Development Management

Welwyn Hatfield Borough Council

The Campus, Welwyn Garden City, Herts AL8 6AE

T: 01707 357000 F: 01707 357255 E: planning@welhat.gov.uk www.welhat.gov.uk



Application for approval of details reserved by condition.

Town and Country Planning Act 1990

Planning (Listed Buildings and Conservation Areas) Act 1990

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.

1. Applicant N	ame, Address a	nd Contact Det	ails				
Title: Mr	First Name:	James		Surname:	Sieradski		
Company name:	Stonehedge Ltd						
Street address:	dress: 6 Lyttelton Road						
			Telephone	number:			
			Mobile nur	nber:			
Town/City:	London		Fax number	er:			
Country:			Email addr	ess:			
Postcode:	N2 0EF						
Are you an agent	acting on behalf of th	ne applicant?	Yes	○ No			
2. Agent Name	e, Address and C	Contact Details		Surname:	Jones		
Company name:	Ben Jones Archited	cts					
Street address:	47 Priory St						
			Telephone	number: 012	3475526		
			Mobile nur	nber:			
Town/City:	Lewes		Fax number	er:			
Country:			Email addr	ess:			
Postcode:	BN7 1HJ		ben@ben	ben@benjonesarchitects.co.uk			

3. Site Addres	ss Details								
Full postal addre	ss of the site (including full postcode where available)	Description:							
House:	Suffix:								
House name:	Stonehills House								
Street address:	Stonehills								
Town/City:	Welwyn								
Postcode:	AL8 6NH								
	cation or a grid reference eted if postcode is not known):								
Easting:	523859								
Northing:	213011								
4. Pre-applica	tion Advice								
Has assistance of	or prior advice been sought from the local authority ab	out this application?							
5. Description	of the Proposal								
Please provide a	description of the approved development as shown of	on the decision letter							
Replacement of	existing pitched roof with a mansard style roof extens	sion in connection with the provision of 12 self-contained flats comprising 7 two bed,							
	1 studio; enlargement of 23 windows on rear elevation tion with uPVC equivalents	n at first and second floor levels, replacement of all first and second floor timber							
Application refere	ence number: 6/2016/0818/MAJ	Date of decision: 08/09/2016							
Please state the condition number(s) to which this application relates:									
Condition number 4, 5	rr(s):								
Has the development already started? Yes No									
Tide the developi	non anotal stance.								
C Disabansa	of Countification								
6. Discharge	of Condition(s)								
Please provide a	full description and/or list of the materials/details that	are being submitted for approval:							
Condition No:-	erials to be approved:-								
	oofs and side cheeks to dormers								
	ement sash window details (Refer to Drawing PC-04)								
7. Part Discha	arge of Condition(s)								
Are you seeking	to discharge only part of a condition?								
8. Site Visit									
Can the site be s	een from a public road, public footpath, bridleway or	other public land? Yes No							

8. Site Visit				
If the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (Planning authority needs to make an appointment to carry out a site visit, whom should they contact?	ease sele	ect only o	one)	
The agent				
9. 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 opinions given are the genuine opinions of the person(s) giving them.	V	Date	06/12/2017	