

Application for approval of details reserved by condition.

Town and Country Planning Act 1990

Planning (Listed Buildings and Conservation Areas) Act 1990

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. Applic	ant Name and Address	2. Agent Name and Address
Title:	First name:	Title: MR First name: STEVE
Last name:		Last name: TAY CAR
Company (optional):	NETWORK RALL IN FRANTRUCTURE LTD	Company (optional): NETWORK RAL INARASTRUCTURES CTD
Unit:	House House suffix;	Unit: House House suffix:
House name:	KINGS RACE	House name:
Address 1:	90 YORK MAN	Address 1: 1 EVERIMON STREET
Address 2:		Address 2:
Address 3:		Address 3:
Town:	Landon	Town: UMan
County:		County:
Country:		Country:
Postcode:	WI 9AS	Postcode: NWI 20N

3. Site Address Details	A Propapalization Advis			
Please provide the full post address of the application site.	4. Pre-application Advice Has assistance or prior advice been sought from the local			
Unit: Houle House suffix:	authority about this application?			
name: KING'I CRUNS STATION	If Yes, please complete the following information about the advice			
Address 1: EVSTON F 240	application more efficiently).			
Address 2:	Please tick if the full contact details are not known, and then complete as much as possible:			
Address 3:	Officer name:			
Town:	Reference:			
County:				
Postcode $\mathcal{N}(\mathcal{PAV})$				
Description of location or a urid reference	Date (DD/MM/YYYY): (must be pre-application submission)			
(must be completed if postcode is not known):	Details of pre-application advice received?			
Easting: Northing:	BURING REGUME MERITAGE			
Description:	LAISON METTING			
5. Description Of Your Proposal				
Please provide a description of the approved development as shown	on the decision letter in the line of the second			
REDENTIONENT OF KING'S CROSS STATION				
Reference number: 200 4 /339 4 (C Date of decision:	09 (11/07 (Date must be pre-application submission) (DD/MM/YYYY)			
Please state the condition number(s) to which this application relates				
1. CONDITION 6	6.			
2.	7.			
3.	8.			
4.	9.			
5.	10.			
Has the development already started?	Yes No			
If Yes, please state when the development started (DD/MM/YYYY):	(date must be pre-application submission)			
Has the development been completed?	Yes No			
If Yes, please state when the evelopment was completed (DD/MM/Y	YYY): (date must be pre-application submission)			
6. Discharge Of Condition				
Please provide a full description and/or list of the materials/details tha	t are being submitted for approval			
SEE CONER LETTER	the being submitted for approval:			
Jet Wer Etter				
7. Part Discharge Of Condition(s)				
Are you seeking to discharge only part of a condition?	Yes No			
If Yes, please indicate which \mathbf{p} art of the condition your application rela	ites to:			
SEE COVER LETTER				
	SDate: 2007/08/22 15:20:09 \$ SRevision: 1.20 \$			

8. Planning Application Requirements - Checklist Please read the following checklist to make sure you have sent all the information required will result in your application being deemed inva the Local Planning Authority has been submitted.	lid. It will not be considered valid until all mormation required by
3 copies of a completed and dated application form:	3 copies of other plans and drawings or information necessary to describe the subject of the application:
9. Declaration I/we hereby apply for planning permission/consent as described in thi information. Signed - Applicant:	s form and the accompanying plans/drawings and additional Or signed - Agent:
Date (DD/MM/YYYY):	
10. Applicant Contact Details	11. Agent Contact Details
Telephone numbers Extension number: Country code: National number: Country code: Mobile number (optional): Country code: Fax number (optional): Country code: Fax number (optional): Email address (optional): Image: Country code in the second se	Telephone numbers Extension Country code: National number: number: OLO MONTON 74(9 Image: Country code: Image: Country code: Country code: Mobile number (optional): Image: Country code: Country code: Fax number (optional): Image: Country code: Email address (optional): Image: Country code: Image: Country code:
Email address (optional):	Steven. baylavenetworkrail. co.vt
12. Site Visit Can the site be seen from a public road, public footpath, bridleway or If the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (<i>Please select only one</i>) If Other has been selected, please provide: Contact name:	other public land? Yes No Agent Applicant Other (if different from the agent/applicant's details) Telephone number:
Email address:	