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		2. Agent Name and Address	
Title:	MR First name: Guy	Title:	MR First name: SIMON
Last name:	MAYDEN	Last name:	BARTLE
Company (optional):		Company (optional):	
Unit:	House number: House suffix:	Unit:	House number: 19-2 House suffix:
House name:	90 AGENT	House name:	
Address 1:		Address 1:	HOLYWELL HILL
Address 2:		Address 2:	
Address 3:		Address 3:	
Town:		Town:	STALBANS
County:		County:	MERTFORDSUIRE
Country:		Country:	
'ostcode:		Postcode:	ALI IEZ

3. Site Address Details	
Please provide the full postal address of the application site.	4. Pre-application Advice
Unit: House 12/12 A House	Has assistance or prior advice been sought from the local authority about this application?
House	If Yes, please complete the following information about the advice
Address 1: UEST BORE ROAD	you were given. (This will help the authority to deal with this 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: LONDON	
County:	Reference:
Postcode (optional): NW2 3SR	Date (DD/MM/YYYY):
Description of location or a grid reference. (must be completed if postcode is not known):	(must be pre-application submission)
Easting: Northing:	Details of pre-application advice received?
Description:	
5 Description Of Your Burney	
5. Description Of Your Proposal Please provide a description of the approved development as show and date of decision in the sections below:	n on the desiring last of the standard
ERECTION OF A PART 2, PART 3 STO.	ney and basement level
BUILDING TO MOVIDE ax 3 BED RED DEMOLITION OF NOUSES	
Reference number: 2013/7688/P Date of decision:	09/05/2014 (Date must be pre-application submission) (DD/MM/YYYY)
Please state the condition number(s) to which this application relate	s:
1. TO DISCUARGE ALL IS CONDITIONS	
2. PLEASE SEE THE ENCLOSED	7.
3. LETTER, DATED 4th FEDRUARY,	8.
4. FUR ALL DESCRIPTION OF	9.
5. FACH CONDITION	10.
Has the development already started?	Yes No
If Yes, please state when the development started (DD/MM/YYYY):	(date must be pre-application
Has the development been completed?	yes No
If Yes, please state when the development was completed (DD/MM/Y	Management Statement State
. Discharge Of Condition	
Please provide a full description and/or list of the materials/details tha	t are being submitted for approval:
SUPPORTING CETTER DATED UM FENULA	24 2015
CO CONTAINING SUPPLEMENTARY DOCUM	NENTS AS STATED IN THE LETTER
Part Discharge Of Condition(s)	
re you seeking to discharge only part of a condition? Yes, please indicate which part of the condition your application rela	Yes No
,	
	The contraction of the contracti
	5Date: 2017-07-17-85 SRevision: 4636-5

A CONTRACTOR OF THE PROPERTY O	NAME OF THE OWNER OW	
Planning Application Require Please read the following checklist to mal information required will result in your ap the Local Planning Authority has been sul	ke sure you have sent all the plication being deemed in	ne information in support of your proposal. Failure to submit all nvalid. It will not be considered valid until all information required by
The original and 3 copies of a Completed and dated application form:		e original and 3 copies of other plans and drawings information necessary to describe the subject of the application:
The correct fee:	<u> </u>	
Information. I. We confirm that, to the best genuine opinions of the person(s) giving t Signed - Applicant: Date (DD/MM/YYYY):	: of my/our knowledge, an	this form and the accompanying plans/drawings and additional y facts stated are true and accurate and any opinions given are the
10. Applicant Contact Details	Bibliochtische Americanische Groninger von Antonioper zu werde auf von Americanische Europepen gebruiten.	11. Agent Contact Details
Telephone numbers	F-1	Telephone numbers
Country code: National number:	Extension number:	Country code: Extension number:
Country code: Mobile number (optional	<u>):</u>	Country code:
Country code: Fax number (optional):		Country code: Fax number (optional):
Email address (optional):		
12. Site Visit		
Can the site be seen from a public road, pu		r other public land? Yes No
If the planning authority needs to make an out a site visit, whom should they contact?	appointment to carry (Please select only one)	Agent Applicant Other (If different from the agent/applicant's details)
f Other has been selected, please provide:		
Contact name:		Telephone number:
Email address:		