

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**

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This form is provided by Planning Portal and based on the requirements provided by Government for the sole purpose of submitting nformation 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.

Jpon 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:**



planning.submissions@york.gov.uk

West Offices Station Rise York **YO1 6GA** 

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.

f printed, please complete using block capitals and black ink.

t is important that you read the accompanying guidance notes and help text as incorrect completion will delay the processing of your application

1. Applica	ant Name and Address	2. Agent Name and Address	
Title:	MR First name: BRYAW	Title: First name:	
Last name:	CLAYDEN	Last name:	
Company (optional):		Company (optional):	
Unit:	House House suffix:	Unit: House number: House suffix:	
House name:	DOVE COTTAGE	House name:	
Address 1:	WETHERBY ROAD	Address 1:	
Address 2:	RUFFORTH	Address 2:	
Address 3:		Address 3:	
Town:	YORK	Town:	
County:		County:	
Country:		Country:	
Postcode:	Y023 3 QF	Postcode:	

3. Site Address Details	4. Pre-application Advice				
Please provide the full postal address of the application site.  House House	Has assistance or prior advice been sought from the local authority about this application?				
number: suffix:					
name: DOVE COTTAGE	If Yes, please complete the following information about the advice you were given. (This will help the authority to deal with this				
Address 1: WETHERBY ROAD	application more efficiently). Please tick if the full contact details are not				
Address 2: RUFFORTH	known, and then complete as much as possible:				
Address 3:	Officer name:				
Town: YORK	Reference:				
County:	Transferred.				
Postcode (optional): 4023 3QF	Date (DD/MM/YYYY):				
Description of location or a grid reference. (must be completed if postcode is not known):	(must be pre-application submission)  Details of pre-application advice received?				
Easting: Northing:	Details of pre-application advice received?				
Description:					
2 coordinates					
E. Docarintian Of Variance					
<ol> <li>Description Of Your Proposal</li> <li>Please provide a description of the approved development as shown</li> </ol>	on the decision letter, including the application reference number				
and date of decision in the sections below:	To the decision letter, moldaring the approach in terestice manner				
ERECTION OF IND DWELLING					
	(Date must be pre-application				
Reference number: 18/00758/FUL Date of decision:	submission) (DD/MM/YYYY)				
Please state the condition number(s) to which this application relate	T T				
1. <i>q</i>	6.				
2.	7.				
3.	8.				
4.	9.				
5.	10.				
Has the development already started?	✓Yes				
If Yes, please state when the development started (DD/MM/YYYY): (date must be pre-application submission)					
Has the development been completed?					
If Yes, please state when the development was completed (DD/MM/YYYY): (date must be pre-application submission)					
6. Discharge Of Condition					
Please provide a full description and/or list of the materials/details th					
THE BUILDING NEARING COMPLETION FALLS WITHIN PERMITTED DEVELOPMENT CRITCHIA.  THE BUILDING IS 2.6m x 5.0m with a 925mm DOOR OPENING. A 14m x 2.0m PARTITIONED CYCLE AREA WILL BE PROVIDED WITHIN THIS BUILDING.					
7. Part Discharge Of Condition(s)					
Are you seeking to discharge only part of a condition?  If Yes, please indicate which part of the condition your 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 completed and dated application form:	The or in	original and 3 copies* of other plans and drawings Iformation necessary to describe the subject of the application:				
The correct fee:	☑					
total of four copies), unless the applicatio LPAs may also accept supporting docume	n is submitted electronicall ents in electronic format by	iginal plus three copies of the form and supporting documents (a y or, the LPA indicate that a smaller number of copies is required. post (for example, on a CD, DVD or USB memory stick).  anning department to discuss these options.				
Signed  Date (DD77777777777777777777777777777777777	t of my/our knowledge, any	his form and the accompanying plans/drawings and additional rects stated are true and accurate and any opinions given are the  Or signed - Agent:				
19 - 9 - 2023 (date cannot be pre-application)						
Telephone numbers  Country code: National number:  Country code: Mobile number (optional):	Extension number:	Telephone numbers  Country code: National number:  Country code: Mobile number (optional):  Country code: Fax number (optional):  Email address (optional):				
12. Site Visit Can the site be seen from a public road, p If the planning authority needs to make a out a site visit, whom should they contact If Other has been selected, please provide Contact name:  Email address:	n appointment to carry ? (Please select only one)	r other public land?				