

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:**

www.shropshire.gov.uk/planning

Planning Services Shropshire Council, PO Box 4826 Shrewsbury, SY1 9LJ Tel: 0345 678 9004 Email: customer.services@shropshire.gov.uk



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.

Applicant Name and Address						
Title:	Mr & Mrs	First name:	David			
Last name:	Jones					
Company (optional):						
Unit:	House number: 63 House suffix:					
House name:						
Address 1:	Temeside					
Address 2:						
Address 3:						
Town:	Ludlow					
County:						
Country:						
Postcode:	SY8 1JT					

2. Agent Name and Address					
Title:	First name: Keith				
Last name:	Pearce				
Company (optional):					
Unit:	House number: House suffix:				
House name:	Glenhaydan				
Address 1:	Donkey Lane				
Address 2:	Ashford Carbonel				
Address 3:					
Town:	Ludlow				
County:					
Country:					
Postcode:	SY8 4DA				

Version 2018

3. Site Address Details			4. Pi	e-applicati	on Advice	
Please provide the full postal address of the application site.			Has assistance or prior advice been sought from the local authority about this application?			
Unit:	House number: 63	House suffix:	author	ity about this	application? Yes X No	
House name:			If Yes, please complete the following information about the advice you were given. (This will help the authority to deal with this			
Address 1: Temeside			ation more effi e tick if the full	iciently). contact details are not		
Address 2:	Address 2:				nplete as much as possible:	
Address 3:	ddress 3:		Office	r name:		
Town:	Ludlow		Refere	ence:		
County:						
Postcode (optional):			Date (DD/MM/YYYY): (must be pre-application submission)			
Description (must be co	of location or a grid reference. impleted if postcode is not known)	:	Details of pre-application advice received?			
Easting:	Northing:					
Description	:					
Replace	ment dwelling					
	ption Of Your Proposal					
and date of	decision in the sections below:	development as show	n on the	decision letter	, including the application reference number	
Erection	n of 1no replacement dwelling follow	ing demolition of an ex	isting bur	galow		
Reference r	number: 21/05460/ful	Date of decision:	22 Nov	2021 (	Date must be pre-application	
	e the condition number(s) to which	J	S:		submission) (DD/MM/YYYY)	
1.			6.	Х		
2.			7.			
3.			8.			
4.			9.			
5.			10.			
Has the dev	velopment already started?			x Yes	No	
If Yes, plea	se state when the development sta	rted (DD/MM/YYYY):		21 Feb 2023	(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:						
	layout drawing			-		
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:						

B. Planning Application Requirements - Checklist Please read the following checklist to make sure you have sent all th Information required will result in your application being deemed in Ithe 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 nformation necessary to describe the subject of the application:				
The correct fee:					
*National legislation specifies that the applicant must provide the ortotal of four copies), unless the application is submitted electronical LPAs may also accept supporting documents in electronic format by You can check your LPA's website for information or contact their pl	ly 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 t nformation. I/we confirm that, to the best of my/our knowledge, an genuine opinions of the person(s) giving them. Signed - Applicant:	this form and the accompanying plans/drawings and additional y facts stated are true and accurate and any opinions given are the  Or signed - Agent:				
oigned Applicant.	or signed agent.				
Date (DD/MM/YYYY):					
14 Feb 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: Makila number (antiquell)	Country code: Mobile number (optional):				
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	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:	Telephone number:				

Email address: