

Somerset Planning – East Team Cannards Grave Road, Shepton Mallet, BA4 5BT Web: www.somerset.gov.uk Email: Planningeast@somerset.gov.uk Tel: 0300 123 2224

## Application for Approval of Details Reserved by Condition

# Town and Country Planning Act 1990 (as amended); Planning (Listed Buildings and Conservation Areas) Act 1990 (as amended)

#### Publication of applications on planning authority websites

Please note that the information provided on this application form and in supporting documents may be published on the Authority's website. If you require any further clarification, please contact the Authority's planning department.

## **Site Location**

Disclaimer: We can only make recommendations based on the answers given in the questions.

If you cannot provide a postcode, the description of site location must be completed. Please provide the most accurate site description you can, to help locate the site - for example "field to the North of the Post Office".

Number			
Cuffin .			
Suffix			
Property Name			
1 Gainsborough			
Address Line 1			
The Street			
Address Line 2			
Chilcompton			
Address Line 3			
Somerset			
Town/city			
Radstock			
Postcode			
BA3 4HB			
Description of site location must	be completed if	postcode is not known	ו:
Easting (x)		Northing (y)	
364862		151958	
Description			

# **Applicant Details**

# Name/Company

### Title

## Mr and Mrs

#### First name

Suzanne

## Surname

Thurlow

## Company Name

Hetreed Ross Architects

## Address

## Address line 1

Attika Workspace

### Address line 2

Bath Brewery, Toll Bridge Road

## Address line 3

## Town/City

Radstock

## County

Somerset

## Country

United Kingdom

## Postcode

BA1 2QJ

Are you an agent acting on behalf of the applicant?

⊘Yes ⊖No

## **Contact Details**

Primary number

\*\*\*\*\* REDACTED \*\*\*\*\*\*

Secondary number

Fax number

#### Email address

\*\*\*\*\* REDACTED \*\*\*\*\*\*

## **Agent Details**

# Name/Company

#### Title

Ms

#### First name

Suzanne

#### Surname

Thurlow

#### Company Name

Hetreed Ross Architects

## Address

### Address line 1

Attika Workspace

#### Address line 2

Bath Brewery, Toll Bridge Road

## Address line 3

### Town/City

## Bath

County

#### Country

United Kingdom

## Postcode

BA1 2QJ

## **Contact Details**

Primary number

,			
***** REDACTED *****			
Secondary number			
Fax number			
Email address			
***** REDACTED ******			

Description of the Proposal

Please provide a description of the approved development as shown on the decision letter

Erection of single-storey side and rear extensions.

Reference number

2023/1127/LBC

Date of decision (date must be pre-application submission)

10/10/2023

Please state the condition number(s) to which this application relates

Condition number(s)

3,5,9, and 11

Has the development already started?

⊖ Yes

⊘ No

## Part Discharge of Conditions

Are you seeking to discharge only part of a condition?

⊖ Yes ⊘ No

## **Discharge of Conditions**

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

Drawings 858 L 03, 06, 09 and A 10 and Document Discharge of Conditions

# Site Visit

Can the site be seen from a public road, public footpath, bridleway or other public land?

⊖ Yes

⊘ No

If the planning authority needs to make an appointment to carry out a site visit, whom should they contact?

⊘ The agent

○ The applicant

○ Other person

# **Pre-application Advice**

Has assistance or prior advice been sought from the local authority about this application?

⊘ Yes

ONo

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):

Officer name:

Title

\*\*\*\*\* REDACTED \*\*\*\*\*\*

#### First Name

\*\*\*\*\* REDACTED \*\*\*\*\*\*

#### Surname

\*\*\*\*\* REDACTED \*\*\*\*\*\*

Reference

Date (must be pre-application submission)

05/12/2023

Details of the pre-application advice received

Phone Conversation

## **Declaration**

I/We hereby apply for Approval of details reserved by a condition (discharge) as described in the questions answered, details provided, 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.

I/We also accept that, in accordance with the Planning Portal's terms and conditions:

- Once submitted, this information will be made available to the Local Planning Authority and, once validated by them, be published as part of a public register and on the authority's website;

- Our system will automatically generate and send you emails in regard to the submission of this application.

✓ I / We agree to the outlined declaration

Signed

Suzanne Thurlow

Date

29/01/2024