

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.

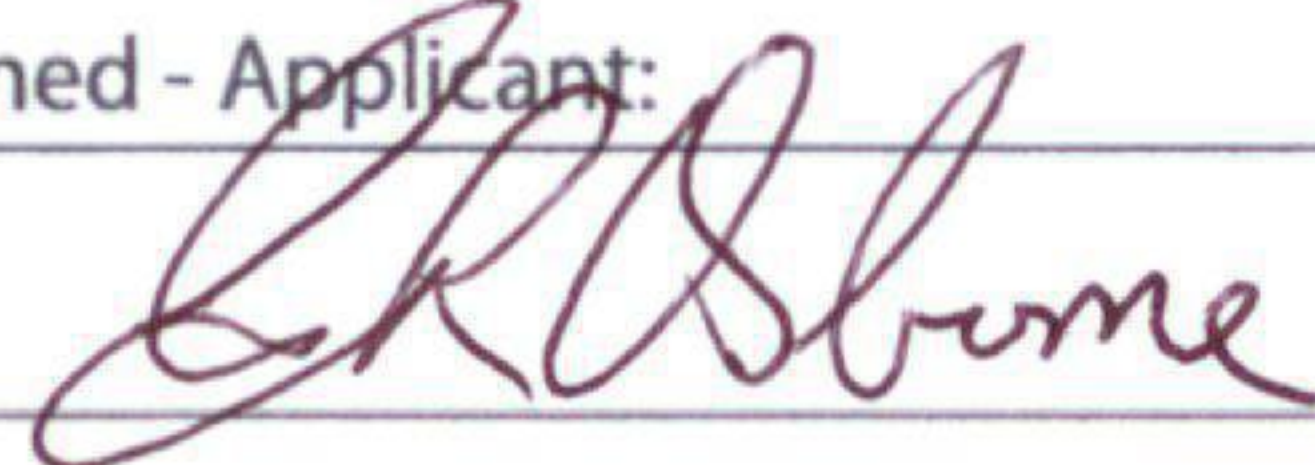
The original and 3 copies of a completed and dated application form: ☒

The original and 3 copies of other plans and drawings or information necessary to describe the subject of the application: ☒

9. Declaration

I/we hereby apply for planning permission as described in this form and the accompanying plans/drawings and additional information. I confirm that, to the best of my knowledge, any facts stated are true and accurate and any opinions given are the genuine opinions of the persons giving them.

Signed - Applicant:



Or signed - Agent:

Date (DD/MM/YYYY):

26/06/2025 (date cannot be pre-application)

10. Applicant Contact Details

Telephone numbers

Country code: +44 National number: 01633 810876 Extension number:

Country code: +44 Mobile number (optional): 07972 049257

Email address (optional):

grosborne@btinternet.com

11. Agent Contact Details

Telephone numbers

Country code: National number: Extension number:

Country code: Mobile number (optional):

Email address (optional):

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: