023		
Details of pre-application advice received	Preference for a 2m wall rather than 1m with willow panelling above-otherwise as proposed and applied for.		
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	Householder Application - Retention of existing entrance gate and brick piers to driveway entrance. New 2m high brick screen wall to driveway (North) boundary. Replacement of existing utility/boot room door and installation of new solar panels to outbuilding south facing roof slope.		
Reference number	e: DC/23/00676		
Date of decision	11/05/2023		
Please state the condition number(s) to which the application relates	<table border="1" style="width: 100%; text-align: center;"> <tr> <td>Condition Number</td> </tr> <tr> <td>3</td> </tr> </table>	Condition Number	3
Condition Number			
3			
Has the development already started?	No		
If Yes, please state when the development started			
Has the development been completed?	No		
If Yes, please state when the development was completed			
Discharge Of Condition			
Please provide a full description and/or list of the materials/details that are being submitted for approval	Great crested newt method statement		
Part Discharge Of Condition(s)			

Are you seeking to discharge only part of a condition?	No
If Yes, please indicate which part of the condition your application relates to	
Declaration	
<input checked="" type="checkbox"/> 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	Russell Richards
Or signed - Agent	
Date	05/07/2023
Applicant Contact Details	
Telephone number	
Extension number	
Mobile telephone number	
Fax number	
Email address	
Agent Contact Details	
Telephone number	
Extension number	
Mobile telephone number	
Fax number	
Email address	
Site Visit	
Can the site be seen from a public road. public footpath, bridleway or other public land?	Yes
If the planning authority needs to make an appointment to carry out a site visit, whom should they contact?	Applicant
Contact name	
Telephone number	
Email address	

Payment	
Are you the applicant or are you an agent working on behalf of the applicant?	
Who will pay for this application?	
Email address (this is the address the payment receipt will be sent to)	
Payment Total	
Payment Receipt Number	
Date & Time	