



## Application for approval of details reserved by condition

Council	Babergh District Council
Application is for	Householder applications (extensions/outbuildings/fences)
<b>Applicant Name and Address</b>	
Title	Mrs
First name	M
Last name	Taylor
Company	
Property name/number	4
Address line 1	Butfield
Address line 2	
Town/Village	Lavenham
County	Suffolk
Country	
Postcode	CO109SD
Is an agent being used	Yes
Do you believe you are exempt from the application fee?	No, standard fees will apply
<b>Agent Name and Address</b>	
Title	Mrs
First name	M
Last name	Taylor
Company	
Property name/number	4
Address line 1	Butfield
Address line 2	
Town/Village	Lavenham

County	Suffolk			
Country				
Postcode	CO109SD			
<b>Site Address Details</b>				
Property name/number	4			
Address line 1	Butfield			
Address line 2				
Town/Village	Lavenham			
County	Suffolk			
Postcode	CO109SD			
Site easting				
Site northing				
Location description				
<b>Pre-application Advice</b>				
Has assistance or prior advice been sought from the local authority about this application?	No			
Officer name				
Pre-application reference				
Date				
Details of pre-application advice received				
<b>Description Of Your Proposal</b>				
Please provide a description of the approved development as shown on the decision letter, including the application reference number and date of decision in the sections below	Proposed Conversion of Garage to Additional Accommodation; Conversion of Loft and insertion of Roof Windows. Erection of a Two Storey Front Extension, Installation of Hardstanding (as approved under DC/20/03918).			
Reference number	DC/23/05724			
Date of decision	25/01/2024			
Please state the condition number(s) to which the application relates	<table border="1"> <thead> <tr> <th>Condition Number</th> </tr> </thead> <tbody> <tr> <td>3</td> </tr> <tr> <td>7</td> </tr> </tbody> </table>	Condition Number	3	7
Condition Number				
3				
7				

Has the development already started?	No
If Yes, please state when the development started	
Has the development been completed?	No
If Yes, please state when the development was completed	

### Discharge Of Condition

Please provide a full description and/or list of the materials/details that are being submitted for approval

23-033\_4A Location Plan and Site Plans. Biodiversity Enhancement Measures. Appendices A to C inclusive.

### Part Discharge Of Condition(s)

Are you seeking to discharge only part of a condition?

No

If Yes, please indicate which part of the condition your application relates to

### Declaration

I/we hereby apply for planning permission/consent as described in this form and the accompanying plans/drawings and additional information. I/we confirm that, to the best of my/our knowledge, any facts stated are true and accurate and any opinions given are the genuine opinions of the person(s) giving them.

Signed Applicant

Or signed - Agent

D KING

Date

29/01/2024

### Applicant Contact Details

Telephone number

Extension number

Mobile telephone number

Fax number

Email address

### Agent Contact Details

Telephone number

Extension number

Mobile telephone number

Fax number	
Email address	
<b>Site Visit</b>	
Can the site be seen from a public road. public footpath, bridleway or other public land?	Yes
If the planning authority needs to make an appointment to carry out a site visit, whom should they contact?	Agent (if one is being used)
Contact name	
Telephone number	
Email address	
<b>Payment</b>	
Are you the applicant or are you an agent working on behalf of the applicant?	
Who will pay for this application?	
Email address (this is the address the payment receipt will be sent to)	
Payment Total	
Payment Receipt Number	
Date & Time	