Application for Planning Permission. Town and Country Planning 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.

First name:

1. Applicant Name and Address

It is important that you read the accompanying guidance notes as incorrect completion will delay the processing of your application.

2. Agent Name and Address

1.		
Last name		Last name: HANN
Company (optional):		Company
Unit:	House House	(optional): CLARKE 7ELECOM LIMITED Unit: House House
House	number: suffix:	number: suffix:
name:	VODAFONE HOUSE	House name: PARTINGTON HOUSE
Address 1:	THE CONNECTION	Address 1: STOCK LANE
Address 2:		Address 2:
Address 3:		Address 3:
Town:	NEWBURY	Town: OLDHAU
County:	BERKSHIRF	County:
Country:	ENGLAND	Country:
Postcode:	RG14 2FN	Postcode: OL9 964
<u> </u>	Ny/F CTN	
3. Descri	iption of the Proposal	
Please desc	iption of the Proposal cribe the proposed development, including any change	of use:
Please desc	iption of the Proposal cribe the proposed development, including any change OVAL OF THE EXTENTION 3 000	e of use:
Please desc REMO EQUI	iption of the Proposal cribe the proposed development, including any change OVAL OF THE EXZSTING 3 NO PMENT CABINET & THE TAIRTAL	e of use: D. VODAFONE ANTENNAS & I NO.
Please desc REMO EQUI 2 NO.	iption of the Proposal cribe the proposed development, including any change OVAL OF THE EXZSTING 3 NO PMENT CABINET & THE INSTALL REPLACEMENT CARTILLES	e of use: D. VODAFONE ANTENNAS & I NO. LATION OF 3 NO. REPLACEMENT ANTENNAS,
Please desc REMO EQUI 2 NO.	iption of the Proposal cribe the proposed development, including any change OVAL OF THE EXZSTING 3 NO PMENT CABINET & THE INSTALL REPLACEMENT CARTILLES	e of use: D. VODAFONE ANTENNAS & I NO. LATION OF 3 NO. REPLACEMENT ANTENNAS,
Please desc REMO EQUI 2 NO.	iption of the Proposal cribe the proposed development, including any change OVAL OF THE EXZSTING 3 NO PMENT CABINET & THE INSTALL REPLACEMENT CARTILLES	e of use: D. VODAFONE ANTENNAS & I NO.
Please desc REMO EQUI 2 NO.	iption of the Proposal cribe the proposed development, including any change OVAL OF THE EXZSTING 3 NO PMENT CABINET & THE INSTALL REPLACEMENT CARTILLES	e of use: D. VODAFONE ANTENNAS & I NO. LATION OF 3 NO. REPLACEMENT ANTENNAS,
Please desc REMO EQUI 2 NO.	iption of the Proposal cribe the proposed development, including any change OVAL OF THE EXZSTING 3 NO PMENT CABINET & THE INSTALL REPLACEMENT CARTILLES	e of use: D. VODAFONE ANTENNAS & I NO. LATION OF 3 NO. REPLACEMENT ANTENNAS,
Please desc REMO EQUI 2 NO. ANCI	iption of the Proposal cribe the proposed development, including any change OVAL OF THE EXZSTING 3 NO PMENT CABINET & THE INSTALL REPLACEMENT CABINETS UTILIZE LLARY OF LOPMENT THERETO	POFUSE: D. VODARONE ANTENNAS & I NO. LATION OF 3 NO. REPLACEMENT ANTENNAS, SZNG THE EXZSTING POLES & ON THE ROOFTOD OF DUTCH HOUSE.
Please desc REMO EQUI 2 NO. RNC I	iption of the Proposal cribe the proposed development, including any change DVAL OF THE EXZSTING 3 NO PMENT CABINET & THE INSTALL REPLACEMENT CABINETS UTILIZE LLARY OF LOPMENT THERETO	enfuse: D. VODARONE ANTENNAS & I NO. LATION OF 3 NO. REPLACEMENT ANTENNAS, SZNG THE EXZSTING POLES & ON THE ROOFTOD OF DUTCH HOUSE.
Please desc REMO EOMI 2 NO. RNC I Has the build If Yes, please work or use fas the build	iption of the Proposal cribe the proposed development, including any change OVAL OF THE EXISTING 3 NO PMENT CABINET & THE INSTAU REPLACEMENT CABINETS UTILIZE LL ARY OF LOPMENT THERETO Iding, work or change of use already started? The estate the date when building, The were started (DD/MM/YYYY): Iding, work or change of use been completed?	enfuse: D. VODAFONE ANTENNAS & I NO. LATIZON OF 3 NO. REPLACEMENT ANTENNAS, LATIZON OF 3 NO. REPLACEMENT ANTENNAS, SZNG THE EX2STING POLES & ON THE ROOFTOP OF DUTCH HOUSE.
Please desc REWC EOWI 2 NO. ANCI Has the build If Yes, please work or use that the build if Yes, please	iption of the Proposal cribe the proposed development, including any change OVAL OF THE EXZSTANG 3 NO PMENT CABINET & THE INSTALL REPLACEMENT CABINETS UTILIZE LL ARY OF LOPMENT THERETO Iding, work or change of use already started? e state the date when building, e were started (DD/MM/YYYY):	e of use: D. VODARONE ANTENNAS & I NO. LATION OF 3 NO. REPLACEMENT ANTENNAS, LATION OF 3 NO. REPLACEMENT ANTENNAS, SZNG THE EXISTING POLES & ON THE ROOF TOP OF DUTCH HOUSE. Yes No (date must be pre-application submission) Yes No
Please desc REWC EOWI 2 NO. ANCI Has the build If Yes, please work or use that the build if Yes, please	iption of the Proposal cribe the proposed development, including any change DVAL OF THE EXISTING 3 NO PMENT CABINET & THE INSTALL REPLACEMENT CABINETS UTILIZE LL ARY OF LOPMENT THERETO Iding, work or change of use already started? The estate the date when building, The were started (DD/MM/YYYY): Iding, work or change of use been completed? The state the date when the building, work	e of use: D. VODARONE ANTENNAS & I NO. LATION OF 3 NO. REPLACEMENT ANTENNAS, SING THE EXISTING POLES & ON THE ROOF TOP OF DUTCH HOUSE. Yes No (date must be pre-application submission)

4. Site A	ddress Details	5. Pre-application Advice
Please prov	ride 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? Yes No
House name:	DUTCH HOUSE	If Yes, please complete the following information about the advice
Address 1:		you were given. (This will help the authority to deal with this application more efficiently).
Address 2:	HOLBURN	Please tick if the full contact details are not known, and then complete as much as possible:
Address 3:	LONDON	Officer name:
Town:		CHIEF PLANNING OFFICER
County:		Reference:
Postcode	WCIV 7LL	
Description	of location or a grid reference. mpleted if postcode is not known):	Date (DD/MM/YYYY):
i	30948 Northing: 181591	(must be pre-application submission) 22/04/2014
Description		Details of pre-application advice received?
		NO SPECIFIC COMMENTS 70
		PATE.
6. Pedestri	an and Vehicle Access, Roads and Rights of Way	7. Waste Storage and Collection
	tered vehicle access proposed	
to or from the	e public highway? Yes No	Do the plans incorporate areas to store and aid the collection of waste?
Is a new or all	tered pedestrian	I PINO
access propo	sed to or from	If Yes, please provide details:
the public hig	ghway? Yes 📝 No	
Are there any	new public roads to be	
provided with	nin the site? Yes V No	
Are there any	new public	
	to be provided	
	cent to the site? Yes No	
Do the propo /extinguishm	sals require any diversions	Have arrangements been made
creation of rig		for the separate storage and
	red Yes to any of the above questions, please show	collection of recyclable waste? Yes No
details on you (s)/drawings(ur plans/arawings and state the reterence of the plan	If Yes, please provide details:
(3)/ drawings(.	3)	
Authori+	y Employee / Member	
Vith respect to	o the Authority, I am: (a) a member of staff	
	(b) an elected member	Do any of these statements apply to you? Yes No
	(c) related to a member of staff	
***	(d) related to an elected member	
t Yes, please p	provide details of the name, relationship and role	
		The second secon

	Existing (where applicable)	Proposed			Not applicable	Don
Walls		SEE (09201011	PLANS		
Roof		266 €	ENCLOSED	PANS		
Windows						
Doors						
Boundary treatments (e.g. fences, walls)						
Vehicle access and hard-standing						Towns of the Control
Lighting					\square	
Others (please specify)		266 EV	UCC 0240 P	LAND		
Are you supplying addit	tional information on submitted pla	n(s)/drawing(s)/design and ac	cess statement?	✓ Yes		No
Yes, please state reference (200A), 200A, 2	ences for the plan(s)/drawing(s)/des	ign and access statement:				Market and the state of the sta
0. Vehicle Parking						
	nation on the existing and proposed Total					
Type of Vehicle	Existing	Total proposed (inclusive spaces retained)	uding)	Difference in spaces		and the state of t
Cars Light goods vehicl	As/					
public carrier vehic	iles					
Motorcycles Disability spaces				400		***
Cycle spaces					Ministra	
Other (e.g. Bus)						
Other (e.g. bits)			Manager and the state of the st			Omborna

11. Foul Sewage	12. Assessment of Flood Risk
Please state how foul sewage is to be disposed of: Mains sewer Cess pit	Is the site within an area at risk of flooding? (Refer to the Environment Agency's Flood Map showing flood zones 2 and 3 and consult Environment Agency standing advice and your local
Septic tank Other	planning authority requirements for information as necessary.)
Package treatment plant	If Yes, you will need to submit a Flood Risk Assessment to consider
Protection 1	the risk to the proposed site.
Are you proposing to connect to the existing drainage system? Yes No	Is your proposal within 20 metres of a watercourse (e.g. river, stream or beck)? Yes No
If Yes, please include the details of the existing system on the application drawings and state references for the plan(s)/drawing(s):	Will the proposal increase the flood risk elsewhere?
	How will surface water be disposed of?
	Sustainable drainage system Existing watercourse
	Soakaway Pond/lake
	Main sewer
13. Biodiversity and Geological Conservation	14. Existing Use
To assist in answering the following questions refer to the guidance notes for further information on when there is a reasonable likelihood that any important biodiversity or geological conservation features may be present or nearby and whether	Please describe the current use of the site: ROOF70P TELECONULUNICATIONS INSTALLATION
they are likely to be affected by your proposals. Having referred to the guidance notes, is there a reasonable	
likelihood of the following being affected adversely or conserved and enhanced within the application site, or on land adjacent to	Is the site currently vacant? Yes No
or near the application site?	If Yes, please describe the last use of the site:
a) Protected and priority species: Yes, on the development site	
Yes, on land adjacent to ownear the proposed development No	When did this use end (if known)?
b) Designated sites, important habitats or other biodiversity	DD/MM/YYYY (date where known may be approximate)
features: Yes, on the development site	Does the proposal involve any of the following? If yes, you will need to submit an appropriate contamination assessment with your application.
Yes, on land adjacent to or near the proposed development No	Land which is known to be contaminated? Yes Vo
c) Features of geological conservation importance:	Land where contamination is suspected for all or part of the site? Yes No
Yes, on the development site	A proposed use that would
Yes, on land adjacent to or near the proposed development No	be particularly vulnerable to the presence of contamination? Yes No
15. Trees and Hedges	16. Trade Effluent
Are there trees or hedges on the proposed development site? Yes No	Does the proposal involve the need to dispose of trade effluents or waste? Yes No
And/or: Are there trees or hedges on land adjacent to the proposed development site that could influence the development or might be important as part of the local landscape character? Yes No	If Yes, please describe the nature, volume and means of disposal of trade effluents or waste
f Yes to either or both of the above, you may need to provide a full free Survey, at the discretion of your local planning authority. If a free Survey is required, this and the accompanying plan should be submitted alongside your application. Your local planning authority should make clear on its website what the survey should contain, in accordance with the current 'BS5837: Trees in relation to design, demolition and construction - Recommendations'.	\$Date:: 2013-04-30 #\$ \$Revision: 5504 \$

Houses Flats and maisonattes Live-work units Cluster flats Sheltered housing Bedsit/studios Unknown type	Not known		Num 2	aber o	f Bed 4+	rooms Unknowr	Total	Market Housing Houses	Not known	1	Num 2	ber o	f Bed	lrooms Unknow	То
Houses Flats and maisonattes Live-work units Cluster flats Sheltered housing Bedsit/studios Unknown type				3	4+	Unknowr	1		 	1	2	3	4+	Unknow	
Flats and maison attes Live-work units Cluster flats Sheltered housing Bedsit/studios Unknown type		otals						nouses			1				n_
Live-work units Cluster flats Sheltered housing Bedsit/studios Unknown type		otals									-		+		-
Cluster flats Sheltered housing Bedsit/studios Unknown type		otals						Flats and maisonettes			-	-	-		
Sheltered housing Bedsit/studios Unknown type		otals						Live-work units			-	-	-		-
Bedsit/studios Unknown type Social Rented		otals			-			Cluster flats							-
Unknown type Social Rented	T	otals	+-	-	t			Sheltered housing			-		-		-
Social Rented	T	otals		1				Bedsit/studios				-	-		+
Social Rented		Ulais	3/a 1 1	<u> </u>	4			Unknown type			<u> </u>		<u> </u>		4
Social Rented			<u>Xu+0</u>	0+(+	$a + \epsilon$	(g+f+g)=			Te	otals	(a + t) + <i>c</i> +	$-d+\epsilon$	e + f + g) =	
Social Kenteu	Not		Num	ber of	Bedr	ooms	Total		Not		Numl	ner of	Red	rooms	То
	known	1	2	3	7	Unknown		Social Rented	known	1	2	3	4+	· -	
Houses								Houses							T
Flats and maisonettes								Flats and maisonettes							T
Live-work units						\		Live-work units							T
Cluster flats								Cluster flats							
Sheltered housing		al-il-il-il-ip-a-a-a-p-a-p-p-p-p-						Sheltered housing				***************************************			
Bedsit/studios								Bedsit/studios				***************************************			
Unknown type								Unknown type							
	Тс	tals	(a + b) + c +	d + e	+ f + g) =			To	tals	(a + b	+ c +	d + e	+ f + g) =	
	Not		Numk	oer of	Podr		Total							***************************************	T
ntermediate	nown	1	2	3	4+	Unknown	Total	Intermediate	Not known	1	Numb 2	er of	-	ooms Unknown	Tot
Houses								Houses				th Pool and pool and a second			
lats and maisonettes								Flats and maisonettes							
ive-work units								Live-work units					***************************************		
Cluster flats								Cluster flats						The state of the s	
Sheltered housing								Sheltered housing							
Bedsit/studios								Bedsit/studios							
Jnknown type		-						Unknown type							
	То	tals ((a + b	+ (+)	d + e ·	+ f + g) =		Name of the second seco	То	tals (a + b	+ C +	d + e	+ f + g) =	Book Change
	-														
(ey worker	Not nown	1	Vumb 2	er of I	-	oms Unknown	Total	Key worker	Not Not	1	lumb				Tota
louses		•			7,	OTATIOWIT		Houses		1	2	3	4+	Unknown	***************************************
lats and maisonettes								Flats and maisonettes			\forall				ATTENDED
ive-work units								Live-work units	듬		$\overline{}$				***************************************
luster flats								Cluster flats			- 1				***************************************
heltered housing			-					Sheltered housing	\dashv			\rightarrow			
edsit/studios			-				Land Control of the C	Bedsit/studios					+		
Inknown type		1	and the same of th				Million Colonia de la Colonia	Unknown type		-		-	-		
- / F	The same of the sa	als (a+b	+ C + C	1+e+	-f+g)=	Section of the sectio	Jimiowii type		ale /	7+6		1	+ f+\a) =	annonuse
Total proposed res				(A + B			[Total existing r				2 ٣ ٥		= 47	

				in or change of ι				No	
	se class/type		Not applicable n	Existing gross internal floorspace (square metres)	Gross interna to be lost by use or de	I floorspace change of molition	ing table: Total gross internal floorspace proposed (including change of use)(square metres)	Net additional gross internal floorspace following development (square metres)	
A1	SH	iops							
		àble area:							
A2	Finan professio	cial and nal services							
A3	Restauran	ts and cafes							
A4	Drinking es	tablishments	Z						
A5	Hot food	takeaways							
B1 (a)	1	ner than A2)							
B1 (b)		rch and opment							
B1 (c)	Light in	ndustrial							
B2	General	industrial							
B8	1	distribution		· · · · · · · · · · · · · · · · · · ·					
C1		nd halls of Jence							
C2		institutions							
D1		sidential utions							
D2	Assembly	and leisure							
OTHER									
Please Specify									
	To	tal			···				
	dition, for ho	tels, resident	ial inst	titutions and hos	tels, please ad	ditionally ind	icate the loss or gain of	rooms	
Use class	Type of use	applicable	EXISTI	of use or demo	ost by change olition	lotal rooms cha	s proposed (including anges of use)	Net additional rooms	
C1	Hotels		·	***************************************					
	Residential Institutions								
OTHER									
Please Specify									
9. Em	ployment								
Please co	mplete the f	ollowing info	imati	on regarding em	ployees:				
Full-time				Full-time	Part-time			al full-time Juivalent	
Exis	sting employ	rees						2 4 4 4 4 4 4 5 5 1 5	
Prop	oosed emplo	yees							
0. Hou	irs of Ope	ning					en e		
Please	e state the ho	ours of openi	ng for	each non-reside	ntial use propo	sed:			
	Use	Мо	nday	to Friday	Saturday		Sunday and Bank Holidays	Not known	

						4100 000		The state of the s	

Please state the site area in hectares (ha) 0.0132 Na

\$Date:: 2013-04-30 #\$ \$Revision: 5504 \$

22. Industrial or Commercial Pro	cesses	and Machin	36rV				
Please describe the activities and processor	os which	s	iery				
Please describe the activities and processes which would be carried out on the site and the end products including							
plant, ventilation or air conditioning. Pleas type of machinery which may be installed	to inclu	datha i					
Is the proposal a waste management deve	elopme	nt? Yes	No				
If the answer is Yes, please complete the fo	ollowin	g table:					
	e	The total car	nacity of the voice	d in cubic metres,			
	icab	including eng	ineering surcha	rge and making no	Maximum annual operat	tional	
	Not applicable	tonnes if so	r cover or restor lid waste or litre	ration material (or es if liquid waste)	throughput in tonne (or litres if liquid wast	:s :e)	
loert landfill				, , , , , , , , , , , , , , , , , , , ,			
Non-hazardous landfill							
Hazardous landfill	十一十		***************************************				
Energy from waste incineration	十三十						
Other incineration	十三十						
Landfill gas generation plant	十一十						
Pyrolysis/gasification	till t						
Metal recycling site	A						
Transfer stations	而						
Material recovery/recycling facilities (MRFs)	計計						
Household civic amenity sites	計計						
Open windrow composting	情						
In-vessel composting							
Anaerobic digestion	情						
Any combined mechanical, biological and/ or thermal treatment (MBT)						-	
Sewage treatment works							
Other treatment							
Recycling facilities construction, demolition						***************	
and excavation waste Storage of waste							
Other waste management							
Other developments	井						
Please provide the maximum annual operati	onal the	roughnut of the	6-11				
Municipal	Orial Citi	ougriput or trie	rollowing waste	e streams:			
Construction, demolition and ex	xcavatio)n					
Commercial and industri		/ 1					
Hazardous							
f this is a landfill application you will need to blanning authority should make clear what ir	provid nformat	e further information it requires o	nation before yo	ur application can be	e determined. Your waste		
3. Hazardous Substances		r e					
oes the proposal involve the use or storage he following materials in the quantities state	of any o	of v? \ \ Yes	No				
Yes, please provide the amount of each sub-	u belov stance t	that is involved:	No	Not applicable			
If Yes, please provide the amount of each substance that is involved: Acrylonitrile (tonnes) Phosgene (tonnes)						The state of the s	
Ammonia (tonnes)	lydroge	en cyanide (toni	nes)	- Proposition of the Contract	ir dioxide (tonnes)		
Bromine (tonnes)		id oxygen (tonr		Julyila	Flour (tonnes)	_	
Chlorine (tonnes)		oleum gas (tonr		Refined wh	ite sugar (tonnes)	- Contraction of the Contraction	
her:	······································		Other:		sagar (tornies)		
nount (tonnes):			Amount (ton)	2001			

24. Ownership Certificates and Agricultural Land Declaration One Certificate A, B, C, or D, must be completed with this application form CERTIFICATE OF OWNERSHIP - CERTIFICATE A Town and Country Planning (Development Management Procedure) (England) Order 2010 Certificate under Article 12 I certify/The applicant certifies that on the day 21 days before the date of this application nobody except myself/ the applicant was the owner* of any part of the land or building to which the application relates, and that none of the land to which the application relates is, or is part of, an agricultural holding* NOTE: You should sign Certificate B, C or D, as appropriate, if you are the sole owner of the land or building to which the application relates but the land is, or is part of, an agricultural holdingowner" is a person with a freehold interest or leasehold interest with at least 7 years left to run. ** "agricultural holding" has the meaning given by reference to the definition of "agricultural tenant" in section 65(8) of the Act. Signed - Applicant: Or signed - Agent: Date (DD/MM/YYYY): **CERTIFICATE OF OWNERSHIP - CERTIFICATE B** Town and Country Planning (Development Management Procedure) (England) Order 2010 Certificate under Article 12 I certify/ The applicant certifies that I have/the applicant has given the requisite notice to everyone else (as listed below) who, on the day 21 days before the date of this application, was the owner* and/or agricultural tenant** of any part of the land or building to which this application relates. * "owner" is a person with a freehold interest or leasehold interest with at least 7 years left to run. ** "agricultural tenant" has the meaning given in section 65(8) of the Town and Country Planning Act 1990 Name of Owner / Agricultural Tenant Address Date Notice Served CUDANTE ANDRENS 2MD JAMES STREET 23.5.2014 Signed - Applicant: Or signed - Agent Date (DD/MM/YYYY):

02/06/2014

rown and Country Planning (Develor I certify/ The applicant certifies that: Neither Certificate A or B can be issued the land or building, or of a part of it is in a person with a freehold interest of it is a person with a freehold interest of it is a person with a freehold interest of it is a person with a freehold interest of it is a person with a freehold interest of it is a person with a freehold interest of its interest	certificate of ownership - opment Management Procedure ued for this application in to find out the names and address, but I have/the applicant has been seen to be se	CERTIFICATE C e) (England) Order 2010 Certifi esses of the other owners* and/cen unable to do so.	
Name of Owner / Agricultural Tenant	Addr	ess	Date Notice Served
			Date Wollce Served
Notice of the application Laboratory			
Notice of the application has been published (circulating in the area where the land is situa	in the following newspaper ted):	On the following date (wh than 21 days before the day	ich must not be earlier
			or the application):
Signed - Applicant:	Or signed - Agent:		Date (DD/MM/YYYY
Town and Country Planning (Develop I certify/ The applicant certifies that: Certificate A cannot be issued for this a All reasonable steps have been taken to date of this application, was the owner have/ the applicant has been unable to "owner" is a person with a freehold interest or lect "agricultural tenant" has the meaning given in the steps taken were:	pplication o find out the names and addresse * and/or agricultural tenant** of a o do so.	s of everyone else who, on the on ny part of the land to which this	
Notice of the Property of the			The state of the s
Notice of the application has been published in circulating in the area where the land is situate	the following newspaper d):	On the following date (which than 21 days before the date	h must not be earlier e of the application):
igned - Applicant:	Or signed - Agent:		
			Date (DD/MM/YYYY):
Planning Application Requiremer lease read the following checklist to make sure aformation required will result in your application the Local Planning Authority has been submitted		in support of your proposal. Fail ot be considered valid until all inf	ure to submit all
he original and 3 copies of a completed and dar oplication form:	ted The corre		☐'
he original and 3 copies of the plan which ident he land to which the application relates drawn t entified scale and showing the direction of Nor	o an	nal and 3 copies of a design and a disee help text and guidance no	access statement, tes for details):
ne original and 3 copies of other plans and draw formation necessary to describe the subject of	ownershi	p Certificate (A, B, C or D – as app e 12 Certificate (Agricultural Hold	dicable)

Signed - Applicant:	Date (DD/MM/YYYY): (date cannot be pre-application)
27. Applicant Contact Details Telephone numbers Country code: National number: Extension number: Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional):	28. Agent Contact Details Telephone numbers Country code: National number: Old/785 4500 Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional): Email address (optional):
29. 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? (Please select only one) If Other has been selected, please provide: Contact name: Email address:	