## 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.

1. Applica	int Nam	e and Addre	·SS		
Title:	Mr	First name:	David		
Last name:	Bradbury				
Company (optional):	Wilmot Dixon Housing Ltd				
Unit:		House number:		House suffix:	
House name:					
Address 1:	Hitchin Road				
Address 2:					
Address 3:					
Town:	Shefford				
County:	Bedfordshire				
Country:	United Kingdom				
Postcode:	SG17 5JS				

2. Agent l	Name a	and Addres	55		
Title:	Mr	First nan	ne: Phil		
Last name:	Hamilton				
Company (optional):	Peter Barber Architects				
Unit:		House number:	173	House suffix:	
House name:					
Address 1:	Kings Cross Road				
Address 2:					
Address 3:					
Town:	London				
County:	(				
Country:	United Kingdom				
Postcode:	WC1X 9BZ				

	ddress Details			ation Advice r prior advice been sought from the local	
Please provide the full postal address of the application site.  House Fo. 54 House				this application?	
Unit	number: 52-54 House suffix;				
House name:		you w	ere given.	nplete the following information about the advice (This will help the authority to deal with this	
Address 1:	Mount Pleasant		application more efficiently).  Please tick if the full contact details are not		
Address 2:				complete as much as possible:	
Address 3:			Officer name:		
Town:	London		Amanda Peck Reference:		
County:					
Postcode (optional):	WC1X 0AL			Date (DD/MM/YYYY):	
Description	n of location or a grid reference. ompleted if postcode is not known):		(must be pre-application submission)  Details of pre-application advice received?		
Easting	Northing:			prication advice received.	
Descriptio					
		J[			
5. Descr	iption Of Your Proposal				
Please pro	wide a description of the approved development a of decision in the sections below:	is shown on the	decision le	tter, including the application reference number	
The erection	n of a 3 storey extension to the east, a part 2 part 4 storey e				
installation of	erations to the facades, installation of windows and doors, and finew cycle parking storage area to the front ground floor c	courtyard and assoc			
	g, to provide an additional 21 rooms to existing 31 room host	,		(Date must be pre-application	
Reference			2012	submission) (DD/MM/YYYY)	
	te the condition number(s) to which this application				
	10. (Tree protection method statement)	6.			
-	20. (Piling Method Statement)	7.			
3.	22. (Qualified Chartered Engineer)	8.			
4.	26. (Construction Management Plan)	9.			
5.		10.			
Has the de	evelopment already started?		Yes	N No	
If Yes, please state when the development started (DD/MM/YYYY):				(date must be pre-application submission)	
Has the de	evelopment been completed?		Yes	N No	
If Yes, please state when the development was completed (DD/MM/YYYY):				(date must be pre-application submission)	
				3 Submission (	
	arge Of Condition wide a full description and/or list of the materials/o	details that are b		itted for approval:	
Covering	letter with additional notes. Construction Mana	gement Plan. P	iling Meth	od Statement. Arboricultural Method	
Statemer	nt. Letter confirming appointment of Engineer wi	ith evidence of	qualificati	ons.	
7 0546	Nischarge Of Condition(s)				
	Discharge Of Condition(s)		□ Ver □ No		
Are you seeking to discharge only part of a condition?  If Yes, please indicate which part of the condition your application relates to:				Yes N No	

	ke sure you have sent all the oplication being deemed in	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:	Y The or in	The original and 3 copies of other plans and drawings or information necessary to describe the subject of the application:			
The correct fee:	Y				
information. I/we confirm that, to the bes genuine opinions of the person(s) giving Signed - Applicant:  Date (DD/MM/YYYY):	t of my/our knowledge, any	onis form and the accompanying plans/drawings and additional facts stated are true and accurate and any opinions given are the  Or signed - Agent:  Phil Hamilton For and on Behalf of Peter Barber Architects			
10. Applicant Contact Details  Telephone numbers  Country code: National number:  +44 (0)1462 814455  Country code: Mobile number (options)  Country code: Fax number (optional):  Email address (optional):	Extension number:	Telephone numbers  Country code: National number: Extension number:  +44 (0)20 7833 4499  Country code: Mobile number (optional):  Country code: Fax number (optional):  Email address (optional):  phil@peterbarberarchitects.com			
12. Site Visit  Can the site be seen from a public road, p  If the planning authority needs to make a out a site visit, whom should they contact  If Other has been selected, please provide Contact name:	n appointment to carry t? (Please select only one)	r other public land? Y Yes No Agent Y Applicant Other (if different from the agent/applicant's details)  Telephone number:			

Email address: