## 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.

Applicant Name and Address		2. Agent Name and Address		
Title:	MR First name: SIMON	Title: First name:		
Last name:	JEFFERT	Last name:		
Company (optional):	WILLMOTT DIXON HOUSING	Company (optional):		
Unit:	House House suffix:	Unit: House House suffix:		
House name:		House name:		
Address 1:	Aco Business PARK	Address 1:		
Address 2:	HITCHIN ROAD	Address 2:		
Address 3:		Address 3:		
Town:	SHEFFORD	Town:		
County:	BEDFORDSHRE	County:		
Country:		Country:		
ostcode:	5917 575	Postcode:		

	ddress Details		re-application Advice
A CONTRACTOR	vide the full postal address of the application site.	Has a	ssistance or prior advice been sought from the local ority about this application?
Unit:	House House suffix:		Yes Yes No
House name:		If Yes	please complete the following information about the advice
Address 1:	SITE BULLDED BY CHESTER ROAD	applie	vere given. (This will help the authority to deal with this cation more efficiently).
Address 2:			e tick if the full contact details are not n, and then complete as much as possible:
1001100222	BALMURE STREET & KAMBONSTREET		
Address 3:		Unic	er name:
Town:	CAMBEN	Rofar	ence:
County:		Noise	61106.
Postcode	NIG SBZ		Date (DD/MM/YYYY):
(optional): Description	of location or a grid reference.		be pre-application submission)
- T	ompleted if postcode is not known):	Detai	ls of pre-application advice received?
Easting:	Northing:		
Description	1: I of Four Storey Buildings to Provide		
	IDENTIAL UNITS AND COMMERCIAL UNITS		
5. Descri	ption Of Your Proposal		
Please prov	ride a description of the approved development as shown	on the	decision letter, including the application reference number
and date of	decision in the sections below:		(E) TO PROVIDE 53 RESIDENTIAL UNITS
(CLASSES	) AND COMMERCIAL UNITS (432 . 1 SQN	) TO 1	NE LUDE RETAIL (CLASS AI) HON RESIDENTIAL
MSTITUTE	ON (CLASS DI) AND ASSOCIATED CYCLE PAR	exing	& LANDSCAPING
Reference n	iumber: 2010/54-15/f Date of decision:		(Date must be pre-application
	the condition number(s) to which this application relate		submission) (DD/MM/YYYY)
		6.	
23	5. LANDSCAPE MANAGEMENT RON		Annual Control of the
2.		7.	
3.		8.	
4.		9.	
5.		10.	
Has the dev	elopment already started?		Yes No
	e state when the development started (DD/MM/YYYY):	Г	(date must be pre-application
		L	submission)
Has the dev	elopment been completed?	Ĺ	Yes No
If Yes, pleas	e state when the development was completed (DD/MM/)	(YYY):	(date must be pre-application submission)
Disabar	and Of Condition		
	ge Of Condition de a full description and/or list of the materials/details tha	at are bai	ng submitted for any and
LANDSCA	HE MANAGEMENT STRATEGY AND MAINTE	NANCE	PLAN. (AUG 2014) PLANTING PLAN (326,04)
PLANTING	PLAN DETAIL AREA (326-07) GREEN AND	BROWN	3 ROOFS (CLDL/2212/005)
	scharge Of Condition(s)		,
Are you seek	ing to discharge only part of a condition?		Yes No
res, piease	indicate which part of the condition your application rela	ates to:	

Please read the following checklist to make sure you have sent all the information in support of your proposal. Failure to submit all information in information in support of your proposal. Failure to submit all information heigh deemed invalid. It will not be considered valid until all information required by the Local Planning Authority has been submitted.  The original and 3 copies of a completed and dated application form:  The correct fee:  Declaration  We hereby apply for planning permission/consent as described in this form and the accompanying plans/drawings and additional information. I we confirm that, to the best of my/our knowledge, any facts stated are true and accurate and any opinions given are the graunien opinions of the person(s) giving them.  Signed - Applicant;  Or signed - Agent:  Or signed - Agent:  On Applicant Contact Details  Telephone numbers  Country code: Matingal number:  Country code: Matingal number:  Country code: Mobile number (optional):  Country code: Mobile number (optional):  Email address (optional):  Email address (optional):  Email address (optional):  Email address (optional):  Country code: Mobile number (optional):  Email address (optional):  Email address (optional):  Country code: Mobile number (optional):  Email address (optional):  Email address (optional):  Email address (optional):  Country code: Mobile number (optional):  Email address (optional):  Country code: Mobile number (optional):  Email address (optional):  Country code: Mobile number (optional):  Country code: Mobile num				
or information necessary to describe the subject of the application:  If the correct fee:  Declaration  We hereby apply for planning permission/consent as described in this form and the accompanying plans/drawings and additional information. Necessary to describe the subject of the application:  We hereby apply for planning permission/consent as described in this form and the accompanying plans/drawings and additional information. Necessary to describe the subject of the application:  We hereby apply for planning permission/consent as described in this form and the accompanying plans/drawings and additional information to the person(s) giving them.  Or signed - Agent:  Or signed - Agent:  Or signed - Agent:  Telephone numbers  Country code: National number:  Country code: National number:  Country code: National number:  Country code: Mobile number (optional):  Extension number:  Country code: Fax number (optional):  Email address (optional):  Email ad	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 in the Local Planning Authority has been submitted.	re information in support of your proposal. Failure to submit all availd. It will not be considered valid until all information required by		
Declaration  I/we hereby apply for planning permission/consent as described in this form and the accompanying plans/drawings and additional information. I/we confirm that, to the best of my/our knowledge, any facts stated are true and accurate and any apinions given are the gramune opinions of the person(s) giving them.    Or signed - Agent   Or signed - Agent	The original and 3 copies of a The completed and dated application form:	original and 3 copies of other plans and drawings information necessary to describe the subject of the application:		
We hereby apply for planning permission/consent as described in this form and the accompanying plans/drawings and additional information. We confine that, to the best of my our knowledge, any facts stated are true and accurate and any opinions given are the enumber of the person(s) giving them.  Or signed - Agent:  Ountry code: National number  Country code: National number  Country code: Mabile number (optional):  Country code: Mabile number (optional):  Country code: Mabile number (optional):  Country code: Fax number (optional):  C	The correct fee:			
Date (Dumity Code:   (Dumity Code: National number:   (Dumity Code	9. Declaration  I/we hereby apply for planning permission/consent as described in information. I/we confirm that, to the best of my/our knowledge, an genuline opinions of the person(s) giving them.	this form and the accompanying plans/drawings and additional y facts stated are true and accurate and any opinions given are the		
(date cannot be pre-application)  10. Applicant Contact Details  (elephone numbers  Country code: National number:  Country code: Mational number (optional):  Country code: Fax number (optional):  Email address (optional):  Email address (optional):  Country code: Fax number (optional):  Email address (optional):  Email address (optional):  Country code: Fax number (optional):  Email address (optional):  Email	Signed - Applicant:	Or signed - Agent:		
11. Agent Contact Details	Date (DUMMONTH):  [14/58/] STALL (date cannot be pre-application)			
Telephone numbers  Extension number:  Country code: National number:  Country code: Mobile number (optional):  Country code: Fax number (optional):  Email address (optional):  Email address (optional):  Country code: Fax number (optional):  Email address (optional):  Country code: Fax number (optional):  Country code: Fax number (optional):  Email address (optiona				
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Country code: National number:  Dountry code: Mational number:  Dountry code: Mobile number (optional):  Country code: Fax number (optional):  Email address (optional):  Email address (optional):  Email address (optional):  Country code: Fax number (optional):  Email address (optional):  Email address (optional):  Country code: Fax number (optional):  Email address (optional):  Email addres		CONTRACTOR		
Country code: Fax number (optional):  (mail address (optional):  Email addr				
Email address (optional):  Email address (option	Country code: Mobile number (optional):	Country code: Mobile number (optional):		
2. Site Visit an the site be seen from a public road, public footpath, bridleway or other public land? Yes No the planning authority needs to make an appointment to carry at a site visit, whom should they contact? (Please select only one) Other has been selected, please provide: Ontact name:  Telephone number:	Country code: Fax number (optional):	Country code: Fax number (optional):		
an the site be seen from a public road, public footpath, bridleway or other public land?	Email address (optional):	Email address (optional):		
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the planning authority needs to make an appointment to carry at a site visit, who in should they contact? (Please select only one)  Other has been selected, please provide:  Ontact name:  Telephone number:	12. Site Visit			
ut a site visit, whom should they contact? (Please select only one)  Other has been selected, please provide:  Ontact name:  Telephone number:		r other public land? Yes No		
ontact name: Telephone number:	out a site visit, whom should they contact? (Please select only one)	Agent Applicant Other (if different from the agent/applicant's details)		
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mail address:	ourcocc name.	respirone number.		
	Email address:			