Application for approval of details reserved by condition.

Town and Country Planning Act 1990

Planning (Listed Buildings and Conservation Areas) Act 1990

You can complete and submit this form electronically via the Planning Portal by visiting www.planningportal.gov.uk/apply

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.

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.

Applica	ant Name and Address	2. Agent Name and Address
itle:	MR First name: MAY.	Title: MR First name: ANDREW
_ast name:	WAINEWRIGHT	Last name: THOMSON
Company		Company (optional): THOMSON LAVERS AMUHITECT)
(optional): Unit:	House 16 A House suffix:	Unit: House number: 75 House suffix:
House	Turner L. J.	House name:
name: Address 1:	BELSIZE PARK	Address 1: LANSTOWNE WAY
Address 2:		Address 2:
Address 3		Address 3:
Town:	LOWPON	Town: LONDON
County:		County:
Country:	UK	Country: UK
Postcode	: NW3 4ES	Postcode: SW8 ZEA

3. Site Address Details	4. Pre-application Advice	
Please provide the full postal address of the application site.	Has assistance or prior advice been sought from the local	
Unit: House House suffix:	authority about this application?	
House name: LARR AT THE REAR OF Address 1: 53 ETON AUENUE	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	
Address 2:	known, and then complete as much as possible:	
Address 3:	Officer name: Reference:	
Town:		
County:		
Postcode (optional): Description of location or a grid reference. (must be completed if postcode is not known):	Date (DD/MM/YYYY): (must be pre-application submission) Details of pre-application advice received?	
Easting: Northing:		
Description: ENTERION OF BUILDING FOR USE AS A SINGLE FAMILY DIVELLING HOUSE		
Reference number: 2012/5729/P Date of decis	sion: 21/05/2017 (Date must be pre-application submission) (DD/MM/YYYY)	
Please state the condition number(s) to which this application		
1. 3a \$ b	6.	
2.	7.	
	8.	
3.	9.	
4.	10.	
Has the development already started? If Yes, please state when the development started (DD/MM/) Has the development been completed?	Yes No (date must be pre-application submission) Yes No (date must be pre-application (date must be pre-application)	
If Yes, please state when the development was completed (I	DD/MM/YYYY): (date must be pre application)	
6. Discharge Of Condition Please provide a full description and/or list of the materials/of PLAN/SECTION DETAILS A200, A200 A1001, A110	1, AZOZ, AZOZ, AZO4, AZO5, COPPER SAMPLE	
7. Part Discharge Of Condition(s)	Yes No	
Are you seeking to discharge only part of a condition. If Yes, please indicate which part of the condition your app	olication relates to:	
	\$Oate: 2012-07-17 #\$ SRevision: 4636 \$	

B. Planning Application Requirements - Checklist lease read the following checklist to make sure you have sent all the information required will result in your application being deemed invalue Local Planning Authority has been submitted.	nformation in support of your proposal. Failure to submit all lid. It will not be considered valid until all information required by			
the original and 3 copies of a The original and dated application form:	riginal and 3 copies of other plans and drawings ormation necessary to describe the subject of the application:			
he correct fee:				
). Declaration				
/we hereby apply for planning permission/consent as described in the information. I/we confirm that, to the best of my/our knowledge, any genuine opinions of the person(s) giving them.	is form and the accompanying plans/drawings and additional facts stated are true and accurate and any opinions given are the			
Signed - Applicant:	Or signed Agent:			
	In allh			
Date (DD/MM/YYYY):				
(date cannot be pre-application)				
10. Applicant Contact Details	11. Agent Contact Details			
	Telephone numbers			
Telephone numbers Extension	Extension			
Country code: National number: number:	Country code: National number.			
	++44 020 7498 77.0°)			
Country code: Mobile number (optional):	Country code: Mobile number (optional):			
	1+44 07748768556			
Country code: Fax number (optional):	Country code: Fax number (optional):			
Country				
Email address (optional):	Email address (optional):			
Email address (options)	THOMISON-LAVERS A BI INTERNET-COM			
12. Site Visit	or other public land?			
Can the site be seen from a public road, public footpath, bridleway of other public footpath from the public footpa				
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 agent/applicant's details)			
If Other has been selected, please provide:	Telephone number:			
Contact name:				

Email address: