

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:



## EAST CAMBRIDGESHIRE DISTRICT COUNCIL

The Grange, Nutholt Lane, Ely, Cambridgeshire, CB7 4EE
Telephone: 01353 665555
www.eastcambs.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. Applic	ant Name and Address	2. Agent Name and Address
Title:	Mas First name: CAROLINE	Title: MR First name: PETER
Last name:	HILLARY	Last name: JONASON
Company (optional):		Company (optional): CHURCUGATE PROPERTY
Unit:	House number: House suffix:	Unit: House number: House suffix:
House name:		House name: WESTFIELD FART
Address 1:	C/O AGENT	Address 1:
Address 2:		Address 2: NORTHFIELD ROAD.
Address 3:		Address 3: SOHAM
Town:		Town: ELY
County:		County: CAMBS
Country:		Country:
Postcode:		Postcode: CB7 5UF.

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 number: 9 House suffix:	authority about this application?
House name:	If Yes, please complete the following information about the advice you were given. (This will help the authority to deal with this
Address 1: 9 SCOTRED CLOSE	application more efficiently).  Please tick if the full contact details are not
Address 2: BURWELL	known, and then complete as much as possible:
Address 3:	Officer name:
Town:	Reference:
County: CAMBS	
Postcode (optional): CB25 OAL	Date (DD/MM/YYYY): (must be pre-application submission)
Description of location or a grid reference. (must be completed if postcode is not known):	Details of pre-application advice received?
Easting: Northing:	
Description:	
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:  23/00412/FUL: CHANGE OF USE	FROM EXISTING OUTPOUR TO
	OMMODATION - PART RETROSPECTIVE.
	THE BATTON THE TREE TO SPECIFICAL.
Reference number: 23/00412/Ful Date of decision:	(Date must be pre-application
Please state the condition number(s) to which this application relates	11/09/2023 submission) (DD/MM/YYYY) s:
1. No 7.	6.
2.	7.
3.	8.
4.	9.
5.	10.
Has the development already started?	✓ Yes  No
If Yes, please state when the development started (DD/MM/YYYY):	04 / 04 /2023 (date must be pre-application submission)
Has the development been completed?	Yes No
If Yes, please state when the development was completed (DD/MM/	YYYY): 31 /08 /2023 (date must be pre-application submission)
6. Discharge Of Condition	
Please provide a full description and/or list of the materials/details the	
DIODIVERSITY IMPROVEMENTS. TREE OF BIRD BOXES, LOGS FOR INSEC	FLANTING, HEAGE PLANTIGINSTALLATION ITS, SEEDING WILD FLOWER AREA.
7. Part Discharge Of Condition(s)	
Are you seeking to discharge only part of a condition?	Yes No
If Yes, please indicate which part of the condition your application rel	
	ates 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 the Local Planning Authority (LPA) has been submitted.  The original and 3 copies* of a completed and dated application form:  The original and 3 copies* of other plans and drawings or information necessary to describe the subject of the application:  The correct fee:  *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 signed - Agent:  Date (DD/MM/YYYY):	<u> </u>
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Date (DD/MM/YYYY):	
Date (DD/MM/YYYY):	
25/09/2023 (date cannot be pre-application)	
10. Applicant Contact Details 11. Agent Contact Details	$\overline{}$
Telephone numbers  Telephone numbers	
Country code: National number: Extension number: Country code: National number: Extension number:	
01353 727000	
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?  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 agent/applicant's detail	the
If Other has been selected, please provide:	113)
Contact name: Telephone number:	
Email address: Churchgate prop @ aol. com.	4