

If you would rather make this application online, you can do so on the Welsh Government website: www.gov.wales/planningapplications

Application for approval of details reserved by condition. Town and Country Planning Act 1990 Planning (Listed Buildings and Conservation Areas) Act 1990

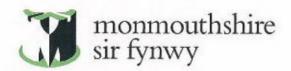
Privacy Notice

This form is provided by Planning Portal and based on the requirements provided by Welsh Government for the sole purpose of submitting information to the Local Planning Authority in accordance with the legislation detailed on this form and other relevant items of primary and subordinate legislation.

Please be aware that once you have downloaded this form, Planning Portal and Welsh Government will have no access to the form of 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:



Monmouthshire County Council County Hall, Rhadyr, Usk NP15 1GA

Cyngor Sir Fynwy Neuadd y Sir, Rhadyr, Brynbuga NP15 1GA Tel/Ffôn:01633 644880 E-mail/Ebost:planning@monmouthshire.gov.uk Website/Gwefan:www.monmouthshire.gov.uk

Publication on Local 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.

Title:	MR+MRS	First name	: SIMOU		
Last name:	PENREI	CH			
Company (optional):					
Unit:		House number:		House suffix:	
House name:	FEEN BANK				
Address 1:	HOOP ROAD TO PILSTONE HOUSE				
	WHITEBROOK				
Address 2:	WHITEB	ROOK			
Address 2: Address 3:	WHITEB	e00K			
	MONMO				
Address 3:					
Address 3: Town:					

2. Agent	Name a	nd Addre	ss			,
Title:	ME	First nar	ne:	GARETH		
Last name:	Price					
Company (optional):	CTAPETH PRICE ARCHITECT					
Unit:		House number:	3	3	House suffix:	
House name:						
Address 1:	TREETOPS					
Address 2:	POLTSKEWETT					
Address 3:						
Town:	CALD	1COT				
County:						
Country:						
Postcode:	NP26	55Q				

Version 2018

Please prov Unit: House name: Address 1: Address 2: Town: County: Postcode (optional): If you cann location midescription	Ide the full postal address of the application site. House House Suffix: FERN BANK HOOP ROAD TO PILSTONE HOUSE WHITE BROOK NP25, 4-TT of provide a postcode, the description of the site site you can, to help locate the site - for example "field to fi the Post Office". Northing:	Has pre authori If Yes, p you we applica Please known, Officer Refere	e-application Advice e-application advice been sought from the local ty about this application? Pes No Please complete the following information about the advice re given. (This will help the authority to deal with this tion more efficiently). tick if the full contact details are not and then complete as much as possible: In name: Date (DD/MM/YYYY): Dee pre-application submission) of pre-application advice received?
Please provand date of Propositions AP). Howe of Reference r	F decision in the sections below: ED EXTENSION AND ALTERATIONS TO ACENT CIDER MIN INCLUDING THE CON OFFICE/QUEST BEDEOOM.	EXISTING 1064510	ecision letter, including the application reference number 19 COTTAGE AND REFUEBISHMENT OF THE PIRST FLOOR INSTO A [Date must be pre-application submission] (DD/MM/YYYY)
1. c	60 HOLLING	6.	
2.		7.	
3.		8.	
4.		9.	
5.		10.	
If Yes, plea	velopment already started? se state when the development started (DD/MM/YYYY): velopment been completed? se state when the development was completed (DD/MM.	// [[////:	Yes No (date must be pre-application submission) Yes No (date must be pre-application submission)
PHOTO	rige Of Condition vide a full description and/or list of the materials/details the supplies of the materials and the supplies of the materials and the supplies of the supplie	hat are be	ing submitted for approval:
Are you see	ischarge Of Condition(s) eking to discharge only part of a condition? se indicate which part of the condition your application re	elates to:	☐ Yes ✓ No

Please read the information req	Application Requirements following checklist to make sure y uired will result in your application g Authority has been submitted.	ou have sent all the n being deemed inv		r proposal. Failure to submit all valid until all information required by	
The original and completed and	I 3 copies of a dated application form: 🗹	riginal and 3 copies of other plormation necessary to describe	nal and 3 copies of other plans and drawings ation necessary to describe the subject of the application:		
9. Declaration I/we hereby appropriate that, to persons giving the Signed - Application	oly for planning permission as des the best of my knowledge, any fa them.	cribed in this form a cts stated are true a	nd the accompanying plans/d nd accurate and any opinions of Or signed - Agent:	rawings and additional information. I given are the genuine opinions of the	
Date (DD/MM/\) 26 04 2		ore-application)			
10. Applicar	nt Contact Details		11. Agent Contact De	tails	
Telephone num Country code:	National number:	Extension number:			
Country code:	Mobile number (optional):				
Email address (optional):				
12. Site Visit	i				
If the planning a out a site visit, w	seen from a public road, public for authority needs to make an appoil whom should they contact? (Please n selected, please provide:	ntment to carry		icant Other (if different from the agent/applicant's details)	
Contact name:			Telephone number:		

Email address: