

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

Application for approval of details reserved by condition. Town and Country Planning Act 1990 Planning (Listed Buildings and Conservation Areas) Act 1990

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:

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



Publication of applications on 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.

If printed, please complete using block capitals and black ink.

It is important that you read the accompanying guidance notes and help text as incorrect completion will delay the processing of your application.

1. Applicant Name and Address			
Title:	ML First name: SHANE		
Last name:	McCDLTHY		
Company (optional):	ESSEMSEE LTD		
Unit:	House number: House suffix:		
House name:			
Address 1:	1: REGIS LOAD		
Address 2:			
Address 3:			
Town:	LONDON		
County:			
Country:			
Postcode:	MWS BEW		

2. Agent	2. Agent Name and Address		
Title:	MA First name: KEVIN		
Last name:	HRRIS		
Company (optional):	HOG CONTRACTION LED		
Unit:	House number: House suffix:		
House name:	HumPHLEY'S BARN		
Address 1:	GLEEN MAN LOAD		
Address 2:	MAGDALEN LAVEL		
Address 3:			
Town:			
County:	ONGAL		
Country:			
Postcode:	CMS DES		

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3. Site Address Details	4. Pre-application Advice				
Please provide the full postal address of the application site. House House	Has assistance or prior advice been sought from the local authority about this application?				
Onit: number: suffix:	Yes No				
House name:	If Yes, please complete the following information about the advice you were given. (This will help the authority to deal with this				
Address 1: PARIL STLEET	application more efficiently). Please tick if the full contact details are not				
Address 2:	known, and then complete as much as possible:				
Address 3:	Officer name:				
Town: HATFIEZD	Reference:				
County: HELTS					
Postcode (optional): AL9 5AT	Date (DD/MM/YYYY):				
Description of location or a grid reference. (must be completed if postcode is not known):	(must be pre-application submission) Details of pre-application advice received?				
Easting: Northing:	because of pre-application advice received:				
Description:					
(F. Donavintion Of Vous Province					
5. Description Of Your Proposal Please provide a description of the approved development as shown	n on the decision letter including the application reference and the				
and date of decision in the sections below:	the decision letter, including the application reference number				
Reference number: 6/2 28/2497 Guy Date of decision: 1 44 A Co. G. G. (Date must be pre-application					
Reference number: $6/2 \circ 18/2 \circ 97/Full$ Date of decision: Please state the condition number(s) to which this application relate	submission) (DD/MM/YYYY)				
1.	6.				
2. WINDOWS DOORS SHOP FLOW	7.				
2. WINDOWS DOUCS SHOP FLOWS 3. BIKE RACKS - LOCATION 4. LOCATION OF BINS	8.				
	9.				
5.	10.				
Has the development already started?					
If Yes, please state when the development started (DD/MM/YYYY):	(date must be pre-application submission)				
Has the development been completed?	Yes No				
If Yes, please state when the development was completed (DD/MM/YYYY): (date must be pre-application submission)					
6. Discharge Of Condition					
Please provide a full description and/or list/of the materials/details that are being submitted for approval:					
DRAWINGS FOR 2/3/4.					
7 Part Dischause Of Candisian (a)					
7. Part Discharge Of Condition(s)					
Are you seeking to discharge only part of a condition? 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 (LPA) has been submitted.					
The original and 3 copies* of a completed and dated application form:	original and 3 copies* of other plans and drawings formation necessary to describe the subject of the application:				
The correct fee:					
*National legislation specifies that the applicant must provide the original plus three copies of the form and supporting documents (a total of four copies), unless the application is submitted electronically or, the LPA indicate that a smaller number of copies is required. LPAs may also accept supporting documents in electronic format by post (for example, on a CD, DVD or USB memory stick). You can check your LPA's website for information or contact their planning department to discuss these options.					
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.					
Signed - Applicant:	Or signed - Agent				
Date (DD/MM/YYYY):					
(date cannot be pre-application)					
10. Applicant Contact Details	11. Agent Contact Details				
Telephone numbers	Telephone numbers				
Country code: National number: Extension number:	Country code: National number: Ly O207 480 1300 Extension number:				
Country code: Mobile number (optional):	Country code: Mobile number (optional):				
Country code: Fax number (optional):	Country code: Fax number (optional):				
Email address (optional):	Email address (optional):				
Email address (optional).					
	Klevinh (a hospice.com				
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:					
Contact name.	Telephone number:				

Email address: