

NYM / 2009 / 0 8 8 4 / R M

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09/884
PT1

Application for approval of reserved matters following outline approval.

Article 21, Town and Country Planning (General Development Procedure) Order 1995

NYMNPA
30 DEC 2009

Publication of planning applications on council websites

Please note that with the exception of applicant contact details and Certificates of Ownership, the information provided on this application form and in supporting documents may be published on the council's website.

If you have provided any other information as part of your application which falls within the definition of personal data under the Data Protection Act which you do not wish to be published on the council's website, please contact the council's planning department.

Please complete using block capitals and black ink.

It is important that you read the accompanying guidance notes as incorrect completion will delay the processing of your application.

1. Applicant Name and Address

Title: First name:

Last name:

Company (optional):

Unit: House number: House suffix:

House name:

Address 1:

Address 2:

Address 3:

Town:

County:

Country:

Postcode:

2. Agent Name and Address

Title: First name:

Last name:

Company (optional):

Unit: House number: House suffix:

House name:

Address 1:

Address 2:

Address 3:

Town:

County:

Country:

Postcode:

3. Site Address Details

Please provide the full postal address of the application site.

Unit: House number: House suffix:

House name:

Address 1:

Address 2:

Address 3:

Town:

County:

Postcode (optional):

Description of location or a grid reference.
(must be completed if postcode is not known):

Easting: Northing:

Description:

4. Pre-application Advice

Has assistance or prior advice been sought from the local authority about this application? Yes No

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).

Please tick if the full contact details are not known, and then complete as much as possible:

Officer name:

Reference:

Date (DD/MM/YYYY):
(must be pre-application submission)

Details of pre-application advice received?

5. Development Description

Please indicate which reserved matter(s) you require to be determined under this application:

Access Appearance Landscaping Layout Scale

Please provide a description of the approved development as shown on the decision letter, including the application reference number and date of decision:

Reference number: Date of decision: (date must be pre-application submission) (DD/MM/YYYY)

Please provide a description of the reserved matters for which you are seeking consent:

Has the development already started? Yes No

If Yes please state when the development was started (DD/MM/YYYY): (date must be pre-application submission)

Has the work been completed? Yes No

If Yes please state when the development was completed (DD/MM/YYYY): (date must be pre-application submission)

6. Neighbour and Community Consultation

Have you consulted your neighbours or the local community about the proposal? Yes No

If Yes please provide details:

7. Council Employee / Member

Is the applicant or agent related to any member of staff or elected member of the Council? Yes No

If Yes, please provide details:

8. Supporting Information

Please provide the following information:

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List of all relevant drawings, including reference numbers, that were approved as part of the original decision:

List of drawing numbers submitted with this application for approval:

Drawing	Reference Number
1:1250 LOCATION PLAN	
1:500 BLOCK PLAN	
1:100 SURVEY	

Drawing Number
9102-04
9102-05

Reasons for any changes to the original drawings (if applicable):

9. 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.

- | | | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------------------------|-------------------------------------|
| A completed and dated application form with 3 copies: | <input checked="" type="checkbox"/> | The correct fee: | <input checked="" type="checkbox"/> |
| 3 copies of the plan which identifies the land to which the application relates drawn to an identified scale and showing the direction of North: | <input checked="" type="checkbox"/> | 3 copies of a design and access statement: | <input checked="" type="checkbox"/> |
| 3 copies of other plans and drawings or information necessary to describe the subject of the application: | <input checked="" type="checkbox"/> | 3 copies of the completed, dated Article 7 Certificate (Agricultural Holdings): | <input checked="" type="checkbox"/> |
| | | 3 copies of the completed, dated Ownership Certificate (A, B, C, or D - as applicable): | <input checked="" type="checkbox"/> |

10. Declaration

I/we hereby apply for planning permission/consent as described in this form and the accompanying plans/drawings and additional information.

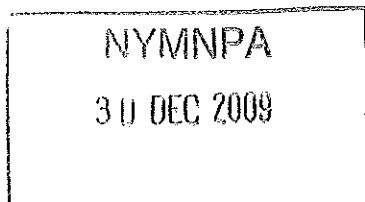
Signed - Applicant:

Or signed - Agent:

Date (DD/MM/YYYY):

24/12/09

(date cannot be pre-application)



11. Applicant Contact Details

Telephone numbers

Country code: National number: Extension number:

Country code: Mobile number (optional):

Country code: Fax number (optional):

Email address (optional):

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12. Agent Contact Details

Telephone numbers

Country code: National number: Extension number:

Country code: Mobile number (optional):

Country code: Fax number (optional):

Email address (optional):

13. 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? (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:

NYMNP
31 DEC 2009