

If you would rather make this application online, you can do so on the Welsh Government website: www.gov.wales/planningapplications

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 Welsh Government for the sole purpose of submitting information to the Local Planning Authority in accordance with the legislation detailed on this form and other relevant items of primary and subordinate legislation.

Please be aware that once you have downloaded this form, Planning Portal and Welsh Government will have no access to the form of 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 Loca 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.powys.gov.uk

Publication on Local 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.

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I. Applica	ant Name and Address	2. Agent	Name and Address
Г	MR & MRS First name: A	Title:	MR First name:
Last name:	MATTHEWS	Last name:	HUMPHREYS
Company (optional):		Company (optional):	PHILIP HUMPHREYS ARCHITECTS
Unit:	House House suffix:	Unit:	House number: House suffix:
House name:	WHITE HALL FARM	House name:	TAN - Y- CASTELL
Address 1:	LLANDYS51L	Address 1:	BROAD STREET
Address 2:		Address 2:	
Address 3:	400	Address 3:	
Town:	MONTGOMERY	Town:	MONTGOMERY
County:		County:	,
Country:		Country:	
Postcode:	SY156LU	Postcode:	SY156PH

3. Site Address Details Please provide the full postal address of the application site. Unit: House House suffix:		Has pre	e-application Advice e-application advice been sought from the local rity about this application?			
House name: Address 1:	WHITE HALL FARM LLANDYSSIL	you we applica Please	please complete the following information about the advice ere given. (This will help the authority to deal with this ation more efficiently). I tick if the full contact details are not and then complete as much as possible:			
Town:	MONT GOMERT	Office	er name:			
County:		Refere	onco:			
Postcode (optional): If you cannot location mudescription	ot provide a postcode, the description of the site ust be completed. Please provide the most accurate site you can, to help locate the site - for example "field to if the Post Office". Northing:	(must	Date (DD/MM/YYYY): be pre-application submission) Is of pre-application advice received?			
Description	ח:					
5. Description Of Your Proposal 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:						
SECTION 19 APPLICATION TO VARY CONDITION 2 OF 8/2018/6263						
Reference i	number: 23/1542/REM Date of decision: e the condition number(s) to which this application relat		(Date must be pre-application submission) (DD/MM/YYYY)			
1.		6.	1./			
2.	Ø.	7.				
3.		8.				
4.		9.	·			
5.		10.				
Has the development already started? If Yes, please state when the development started (DD/MM/YYYY): Has the development been completed? 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:						
CONDITION 6 - BIODIVERSITY ENHANCEMENT PLAN SHALL BE SUBMITTED TO LOCAL PLANNING AUTHORITY						
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:						

8. Planning Application Requirements - Checklist Please read the following checklist to make sure you have sent all the information in support of your proposal. Failure to submit all information required will result in your application being deemed invalid. It will not be considered valid until all information required by the Local Planning Authority has been submitted.						
The original and 3 copies of a completed and dated application form: The original and 3 copies of other plans and drawings or information necessary to describe the subject of the application:						
9. Declaration I/we hereby apply for planning permission as described in this form and the accompanying plans/drawings and additional information. I confirm that, to the best of my knowledge, any facts stated are true and accurate and any opinions given are the genuine opinions of the persons giving them. Signed - Applicant: Or si						
Date (DD/MM/YYYY): [1 /04/2024 (date cannot be pre-application)						
10. Applicant Contact Details	11. Agent Contact Details					
Telephone numbers Country code: National number: Extension number: Country code: Mobile number (optional): Email address (optional):	Telephone numbers Country code: National number: D1686 Country code: Mobile number (optional): Email address (optional):					
12. Site Visit Can the site be seen from a public road, public footpath, bridleway or other public land? 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)						
If Other has been selected, please provide: Contact name:	Telephone number					
Email address:						