



Application for approval of reserved matters following outline approval. Town and Country Planning (Development Management Procedure) (England) Order 2015

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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:



Mid Suffolk District Council Planning Services
Endeavour House, 8 Russell Road,
Ipswich, IP1 2BX
Tel: 0300 1234000 option 5
Email: planning@baberghmidsuffolk.gov.uk
www.midsuffolk.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.

1. Applicant Name and Address				
Title:	Mr First name: B			
Last name:	Sylvester			
Company (optional):				
Unit:	House House suffix:			
House name:	Lastone			
Address 1:	Heather Close			
Address 2:				
Address 3:	Thurston			
Town:	Bury St Edmunds			
County:	Suffolk			
Country:	UK			
Postcode:	IP31 3PX			

2. Agent Name and Address						
Title:	Mr	First name:	Andrew			
Last name:	Catton					
Company (optional):	Patrick Allen & Associates					
Unit:		House number:		House suffix:		
House name:	Grange Business Centre					
Address 1:	Tommy Flowers Drive					
Address 2:	Grange Farm					
Address 3:	Kesgrave					
Town:	Ipswich					
County:	Suffolk					
Country:	UK					
Postcode:	IP5 2BY					

Version 2018.1

3. Site Ad	ddress Details		1 1 1 4. Pre-applic			
Please prov	ide the full postal address of the ap		Has assistance or authority about t	r prior advice been sought from the local		
Unit:	House number:	House suffix:		this application? Yes V No		
House name:	and Adj to; If Yes, please complete the following information about the you were given. (This will help the authority to deal with this					
Address 1:	The Stables		application more efficiently). Please tick if the full contact details are not			
Address 2:	Station Road		known, and then complete as much as possible:			
Address 3:	Elmswell		Officer name:			
Town:	Bury St Edmunds					
County:	Suffolk		Reference:			
	IP30 9HA of location or a grid reference.		(must be pre-app	Date (DD/MM/YYYY): plication submission)		
(must be co	ompleted if postcode is not known):	:	Details of pre-ap	oplication advice received?		
Easting:	Northing:					
Description	n:					
			J			
5. Develo	opment Description					
Please indic	cate which reserved matter(s) you re	equire to be determin	ned under this applic	ration:		
Access Please prov	Appearance vide a description of the approved o	~	dscaping n on the decision le	✓ Layout ✓ Scale tter:		
Applicatio be reserve	n for Outline Planning Permission ed) Town and Country Planning A	n (Access Points to l act 1990 (as amende	be considered, App ed) - Erection of 1N	bearance, Layout, Landscaping and Scale to lo dwelling.		
Reference r	number: DC/23/02699	Date of decision:	24.08.2023	(date must be pre-application submission) (DD/MM/YYYY)		
	ironment impact assessment applic			. Please state if the outline planning application nental statement was submitted to the planning		
Erection of	of 1 no dwelling and garage					
Has the de	velopment already started?			Yes No		
If Yes, plea	se state when the development wa	s started (DD/MM/YY	YY):	(date must be pre-application submission)		
Has the wo	ork been completed?			Yes V No		
If Yes, plea	se state when the development wa	s completed (DD/MN	M/YYYY):	(date must be pre-application submission)		

6. Authority Employee / Member It is an important principle of decision-making that the process is open and transparent. For the purposes of this question "relating to" means related, by birth or otherwise, closely enough that a fair-minded and informed observer, having considered the facts, would conclude that there was bias on the part of the decision-maker in the local planning authority.				
Do any of the following statements apply to you and/or agent? Yes No		With respect to the authority, I am: (a) a member of staff (b) an elected member (c) related to a member of staff (d) related to an elected member		
If Yes, please provide details of their name, role and how you are	e related to them.			
7. Supporting Information Please provide the following information:				
List of all relevant drawings, including reference numbers, that of the original decision:	List of drawing numbers submitted with this application for approval:			
Drawing	Reference Number	Drawing Number		
Block Plan - Proposed		4514-01A		
Land Contamination Assessment Envoroscreen		4514-02C		
Land Contamination Questionaire		4514-03B		
Planning Statement		4514-04		
Photos Of Tree Removal Email from applicant re TPO tree removal				
Defined Red Line Plan Site Location Plan Promap				
Reasons for any changes to the original drawings (if applicable):				

Please read the following ched	Requirements - Checklist cklist to make sure you have sent all the It in your application being deemed i LPA) has been submitted.	he informa nvalid. It w	ion in suppill not be co	port of your prope onsidered valid u	osal. Failure to submit all ntil all information requir	ed by
The original and 3 copies* of a form:	a completed and dated application		The corre	ct fee:		
The original and 3 copies* of cinformation necessary to desc	other plans and drawings or ribe the subject of the application:		as are nec		of such plans and drawin th the matters reserved rmission.	igs 🔲
total of four copies), unless the LPAs may also accept support	that the applicant must provide the ce e application is submitted electronica ing documents in electronic format b site for information or contact their p	lly or, the L y post (for	PA indicate example, o	that a smaller nun a CD, DVD or U	umber of copies is require SB memory stick).	
	g permission/consent as described in t, to the best of my/our knowledge, an on(s) giving them.	ny facts sta				
Date (DD/MM/YYYY):						
17.04.2024	(date cannot be pre-application)					
12. Site Visit			1.11.1.12			
If the planning authority need	ublic road, public footpath, bridleway Is to make an appointment to carry	_	iblic land? Agent	✓ Yes ✓ Applicant	☐ No☐ Other (if different fi	rom the
out a site visit, whom should t If Other has been selected, ple	hey contact? (<i>Please select only one</i>) ease provide:		Agent	V Applicant	agent/applicant's d	
Contact name:		Teleph	one numbe	er:		

Email address: