



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	Jonathan
Last name	Cunningham
Company	
Property name/number	Rockylls Hall
Address line 1	Shelland
Address line 2	
Town/Village	Stowmarket
County	Suffolk
Country	
Postcode	IP14 3JF
Is an agent being used	No
Do you believe you are exempt from the application fee?	This application is the first resubmission as per reason 1 above
Site Address Details	
Property name/number	Rockylls Hall
Address line 1	Shelland
Address line 2	
Town/Village	Stowmarket
County	Suffolk
Postcode	IP14 3JF
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	Thomas Pinner		
Pre-application reference			
Date			
Details of pre-application advice received	Discussions and email exchanges to confirm that we should use limewash		
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	Discharge of conditions Application for DC/21/00770		
Reference number	DC/23/02409		
Date of decision	25/08/2023		
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>6</td> </tr> </table>	Condition Number	6
Condition Number			
6			
Has the development already started?	Yes		
If Yes, please state when the development started	24/02/2023		
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	Ingilby Tallow Bound Lime Wash. Colour Lambswool		
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			

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



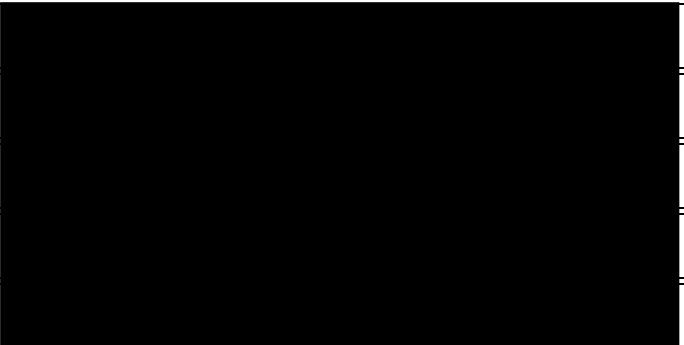
Or signed - Agent

Date

06/09/2023

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?

No

If the planning authority needs to make an appointment to carry out a site visit, whom should they contact?

Applicant

Contact name

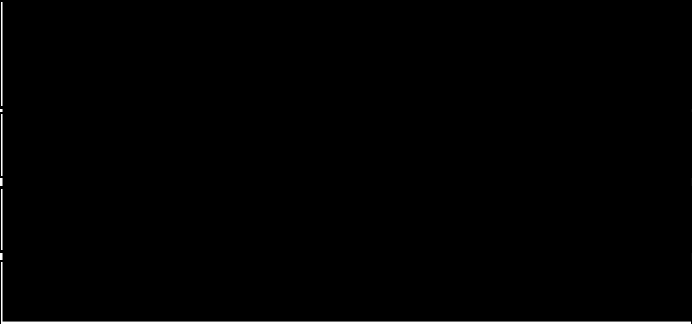
Telephone number

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	