

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:

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:	First name:				
Last name:	S Coppin & A Day				
Company (optional):					
Unit:	House number: 180 House suffix:				
House name:	Hollycroft House				
Address 1:	Front Road				
Address 2:	Murrow				
Address 3:					
Town:	Wisbech				
County:					
Country:					
Postcode:	PE13 4HU				

2. Agent	Name and Address					
Title:	First name:					
Last name:						
Company (optional):	G R Merchant Ltd					
Unit:	4 House number: House suffix:					
House name:						
Address 1:	Wrights Mews					
Address 2:	12A Park Road					
Address 3:	Holbeach					
Town:	Spalding					
County:	Lincs					
Country:						
Postcode:	PE12 7EE					
	Varcian 2010					

3. Site Address Details				tion Advice		
Please provide the full postal address of the application site.			Has assistance or prior advice been sought from the local authority about this application?			
Unit:	House number: 180 House suffix:	I les 🗡 MO				
House name:	Hollycroft House		ere given. (T	plete the following information about the advice This will help the authority to deal with this		
Address 1:	ess 1: Front Road		ation more of tick if the fu	efficiently). ull contact details are not		
Address 2:	Address 2: Murrow		, and then o	complete as much as possible:		
Address 3:		Office	r name:			
Town:	Wicbech	Refere	ence:			
County:	Cambs					
Postcode (optional):	PE12 4HU	Date (DD/MM/YYYY):				
Description (must be cor	of location or a grid reference. mpleted if postcode is not known):	(must be pre-application submission) Details of pre-application advice received?				
Easting:	Northing:					
Description:	:					
)					
•	otion Of Your Proposal ide a description of the approved development as shown	on the c	lacision latt	ter including the application reference number		
and date of	decision in the sections below:					
	and external works to a listed building included and high front boundary wall, 1.1m high railing	_				
	ons to conservatory roof.	igo ilivo	Jiving the	s demonition of existing fence, and		
Reference no	umber: F/YR23/0481/LB Date of decision:	25.07	7.23	(Date must be pre-application submission) (DD/MM/YYYY)		
Please state	the condition number(s) to which this application relate	es:				
1.			Roofligh	hts		
2.		7.				
3. Br	rick Samples					
4. Pa	anel sample					
5. Jo	pinery details					
Has the dev	relopment already started?		Yes	X No		
If Yes, please state when the development started (DD/MM/YYYY):				(date must be pre-application submission)		
Has the development been completed? Yes No				No		
If Yes, please state when the development was completed (DD/MM/YYYY): (date must be pre-application submission)						
6. Discharge Of Condition						
	ide a full description and/or list of the materials/details th	nat are be	eing submit	ted for approval:		
Drawing 4090-22 05						
Brick & panel on site						
7. Part Discharge Of Condition(s)						
Are you seeking to discharge only part of a condition? Yes No						
It Yes, please	a indicate which part of the condition valir application re	viator to				
	e indicate which part of the condition your application re	eiales lo.				

8. Planning Application Requirements - Checklist Please read the following checklist to make sure you have sent all information required will result in your application being deemed the Local Planning Authority (LPA) has been submitted.	the information in support of your proposal. Failure to submit all invalid. It will not be considered valid until all information required by				
The original and 3 copies* of a Completed and dated application form:	ne original and 3 copies* of other plans and drawings information necessary to describe the subject of the application:				
The correct fee:					
9. Declaration I/we hereby apply for planning permission/consent as described ir information. I/we confirm that, to the best of my/our knowledge, a genuine opinions of the person(s) giving them. Signed - Applicant:	n this form and the accompanying plans/drawings and additional any facts stated are true and accurate and any opinions given are the Or signed - Agent:				
	S L Darlow				
Date (DD/MM/YYYY): 14.08.23 (date cannot be pre-application)					
10. Applicant Contact Details	11. Agent Contact Details				
Telephone numbers	Telephone numbers				
Country code: National number: Extension number: number:	Country code: National number: number:				
Country code: Mobile number (optional):	O1406 490800 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	y or other public land? X Yes No				
f the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (Please select only one) X Agent Applicant Other (if different from the agent/applicant's details)					
If Other has been selected, please provide: Contact name:	Telephone number:				
	тегернопе пишьег.				

Email address: