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. Applicant Name and Address					
Title:	First name:				
Last name:					
Company (optional):	FAIRFAX PARTNERS LIMITED				
Unit:	House number: House suffix:				
House name:					
Address 1:	C/O AGENT				
Address 2:					
Address 3:					
Town:					
County:	8				
Country:					
Postcode:					

2. Agent Name and Address						
Title:	MISS	First nar	ne:	HOLLY		
Last name:	FARROW					
Company (optional):	DP9					
Unit:		House number:	100	House suffix:		
House name:						
Address 1:	PALL MALL					
Address 2:						
Address 3:						
Town:	LONDON					
County:						
Country:						
Postcode:	SW1Y 5NQ					

3 Sito A	Address Details	A Pro-ar	onlication Advice			
	vide the full postal address of the application site.	4. Pre-application Advice Has assistance or prior advice been sought from the local				
House 11A House		authority a	bout this application? Yes No			
House	number: suffix: If Yes, please complete the following information about the advice					
name:			iven. (This will help the authority to deal with this			
Address 1:	SHARPLESHALL STREET AND 10	application more efficiently). Please tick if the full contact details are not				
Address 2:	EGLON MEWS	known, and	known, and then complete as much as possible:			
Address 3:		Officer nar	ne:			
Town:	LONDON					
County		Reference:				
County: Postcode			D . (DD // MANAGOO)			
(optional):		Date (DD/MM/YYYY): (must be pre-application submission)				
(must be d	on of location or a grid reference. completed if postcode is not known):	Details of pre-application advice received?				
Easting:	Northing:					
Description	on:					
5 Descr	ription Of Your Proposal					
and date	ovide a description of the approved development as show of decision in the sections below: ON OF A THREE STOREY OFFICE/RECORDING ST					
CLASS E	31) AND THREE STOREY RESIDENTIAL DWELLING					
THE EX	ISTING BUILDING.					
Reference	number: 2010/6171/9 Date of decision:	19/08/2011	(Date must be pre-application			
	te the condition number(s) to which this application relati		submission) (DD/MM/YYYY)			
1. 5		6.				
2. 7		7.				
3.		8.				
4.		9.				
5.		10.				
Has the de	evelopment already started?		∕es 🗶 No			
	If Yes, please state when the development started (DD/MM/YYYY):		(date must be pre-application			
			submission)			
	evelopment been completed?		/es No			
If Yes, ple	ase state when the development was completed (DD/MM	/YYYY):	(date must be pre-application submission)			
6 Disab	arge Of Condition					
	ovide a full description and/or list of the materials/details t	hat are being :	submitted for approval:			
PLEASE	SEE ENCLOSED A3 DRAWINGS					
7 Dant F	Discharge Of Condition(s)					
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 t information required will result in your application being deemed the Local Planning Authority has been submitted.	the information in support of your proposal. Failure to submit all invalid. It will not be considered valid until all information required by				
The original and 3 copies of a	original and 3 copies of other plans and drawings formation necessary to describe the subject of the application:				
The correct fee:					
9. Declaration I/we hereby apply for planning permission/consent as described ir information. Signed - Applicant:	or signed - Agent:				
	DP9 DP9				
Date (DD/MM/YYYY):					
23/12/2011 (date cannot be pre-application)					
10. Applicant Contact Details	11. Agent Contact Details				
Telephone numbers	Telephone numbers				
Country code: National number: Extension number: number:	Country code: National number: Extension number:				
	0207 004 1700				
Country code: Mobile number (optional):	Country code: Mobile number (optional):				
Country code: Fax number (optional):	Country code: Fax number (optional):				
Email address (optional):	Email address (optional):				
	HOLLY.FARROW@DP9.CO.UK				
12. Site Visit					
Can the site be seen from a public road, public footpath, bridleway	y or other public land? X 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:					
Sittact name.	Telephone number.				
Email address:					