

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:



DEVELOPMENT CONTROL

Brighton and Hove City Council Town Hall Norton Road Hove BN3 3BQ

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: SIMON			
Last name:	NAPPER			
Company (optional):	SNAPS HOLIDAY LIMITED			
Unit:	House number: House suffix:			
House name:				
Address 1:	FLAT D,			
Address 2:	296, QUEENS ROAD,			
Address 3:				
Town:	LONDON			
County:				
Country:	UK.			
Postcode:	SE14 5JN			

2. Agent Name and Address					
Title:	MR	First name:	K	CEVIN	
Last name:	JONES				
Company (optional):	BARCHINGTON ARCHITECTURAL				
Unit:		House number:	9	House suffix:	
House name:					
Address 1:	AMETHY	ST DRIVE			
Address 2:					
Address 3:					
Town:	TEIGNMOUTH				
County:	DEVON				
Country:	UK.				
Postcode:	TQ14 8	GD			

Version 2018

3. Site Address Details			e-application Advice sistance or prior advice been sought from the local		
Unit:	rovide the full postal address of the application site. House 95 House 95 House		authority about this application?		
House	number: 95 suffix:		please complete the following information about the advice		
Address 1:	SS 1: PRESTON DROVE		ere given. (This will help the authority to deal with this ation more efficiently).		
Address 2:			tick if the full contact details are not , and then complete as much as possible:		
Address 3:		Office	r name:		
Town:	BRIGHTON		neo.		
County:		Refere	since.		
Postcode (optional): Description):on of location or a grid reference.		Date (DD/MM/YYYY): (must be pre-application submission)		
`	ompleted if postcode is not known): Northing: 106616	Detail	s of pre-application advice received?		
Easting: Description	330/72 Northing.				
Description	ı. 				
5. Descri	ption Of Your Proposal				
Please prov	•	n on the	decision letter, including the application reference number		
	rsion of ancillary shop storage (E) at lower ground floor and part grou storey rear extension, installation of railings around front lightwell and		form a self-contained three bedroom residential flat (C3) incorporating		
Single	storey real extension, installation of fallings around from lightwell and	Trevised te	inesti ditori.		
Reference number: BH2022/03061 Date of decision:			(Date must be pre-application submission) (DD/MM/YYYY)		
Please state	e the condition number(s) to which this application relate	<u></u> :S:			
1.		6.	REMEDIATION VERIFICATION REPORT.		
2.		7.			
3.		8.			
4.		9.			
5.		10.	REFUSE AND RECYCLING.		
Has the development already started?			X Yes No		
If Yes, pleas	se state when the development started (DD/MM/YYYY):		07/07/23 (date must be pre-application submission)		
Has the dev	Has the development been completed?				
If Yes, please state when the development was completed (DD/MM/YYYY): 13/11/23 (date must be pre-application submission)					
6. Discharge Of Condition					
	vide a full description and/or list of the materials/details the materials with the materials and re-				
G(2). REMEDIATION VERILIDATION RELIGION AND TORELIGIES AND RECTCHING STORE PROVIDED.					
7. Part Discharge Of Condition(s)					
Are you seeking to discharge only part of a condition? Yes X No					
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 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 original plus three copies of the form and supporting documents (a total of four copies), unless the application is submitted electronically or, the LPA indicate that a smaller number of copies is required. LPAs may also accept supporting documents in electronic format by post (for example, on a CD, DVD or USB memory stick). You can check your LPA's website for information or contact their planning department to discuss these options.						
9. Declaration I/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.	y facts stated are true and accurate and any opinions given are the					
Signed - Applicant:	Or signed - Agent:					
	KEVIN JONES					
Date (DD/MM/YYYY):						
(date cannot be pre-application)						
10. Applicant Contact Details	11. Agent Contact Details					
Telephone numbers	Telephone numbers					
Country code: National number: Extension number:	Extension Country code: National number: number:					
, matterial names.	Tatalona Manuscri					
Country code: Mobile number (optional):	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	r other public land? x Yes No					
If the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (Please select only one)	Agent Applicant Other (if different from the agent/applicant's details)					
f Other has been selected, please provide:	5					
Contact name: MR SIMON NAPPER	Telephone number:					
IVIN JIWON IVALLEN						

Email address: