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. Site Address	
Number	
Suffix	
Property name	Ramada Hatfield
Address line 1	St Albans Road West
Address line 2	
Address line 3	
Town/city	Hatfield
Postcode	AL10 9RH
Description of site locati	ion must be completed if postcode is not known:
Easting (x)	521268
Northing (y)	208287
Description	

2. Applicant Detai	ls
Title	Mr
First name	Paul
Surname	Miles
Company name	c/o agent
Address line 1	c/o agent
Address line 2	
Address line 3	
Town/city	

2. Applicant Details

Country	
Postcode	
Primary number	
Secondary number	
Fax number	
Email address	

Are you an agent acting on behalf of the applicant?

🖲 Yes 🛛 🔍 No

3. Agent Details	
Title	
First name	Catherine
Surname	Norris
Company name	Alder King Planning Consultants
Address line 1	Pembroke House
Address line 2	15 Pembroke Road
Address line 3	Clifton
Town/city	Bristol
Country	United Kingdom
Postcode	BS8 3BA
Primary number	01173171000
Secondary number	
Fax number	
Email	cnorris@alderking.com

4. Description of the Proposal

Please provide a description of the approved development as shown on the decision letter

	ment of the Grade II listed building (Use Class C1) following demolition of existing rear and side extensions. Erection of student eneris) with landscaping and associated works.
Reference number	
6/2017/2746/LB	
Date of decision (date must be pre- application submission)	15/02/2018
Please state the condi	tion number(s) to which this application relates
Condition number(s)	
4	

4. Description of the Proposal

Has the development already started?

5. Part Discharge of Conditions

Are you seeking to discharge only part of a condition?

If Yes, please indicate which part of the condition your application relates to

Parts A, D, E and H

6. Discharge of Conditions

Please provide a full description and/or list of the materials/details that are being submitted for approval

•COMET-STL-00-ZZ-DR-A-ZZZZ-62011 Rev.C118 - Existing window types (Ground Floor), Like for Like Replacements; •COMET-STL-00-ZZ-DR-A-ZZZZ-62012 Rev.C118 - Existing window types (First Floor), Like for Like Replacements; •COMET-STL-00-ZZ-DR-A-ZZZZ-62013 Rev.C118 - Lantern Detail; •COMET-STL-00-ZZ-DR-A-ZZZZ-62014 Rev.C118 - Window, External Door Details; •COMET-STL-XX-ZZ-DR-A-ZZZZ-62005 - Rev.C118 - Existing Hotel Door Types - External.

7. Site Visit

Can the site be seen from a public road, public footpath, bridleway or other public land?

If the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (Please select only one)

The agent

The applicant

Other person

8. Pre-application Advice

Has assistance or prior advice been sought from the local authority about this application?

🖲 Yes 🛛 🔾 No

If Yes, please complete the following information about the advice you were given (this will help the authority to deal with this application more efficiently):

Officer name:

Title	
First name	June
Surname	Pagdin
Reference	
Date (Must be pre-appl	ication submission)
Details of the pre-applie	cation advice received

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.

Date (cannot be pre-16/10/2018 application)

🔾 Yes 🛛 💿 No

Yes ONO

🖲 Yes 🛛 🔾 No

Title
lue