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Application for Permission in Principle

Town and Country Planning Act 1990 Town and Country Planning (Permission in Principle) (Amendment) Order 2017

Permission in principle may be granted for minor housing-led development only. Article 5B of the Permission in Principle (Amendment) Order 2017 sets out development that is specifically excluded from a grant of permission in principle and this includes habitats and EIA development.

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 a Local Planning Authority in accordance with the legislation detailed on this form.

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 a 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.

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.

Find contact details for Local Planning Authorities: https://www.planningportal.co.uk/lpasearch

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

1. Applicant Name and Address		2. Agent Name and Address	
Title:	Mr First name:	Title:	Mr First name: Ben
Last name:	Dulai	Last name:	Norton
Company (optional):		Company (optional):	Norton Taylor Nunn
Unit:	Number: Suffix:	Unit:	14B Number: Suffix:
Building name:	Shaftesbury House	Building name:	Deben Mill Business Centre
Address 1:	Clacton Road	Address 1:	Old Maltings Approach
Address 2:		Address 2:	Melton
Address 3:		Address 3:	
Town:	Elmstead Market	Town:	Woodbridge
County:	Essex	County:	Suffolk
Country:		Country:	
Postcode:	CO7 7DB	Postcode:	IP12 1BL

3. Description of the proposed development including	g any non-residential development			
Erection of 5 SELF BUILD dwellings				
Net number of dwellings: Min: 5 Amount of non-residential use(s) (e.g. floorspace or area): 0 (Can be expressed as a range, a maximum or a fixed amount)				
4. Site information	5. Site Address Details			
Description and amount of existing use(s) of site:	Please provide the full postal address of the application site.			
Residential garden land associated with Shaftesbury House, Clacton Road, Elmstead Market Site Area (hectares): 0.6 If you propose to attach any supporting information relating to known or likely constraints on the site please briefly describe what information you intend to provide.	Unit: House number: House suffix: House name: Shaftesbury House Address 1: Clacton Road Address 2:			
Planning Statement setting out policy support 6. Authority Employee / Member	Easting: Northing: Description:			

means related, by birth or otherwise, closely enough that a fair-minded and informed observer, having considered the facts, would

conclude that there was bias on the part of the decision-maker in the local planning authority.

Do any of the following statements apply to you and/or agent? Yes X N	(a) a member of staff (b) an elected member (c) related to a member of staff
If Yes, please provide details of their name, role and how you are related to them	(d) related to an elected member

7. Declaration

7. Declaration						
I/We hereby apply for permission in principle as described in th stated are true and accurate and any opinions given are the get	is form. I/We confirm that to the best of my/our knowledge, any facts nuine opinions of the person(s) giving them.					
Signed - Applicant						
Or signed - Agent						
Date (DD/MM/YYYY): (date cannot be pre-application) 27/11/2023						
8. 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 being deemed invalid. It will not be considered valid until all information required by the Local Planning Authority has been submitted.						
The original and 3 copies of a completed and dated Application form:	The original and 3 copies of the plan which identifies 🔀					
The correct fee: 🛛 🗙	Any supporting information: 🗙					
9. Applicant Contact Details	10. Agent Contact Details					
Telephone numbers	Telephone numbers					
Country code: National number: Extens	ion: Country code: National number: Extension:					
Country code: Mobile number (optional):	Country code: Mobile number (optional):					
Country code: Fax number (optional):	Country code: Fax number (optional):					
Email address:	Email address:					