

This form is specifically designed to be printed and completed offline.

Please complete this form in block capitals using black ink to facilitate scanning.

You are advised to read the accompanying guidance notes and per-question help text.

If you would rather make this application online, you can do so on our website: https://www.planningportal.co.uk/apply

Application for Planning Permission

Town and Country Planning Act 1990 (as amended)

Privacy Notice

This form is provided by Planning Portal and based on the requirements provided by Government for the sole purpose of submitting information to the Local Planning Authority in accordance with the legislation detailed on this form and 'The Town and Country Planning (Development Management Procedure) (England) Order 2015 (as amended).

Please be aware that once you have downloaded this form, Planning Portal will have no access to the form or the data you enter into it. Any subsequent use of this form is solely at your discretion, including the choice to complete and submit it to the Local Planning Authority in agreement with the declaration section.

Upon receipt of this form and any supporting information, it is the responsibility of the Local Planning Authority to inform you of its obligations in regards to the processing of your application. Please refer to its website for further information on any legal, regulatory and commercial requirements relating to information security and data protection of the information you have provided.

Local Planning Authority details:

Publication on Local Planning Authority websites

Information provided on this form and in supporting documents may be published on the authority's planning register and website. Please ensure that the information you submit is accurate and correct and does not include personal or sensitive information. If you require any further clarification, please contact the Local Planning Authority directly.

1. Applica	ant Name and Address
Title:	MRS First name: MIMI
Last name:	GETU
Company (optional):	•
Unit:	House number: 87 House suffix:
House name:	
Address 1:	CASTLE BAD
Address 2:	
Address 3:	
Town:	LODON
County:	GREATER LONDON
Country:	UK.
Postcode:	NW1 8SU

2. Agent Nar	me and Address	
Title:	First name:	
Last name:		
Company (optional):		
Unit:	House number:	House suffix:
House name:		
Address 1:		
Address 2:		
Address 3:	0	
Town:		
County:		,
Country:		
Postcode:		

FCAB 2021

Description of the Proposal	of use:
ase describe the proposed development, including any change	TORROST FLAT INTO
CONVERTING MY 1 LARGE	I SDUDIN LOW 1010
J (TWO) SMALLER SIZED	Double BEDROOM FLAT.
as the building, work or change of use already started?	Yes No
Yes, please state the date when building, work or use were	01 09 3031 (date must be pre-application submission
Yes, please state the date when building, tarted (DD/MM/YYYY):	•
las the building, work or change of use been completed?	Yes No
to a state the date when the building, work or	(date must be pre-application submission
change of use was completed (DD/WWW, 1997)	
of care a number of permission in principle being relied on	
(technical details consent applications strip)	
Is the proposal for public service infrastructure development (within the meaning of article 2 of S.I. 2015/595 as amended by	Yes No
article 3 of S.I. 746/2021)?	
4. Site Address Details	5. Pre-application Advice Has assistance or prior advice been sought from the local
Please provide the full postal address of the application site.	Has assistance or prior advice been sagging authority about this application?
House 21	
Unit: number: sum.	lete the following information about the advis
Unit: number: Start suffix.	Lyou were given. (This will help the authority to
House name:	you were given. (This will neep the addressly application more efficiently). application more efficiently.
House Number.	Lyou were given. (This will help the authority to
House name:	you were given. (This will help the addressly designed application more efficiently). Please tick if the full contact details are not known, and then complete as much as possible:
House name: Address 1: CASTLE ROAD Address 2:	you were given. (This will neep the addressly application more efficiently). application more efficiently.
House name: Address 1: CASTLE ROAD Address 2:	you were given. (This will help the addressly desired application more efficiently). Please tick if the full contact details are not known, and then complete as much as possible: Officer name:
House name: Address 1: CASTLE ROAD Address 2:	you were given. (This will help the addressly designed application more efficiently). Please tick if the full contact details are not known, and then complete as much as possible:
House name: Address 1: CASTLE ROAD Address 2: Address 3: Town: Lowdow County: Postcode 2 2 2 8 8 1	you were given. (This will help the authors) the application more efficiently. Please tick if the full contact details are not known, and then complete as much as possible: Officer name: Reference:
House name: Address 1: CASTLE ROAD Address 3: Town: London County: Postcode (optional): MM 88U (optional): MM 88U	you were given. (This will help the authors) the application more efficiently. Please tick if the full contact details are not known, and then complete as much as possible: Officer name: Reference:
House name: Address 1: CASTLE ROAD Address 2: Address 3: Town: Lowdow County: Postcode (optional): WM 88U (pescription of location or a grid reference. (must be completed if postcode is not known):	you were given. (This will help the authors) the application more efficiently). Please tick if the full contact details are not known, and then complete as much as possible: Officer name: Reference:
House name: Address 1: CASTLE RAD Address 3: Town: London County: Postcode (optional): Description of location or a grid reference. (must be completed if postcode is not known): Easting: Northing:	application more efficiently). Please tick if the full contact details are not known, and then complete as much as possible: Officer name: Reference: Date (DD/MM/YYYY): (must be pre-application submission)
House name: Address 1: CASTLE ROAD Address 2: Address 3: Town: Lowdow County: Postcode (optional): WM 88U (pescription of location or a grid reference. (must be completed if postcode is not known):	you were given. (This will help the addressly application more efficiently). Please tick if the full contact details are not known, and then complete as much as possible: Officer name: Reference: Date (DD/MM/YYYY): (must be pre-application submission)
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6. Pedestrian and Vehicle Access, Road	s and Righ	nts of Way	7. Waste Stor	rage and Collection		
ls a new or altered vehicle access proposed to or from the public highway?	Yes	No	Do the plans inco	orporate areas to store ction of waste?	Yes	No
ls a new or altered pedestrian access proposed to or from the public highway?	Yes	No	If Yes, please pro	vide details:		
Are there any new public roads to be provided within the site?	Yes	No				
Are there any new public rights of way to be provided within or adjacent to the site?	Yes	No				
Do the proposals require any diversions /extinguishments and/or creation of rights of way?	Yes	No	Have arrangeme for the separate collection of recy	storage and	Yes	No
If you answered Yes to any of the above quidetails on your plans/drawings and state the (s)/drawings(s)	estions, plea e reference	of the plan	If Yes, please pro	ovide details:		
		-				
## F					WW .	
	•					
8. Authority Employee / Member						
It is an important principle of decision-maki means related, by birth or otherwise, closely conclude that there was bias on the part of	v enough th	at a fair-mind	ded and informed o	bserver, having considere	question, "rel d the facts, w	ated to" ould
Do any of the following statements apply t			Yes No	With respect to the auth (a) a member of staff (b) an elected member (c) related to a member (d) related to an elected	of staff	
If Yes, please provide details of their name,	role and ho	ow you are re	lated to them.			

	Existing (where applicable)			type, colour and name for eacl Proposed		Not applicable	Don't Know
/alls							
coof				× *			
Vindows				J New Winds	od neteral		
Doors						-	
Boundary treatments e.g. fences, walls)					047.4	1	
/ehicle access and nard-standing				,			
Lighting							
Others (please specify)				7		1	
		n on submitted plan(s, n(s)/drawing(s)/design		s)/design and access statemen ss statement:	Yes	·	No
0. Vehicle Parki		isting and proposed n	umber of	on-site parking spaces:			
Type of Veh	^	Total Existing		al proposed (including spaces retained)	Difference in space		
Cars	*						
Light goods ve	ehicles/ rehicles				٤		
Motorcycl							
Disability sp	paces				,		
Cycle space	ces						
Other (e.g.	Bus)						
Other (e.g.	Rus)						

1. Foul Sewage	12. Assessment of Flood Risk
lease 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 planning authority requirements for information as necessary.)
	planning authority requirements for information as necessary,
Septic tank Other	
Package treatment plant	If Yes, you will need to submit a Flood Risk Assessment to consider the risk to the proposed site.
re you proposing to onnect to the existing drainage system? Yes No	Is your proposal within 20 metres of a watercourse (e.g. river, stream or beck)? Yes No
f Yes, please include the details of the existing system on the application drawings and state references for the	Will the proposal increase the flood risk elsewhere?
olan(s)/drawing(s):	How will surface water be disposed of?
	Sustainable drainage system Existing watercourse
	□ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □
	Soakaway
	Main sewer
13. Biodiversity and Geological Conservation	14. Existing Use
	Please describe the current use of the site:
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	Residential Property
conservation features may be present or nearby and whether they are likely to be affected by your proposals.	
Having referred to the guidance notes, is there a reasonable	Is the site currently vacant?
likelihood of the following being affected adversely or conserved and enhanced within the application site, or on land adjacent to	If Yes, please describe the last use of the site:
or near the application site?	
a) Protected and priority species:	
Yes, on the development site	
Yes, on land adjacent to or near the proposed development	
No	DD/MM/YYYY (date where known may be approximate)
b) Designated sites, important habitats or other biodiversity features:	Does the proposal involve any of the following? If yes, you will need to submit an appropriate contamination assessment with your application.
Yes, on the development site Yes, on land adjacent to or near the proposed development	
No	Land where contamination is
c) Features of geological conservation importance:	suspected for all or part of the site?
Yes, on the development site	A proposed use that would
Yes, on land adjacent to or near the proposed developmen	t be particularly vulnerable to the presence of contamination?
No No	to the presence of Quantum
15. Trees and Hedges	16. Trade Effluent
A the are trace or hodges on the	Does the proposal involve the need to dispose of trade effluents or waste?
proposed development site?	If Yes, please describe the nature, volume and means of disposal
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 Yes	of trade effluents or waste
of the local landscape character?	
If 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	
Tree Survey is required, this and the accompanying plan should be	
the state of the s	d III
contain, in accordance with the current 'BS5837: Trees in relation design, demolition and construction - Recommendations'.	to

