



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. Applicant Name and Address		2. Agent Name and Address
Title:	First name:	Title: MR First name: STEVE
Last name:		Last name: TAYLOR
Company (optional):	NETWORK RAIL INFRASTRUCTURE LTD	Company (optional): METWOKK RAIL INFRAPTINGTIME CTD
Unit:	House number: House suffix:	Unit: House House suffix:
House name:	KING'S PLACE	House name:
Address 1:	90 YORK WAY	Address 1: 1 EVERSHOLT STREET
Address 2:		Address 2:
Address 3:		Address 3:
Town:	LONDON	Town: LONDON
County:		County:
Country:		Country:
Postcode:	NI 9AS NWI 26N	Postcode: NWI 20N

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 number: House suffix:	authority about this application?			
House name: RAILWAY ARCHES	If Yes, please complete the following information about the advice			
Address 1: 52 - 66 WILKIN ST. MENS	you were given. (This will help the authority to deal with this application more efficiently).			
Address 2: Lowon	Please tick if the full contact details are not known, and then complete as much as possible:			
Address 3:	Officer name:			
Town:	JOANNA ECCLETTONE			
County:	Reference:			
(optional): 1000 3 3N V	Date (DD/MM/YYYY): (must be pre-application submission)			
Description of location or a grid reference. (must be completed if postcode is not known):	Details of pre-application advice received?			
Easting: Northing:	EMAL CORRESPONDENCE			
Description:	POST - DECISION			
	<u> </u>			
5. Description Of Your Proposal				
Please provide a description of the approved development as show and date of decision in the sections below:	vn on the decision letter, including the application reference number			
CHANGE OF US: , ERECTION ON EXT	-LARIONIC & To			
Reference number: 200 / 5163 / P Date of decision: 20 / 07 / 2009 (Date must be pre-application submission) (DD/MM/YYYY)				
Please state the condition number(s) to which this application relationships to the condition of the conditi				
1. CONDITION 3 a b cd	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 development was completed (DD/MN	M/YYYY): (date must be pre-application submission)			
6. Discharge Of Condition				
Please provide a full description and/or list of the materials/details that are being submitted for approval:				
PRG NO: & GOL/WILK/OOS REVS				
(/ 1.700)				
7. Part Discharge Of Condition(s)				
Are you seeking to discharge only part of a condition?	Yes No			
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 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.				
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:			
O. Dealerstien				
 Declaration I/we hereby apply for planning permission/consent as described in the information. 	nis form and the accompanying plans/drawings and additional			
Signed - Applicant:	Or signed Agent:			
Date (DD/MM/YYYY):				
(date cannot be pre-application)				
(date cannot be pre-application)				
10. Applicant Contact Details	11. Agent Contact Details			
Telephone numbers	Telephone numbers			
Country code: National number: Extension number:	Extension Country code: National number: number:			
	020 7904 7419			
Country code: Mobile number (optional):	Country code: Mobile number (optional):			
Modific Hamilton (optional).	Industrial industrial (optional).			
Country code: Fax number (optional):	Country code: Fax number (optional):			
Country code. 1 ax number (optional).	Tax number (optional).			
Facilia delega (antique)	Freil address (optional).			
Email address (optional):	Email address (optional):			
	Steven. taylor Evetuakrail. co. uk			
12 Cita Vicia				
12. 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: