

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:	MR	First name:	JOHN		
Last name:	DOWNIE				
Company (optional):					
Unit:	House number: 19-21 House suffix:				
House name:					
Address 1:	CHURCH STREET				
Address 2:	WARSOP				
Address 3:					
Town:	MANSFIELD				
County:	NOTTS				
Country:					
Postcode:	NG20 0A	νU			

2. Agent Name and Address				
Title:	First name:			
Last name:				
Company (optional):				
Unit:	House number: House suffix:			
House name:				
Address 1:				
Address 2:				
Address 3:				
Town:				
County:				
Country:				
Postcode:				
	Version 2018			

3. Site Address Details  Please provide the full postal address of the application site.  Unit: House number: 19-21 House suffix:  House name:  Address 1: CHURCH STREET  Address 2: WARSOP  Address 3: Town: MANSFIELD  County: NOTTS  Postcode (optional): NG20 0AU  Description of location or a grid reference. (must be completed if postcode is not known):	4. Pre-application Advice  Has assistance or prior advice been sought from the local authority about this application?  Yes No  If Yes, please complete the following information about the advice you were given. (This will help the authority to deal with this application more efficiently).  Please tick if the full contact details are not known, and then complete as much as possible:  Officer name:  Reference:  Date (DD/MM/YYYY): (must be pre-application submission)  Details of pre-application advice received?				
Easting: Northing: Description:					
5. Description Of Your Proposal					
Please provide a description of the approved development as shown and date of decision in the sections below:	n on the decision letter, including the application reference number				
CHANGE OF USE OF FIRST FLOOR INTO 2 NO. FLATS ( USE CLASS C3 ) OVER EXISTING SHOP ( USE CLASS E ) WITH REPLACEMENT WINDOWS AND EXTERNAL METAL FIRE ESCAPE TO REAR					
Reference number: 2022/0005/COU Date of decision: 06/05/2022 (Date must be pre-application submission) (DD/MM/YYYY)					
Please state the condition number(s) to which this application relates:  1. CONDITION 3 - ELEVATIONS AND SECTIONSOF NEW WINDOWS AND DOORS  6.					
CONDITION 4 - EXTERNAL METAL STAIRCASE POWDER COATED MATT BLACK	7.				
3. CONDITION 5 -DETAILS OF INSULATION SCHEME	8.				
4.	9.				
5.	10.				
Has the development 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 x No				
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 that are being submitted for approval:  DETAILS FOR TIMBER WINDOWS AND DOORS, DETAILS FOR INSULATION AND STAIRCASE					
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:					

B. Planning Application Requirements - Checklist Please read the following checklist to make sure you have sent all the Information required will result in your application being deemed in The Local Planning Authority (LPA) has been submitted.	e information in support of your proposal. Failure to submit all valid. It will not be considered valid until all information required by
The original and 3 copies* of a Completed and dated application form:	original and 3 copies* of other plans and drawings information necessary to describe the subject of the application:
The correct fee:	
National legislation specifies that the applicant must provide the or total of four copies), unless the application is submitted electronicall LPAs may also accept supporting documents in electronic format by You can check your LPA's website for information or contact their plants.	y or, the LPA indicate that a smaller number of copies is required. post (for example, on a CD, DVD or USB memory stick).
9. Declaration /we hereby apply for planning permission/consent as described in the information. I/we confirm that, to the best of my/our knowledge, any genuine opinions of the person(s) giving them.	his form and the accompanying plans/drawings and additional y facts stated are true and accurate and any opinions given are the
Signed - Applicant:	Or signed - Agent:
John Downie	
Date (DD/MM/YYYY):	
03/01/2024 (date cannot be pre-application)	
10. Applicant Contact Details	11. Agent Contact Details
Telephone numbers	Telephone numbers
Country code: National number: Extension number:	Country code: National number: Extension number:
Country code: Mobile number (optional):  07423641516	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 o	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)	Agent x Applicant Other (if different from the agent/applicant's details)
f Other has been selected, please provide:	
Contact name:  John	Telephone number:
JUIII	

Email address:

downiejade@aol.com