Yes, please complet	Propos		_					T		Existi	ng H	ousi	ng			
	T .				Redr	ooms	Tota	ılı	Market	Not		Numb	er of E			Total
larket ousing	Not known	1	2	3		Unknow	-		Housing	known	1	2	3	4+ 1	Jnknown	
ouses									Houses				-	_		1
lats/maisonettes			/				2		Flats/maisonettes		V			_		
heltered housing					4				Sheltered housing							
edsit/studios									Bedsit/studios						-	
Cluster flats									Cluster flats							生
Other									Other						0 -	1
		To	tals (d	1+6+	c + c	d+e+f)=	7				To	tals (a	+ b +	c + a	+e+f)=	1
ocial, Affordable	1		Num	her of	Bed	rooms	Tota	al	Social, Affordable	Not		Numb	er of	Bedro	ooms	Total
or Intermediate	known	1	2	3	_	Unknov	/n	1	or Intermediate Rent	known	1	2	3	4+	Unknown	
Rent	$+$ \Box		-	-	-			1	Houses							
Houses			-	-				1	Flats/maisonettes							
Flats/maisonettes		_	-	+	-	-	+	1	Sheltered housing					(.		
Sheltered housing			-	-	-		_	1	Bedsit/studios					伊养女		
Bedsit/studios			-	-			-	-11	Cluster flats							
Cluster flats	+-	-	-	-	-			-	Other					alicia.		
Other		_	1-1-1	h	1.51	d+e+f			Other		To	tals (1+6+	- c + a	1+e+f)=	
		10								T	T	Num	ber of	f Bedr	ooms	Tota
Affordable Home	Not	1	Nun 2	ber o	_	drooms - Unkno	Tot	al	Affordable Home Ownership	Not know	n 1	2	3	4+	Unknown	1
Ownership	KIIOWI	1		-	1	Otharo			Houses							
Houses Flats/maisonettes	1 -	-	+	+	1				Flats/maisonettes							
Sheltered housing	十一	+		+	+				Sheltered housing							
Bedsit/studios		-	+	+	1				Bedsit/studios							
Cluster flats		+	-	+	1				Cluster flats							
		+	+						Other							
Other		T	otals	(a+b)	+ C+	+d+e+f	=				.T	otals (′a + b	+ c +	d+e+f)=	
	—	_				drooms		tal		Not		Nun	nber c	of Bed	rooms	Tota
Starter Homes	Not know	n 1	-	_	-	+ Unkno			Starter Homes	know		2	3	4+	Unknow	n
Houses									Houses				_	-		
Flats/maisonettes		+							Flats/maisonettes					_		-
Bedsit/studios		1							Bedsit/studios					_		
Other	10	\top							Other -							
Other				Total	s (a +	+ b + c + d) =						Total:	s (a +	b + c + d) =	
	T	T				edrooms	-	otal	Self Build and	, No	t	Nur	_		drooms	Tot
Self Build and Custom Build	Not know					4+ Unkn	own		Custom Build	knov		1 2	3	4-	+ Unknov	vn
Houses									Houses		-	-	-	+		-
Flats/maisonettes							-		Flats/maisonettes	. L]			_		-
Bedsit/studios									Bedsit/studios					_		_
Other	+ [Other	. [1	-
				Tota	ls (a	+ b + c + c	1) =						Total	s (a +	b+c+d	=
Total proposed						+ D + E) =			Total existing	a rocido	ntial	units	(F +	-G+F	(1 + 1 + J) =	A

