HOLLAND DISTRICT COUNCIL

H14~ 0882.09

10 NOV 2009

Application for approval of details reserved by condition.

Town and Country Planning Act 1990

Planning (Listed Buildings and Conservation Areas) Act 1990

FILE COPY

Publication of planning applications on council websites

Please note that with the exception of applicant contact details and Certificates of Ownership, the information provided on this application form and in supporting documents may be published on the council's website.

If you have provided any other information as part of your application which falls within the definition of personal data under the Data Protection Act which you do not wish to be published on the council's website, please contact the council's planning department.

Please complete using block capitals and black ink.
It is important that you read the accompanying guidance notes as incorrect completion will delay the processing of your application.

1. Applicant Name and Address		2. Agent Name and Address	
Title:	MR.	Title:	MR.
First name:	TERRY	First name:	JONATHAN
Last name:	DEAR	Last name:	BIGGADIKE
Company (optional):	N/A.	Company (optional):	N/A.
Unit:		Unit:	
House number:		House number:	6
House suffix:		House suffix:	
House name:	GROSVENOR HOUSE	House name:	—
Address 1:	JUBILEE ROAD	Address 1:	SCOUDHALL LANE
Address 2:	CRAYS HILL	Address 2:	SURFLEET
Address 3:	—	Address 3:	—
Town:	BILLERICAY	Town:	SPALDING
County:	ESSEX	County:	LINCOLNSHIRE
Country:	U.K.	Country:	U.K
Postcode:	CM11 2YF	Postcode:	PE11 4BJ.

3. Site Address Details

Please provide the full postal address of the application site.

Unit:	
House number:	
House suffix:	
House name:	GLEN HOUSE
Address 1:	GLENSIDE SOUTH
Address 2:	WEST PINCHBECK
Address 3:	—
Town:	SPALDING
County:	LINCOLNSHIRE
Postcode (optional):	PE11 3SA

Description of location or a grid reference.
(must be completed if postcode is not known):

Easting: — Northing: —

Description:

4. 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).

Please tick if the full contact details are not known, and then complete as much as possible: ☐

Officer name: LIZ MAYLE & CHRIS CREEN.

Reference: —

Date (DD/MM/YYYY): 16/10/09 *
(must be pre-application submission)

Details of pre-application advice received?

ON GOING DIALOGUE REGARDING REPAIRS & REBUILDING INCLUDING 2Nº DRAFTS FOR DORMER DESIGN.
(* LAST MEETING PRIOR TO SUBMISSION)

5. Description Of Your Proposal

Please provide a description of the approved development as shown on the decision letter, including the application reference number and date of decision in the sections below:

H14/0067/09 PROPOSED REFURBISHMENT OF DWELLING (PART RETROSPECTIVE).

Reference number: H14/0067/09 Date of decision: 04/06/09 (Date must be pre-application submission) (DD/MM/YYYY)

Please state the condition number(s) to which this application relates: PLEASE REFER TO ENCLOSURES.

1.		6.	
2.		7.	
3.		8.	
4.		9.	
5.		10.	

Has the development already started? ☑ Yes ☐ No

If Yes, please state when the development started (DD/MM/YYYY): MAY 2008. (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:

PLEASE REFER TO ENCLOSURES.

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:

PLEASE REFER TO ENCLOSURE.

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.

3 copies of a completed and dated application form: ☑

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/consent as described in this form and the accompanying plans/drawings and additional information.

Signed - Applicant: —

Or signed - Agent: Jonathan David Biggadike

Date (DD/MM/YYYY): 19/10/09 (date cannot be pre-application)

10. Applicant Contact Details

Telephone numbers

Country code:	National number:	Extension number:
01268	527016	—

Country code: | Mobile number (optional): 07971057040

Country code: 01268 | Fax number (optional): 527016

Email address (optional): Grosvenorinteriors2@hotmail.co.uk

11. Agent Contact Details

Telephone numbers

Country code:	National number:	Extension number:
01775	680595	—

Country code: 07528 | Mobile number (optional): 495733

Country code: | Fax number (optional): N/A

Email address (optional): jonathan@jbiggadike4.wanadoo.co.uk

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: N/A | Telephone number: N/A

Email address: N/A