1	ou nave an	swered Yes to	tne qu	estion above ple	ase add deta	ils in the follow	ing table:	No
	Jse class/ty		Not applicable	Existing gross internal floorspace (square metres)	Gross inter to be lost use or o	nal floorspace by change of lemolition e metres)	Total gross intern floorspace propos (including change use)(square metre	internal flo
A1		Shops					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(square)
		adable area:						
A2	Fina profess	ancial and ional services					-	
A3		ants and cafes						
A4	Drinking	establishment		•				
A5	Hot foo	d takeaways						
B1 (a)		ther than A2)						
B1 (b)	Rese	earch and						
B1 (c)		elopment industrial						
B2		al industrial						
B8					-			6.0
		or distribution and halls of					2	非非大会
C1	res	idence						
C2		al institutions						
D1	insti	esidential tutions					,	
D2	Assembly	and leisure						
OTHER								
Please Specify								
	T	otal				-		
In add	ition, for ho	otels, residenti	al instit	rutions and hosts	اد شامیت با	In the second	ate the loss or gain of	
	ype of use	1100	VISCUIC	rooms to be los	I DV change	Total rooms n	roposed (including	rooms
class 1	Hotels	applicable		of use or demoli	tion	chan	ges of use)	Net additional r
C2 R	esidential							
OTHER I	stitutions							
Pléase							1 1 1 1 1 1 1	
pecify								
9. Emp	loyment							
lease con	plete the f	ollowing infor	nation	regarding emple	OVERS:			
				ll-time	Part-t	ima	Tota	al full-time
Existi	ng employ	ees			rait-t	ime	eq	quivalent
Propo	sed employ	yees						
O. House	s of Oper							
known n	ease state	iing						
3,471, PI	Use	the Hours of o	ening	(e.g. 15:30) for ea	ach non-resid	lential use prop		
	036	Mono	lay to I	-riday .	Saturday		Sunday and Bank Holidays	Not known
		*						
. Site A	rea							
ease state	the site are	a in hectares (I	na)	IN TO A				
-		(1						

2. Industrial or Commercial Proces	ses	and Machinery	
lease describe the activities and processes v e carried out on the site and the end produc lant, ventilation or air conditioning. Please i ppe of machinery which may be installed on	vhich	would	~
s the proposal a waste management develo	pmer	t? Yes No	
f the answer is Yes, please complete the follo	owing	table:	
	Not applicable	The total capacity of the void in cubic metres, including engineering surcharge and making n allowance for cover or restoration material (or tonnes if solid waste or litres if liquid waste)	0 throughput in tonnoc
Inert landfill			
Non-hazardous landfill			
Hazardous landfill			
Energy from waste incineration			
Other incineration		*	
Landfill gas generation plant			
Pyrolysis/gasification			
Metal recycling site			
Transfer stations Material recovery/recycling facilities (MRFs)			
Household civic amenity sites			
Open windrow composting	1		
In-vessel composting	1		
Anaerobic digestion Any combined mechanical, biological and/ or thermal treatment (MBT)			
Sewage treatment works	T	*	
Other treatment	T		
Recycling facilities construction, demolition and excavation waste			
Storage of waste			
Other waste management		•	
Other developments			*
Please provide the maximum annual opera	tiona	I throughput of the following waste streams:	
Municipal			
Construction, demolition and	exca	vation	
Commercial and indus	trial		
Hazardous			a san be determined. Vour waste
If this is a landfill application you will need planning authority should make clear what	to p	ovide further information before your applicatio rmation it requires on its website.	n can be determined. Tour waste
23. Hazardous Substances			
Does the proposal involve the use or stora the following materials in the quantities st	ge of	any of below? Yes No Not ap	plicable
If Yes, please provide the amount of each			
Acrylonitrile (tonnes)		Ethylene oxide (tonnes)	Phosgene (tonnes)
Ammonia (tonnes)	H	drogen cyanide (tonnes)	Sulphur dioxide (tonnes)
Bromine (tonnes)		Liquid oxygen (tonnes)	Flour (tonnes)
Chlorine (tonnes)	Liqui	g petroleum gas (tormes)	efined white sugar (tonnes)
Other:		Other:	
Amount (tonnes):		Amount (tonnes):	FCAB 2021

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 2015 Certificate under Article 14 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 holding. * "owner" 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. Date (DD/MM/YYYY): Or signed - Agent: Signed - Applicant: Town and Country Planning (Development Management Procedure) (England) Order 2015 Certificate under Article 14 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. "owner" is a person with a freehold interest or leasehold interest with at least 7 years left to run. Name of Owner / Agricultural Tenant ROAD, 87 CASTLE NW1 88U GETU MIM Date (DD/MM/YYYY): Or signed - Agent: Signed - Applicant:

certify/ The applicant certifies that: Neither Certificate A or B can be i	CERTIFICATE OF OWNERSHIP - Celopment Management Procedure) ssued for this application liken to find out the names and address of it, but I have/ the applicant has been	(England) Order 2015 C sses of the other owners* or left to run.	
	4		Date Notice Served
Name of Owner / Agricultural Tenant	Addre	ess	Date Notice Served
	9 .	* -	
			\$2
And y			
		1	****
Notice of the application has been publicirculating in the area where the land is signed - Applicant:	Or signed - Agent:	than 21 days befo	Date (DD/MM/YYYY)
certify/ The applicant certifies that: Certificate A cannot be issued fo	aken to find out the names and addre owner* and/or agricultural tenant** of able to do so.	es) (England) Order 2015 (ssess of everyone else who of any part of the land to wars left to run.	on the day 21 days before the
Notice of the application has been publ circulating in the area where the land is	shed in the following newspaper situated):	On the following than 21 days befo	date (which must not be earlier ore the date of the application):
Signed - Applicant:	Or signed - Agent:		Date (DD/MM/YYYY)
		•	

25. Planning Application Requirements - Checklist	
	e information in support of your proposal. Failure to submit all valid. It will not be considered valid until all information required by
The original and 3 copies* of a completed and dated	The correct fee:
application form:	The original and 3 copies* of a design and access statement, if required (see help text and guidance notes for details):
The original and 3 copies* of the plan which identifies the land to which the application relates drawn to an identified scale	The original and 3 copies* of a fire statement, if required
and showing the direction of North:	(see help text and guidance notes for details):
The original and 3 copies* of other plans and drawings or information necessary to describe the subject of the application.	The original and 3 copies* of the completed, dated Ownership Certificate (A, B, C or D – as applicable) and Article 14 Certificate (Agricultural Holdings):
*National legislation specifies that the applicant must provide the or total of four copies), unless the application is submitted electronical LPAs may also accept supporting documents in electronic format by You can check your LPA's website for information or contact their pl	y post (for example, on a CD, DVD or USB memory stick). lanning department to discuss these options.
Plans can be bought from one of the Planning Portal's accredited so	uppliers: https://www.planningportal.co.uk/buyaplanningmap
26. 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 genuine opinions of the person(s) giving them. Signed - Applicant Or signed - Agent	Date (DD (MM) (VVVV).
27. Applicant Contact Details	28. Agent Contact Details
Telephone numbers	Telephone numbers
Extension	Country code: National number: Extension number:
Country code: National number: number:	National number:
Country code: Mobile number (optional):	Country code: Mobile number (optional):
+46	
	Country code: Fax number (optional):
Country code: Fax number (optional):	Country code: Fax number (optional):
	Country code: Fax number (optional): Email address (optional):
Country code: Fax number (optional):	
Country code: Fax number (optional): Email address (optional):	
Country code: Fax number (optional): Email address (optional): 29. Site Visit	Email address (optional):
Country code: Fax number (optional): Email address (optional): 29. Site Visit Can the site be seen from a public road, public footpath, bridleway	Email address (optional): Or other public land? Yes No Other lift different from the
Country code: Fax number (optional): Email address (optional): 29. Site Visit	Email address (optional): y or other public land? Yes No
Country code: Fax number (optional): Email address (optional): 29. Site Visit Can the site be seen from a public road, public footpath, bridleway	Email address (optional): y or other public land? Yes No Agent Applicant Other (if different from the agent/applicant's details)
Country code: Fax number (optional): Email address (optional): 29. Site Visit Can the site be seen from a public road, public footpath, bridleway lf the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (Please select only one)	email address (optional): Yes No Agent Applicant Other (if different from the agent/applicant's details) Telephone number:
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 lf the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (Please select only one) lf Other has been selected, please provide:	Email address (optional): y or other public land? Yes No Agent Applicant Other (if different from the agent/applicant's details)