

UTTLESFORD DISTRICT COUNCIL

Council Offices, London Road, Saffron Walden, Essex CB11 4ER Telephone (01799) 510510
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Email planning@uttlesford.gov.uk
Website www.uttlesford.gov.uk

Application for approval of reserved matters following outline approval.

Article 21, Town and Country Planning (General Development Procedure) Order 1995

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 | | | | | | |
|---|---------------------|---------------|---------------------------------|--------|------------------|---------------|
| Tit l e: | First name: | | Title: | MR | First name: | GEOFF |
| Last name: | | | Last name: | ARMSTR | ONG | |
| Company (optional): | DANDARA EASTERN LIM | IITED | Company (optiona l): | ARMSTR | ONG RIGG | PLANNING |
| Unit: | House number: | House suffix: | Unit: | | House number: | House suffix: |
| House name: | C/O AGENT | | House name: | THE EX | CHANGE | |
| Address 1: | | | Address 1: | COLWOR | TH SCIEN | CE PARK |
| Address 2: | | | Address 2: | SHARNB | ROOK | |
| Address 3: | | | Address 3: | | | |
| Town: | | | Town: | BEDFOR | D | |
| County: | | | County: | | | |
| Country: | | | Country: | | | |
| Postcode: | | | Postcode: | MK44 1 | LZ | |

| 3. Site Address Details | 4. Pre-application Advice | | | | | |
|---|--|--|--|--|--|--|
| Please provide the full postal address of the application site. | Has assistance or prior advice been sought from the local | | | | | |
| Unit: House House suffix: | authority about this application? 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: | application more efficiently). | | | | | |
| Address 2: | Please tick if the full contact details are not known, and then complete as much as possible: | | | | | |
| Address 3: | Officer name: | | | | | |
| Town: | | | | | | |
| County: | Reference: | | | | | |
| Postcode (optional): | Date (DD/MM/YYYY): | | | | | |
| Description of location or a grid reference. (must be completed if postcode is not known): | (must be pre-application submission) | | | | | |
| Easting: 566230 Northing: 221374 | Details of pre-application advice received? | | | | | |
| Description: | | | | | | |
| MOORS FIELD, STATION ROAD, | | | | | | |
| LITTLE DUNMOW, ESSEX | | | | | | |
| | | | | | | |
| 5. Development Description | | | | | | |
| Please indicate which reserved matter(s) you require to be determine | d under this application: | | | | | |
| ☐ Access ☐ Appearance ☐ Lands | scaping \times Layout \times Scale | | | | | |
| Please provide a description of the approved development as show and date of decision: | n on the decision letter, including the application reference number | | | | | |
| Outline planning application (with all matters | reserved except for means of access from | | | | | |
| Station Road) for residential development of up | to 160 dwellings (REDUCED FROM 180 dwellings), | | | | | |
| a countryside park, up to 100sqm of office hub floorspace, sustainable urban drainage system and associated infrastructure (AMENDED PLANS ADDITIONAL INFORMATION INCLUDING reduction in | | | | | | |
| units, increased open space additional highway | measures) | | | | | |
| Reference number: UTT/21/3596/OP Date of decision: | 02/03/2023 (date must be pre-application submission) (DD/MM/YYYY) | | | | | |
| Please provide a description of the reserved matters for which you ar | <u> </u> | | | | | |
| Application for the approval of reserved matter | | | | | | |
| scale for 160 dwellings and a countryside park outline planning permission UTT/21/3596/OP | pursuant to conditions I and 2 of | | | | | |
| outline planning permission UTT/21/3596/UP | | | | | | |
| Has the development already started? | Yes No | | | | | |
| If Yes, please state when the development was started (DD/MM/YYYY): (date must be pre-application submission) | | | | | | |
| Has the work been completed? | | | | | | |
| If Yes, please state when the development was completed (DD/MM/YYYY): (date must be pre-application submission) | | | | | | |
| 6. Neighbour and Community Consultation | 7. Council Employee / Member | | | | | |
| Have you consulted your neighbours or | Is the applicant or agent related to | | | | | |
| the local community about the proposal? Yes No | any member of staff or elected member of the council? Yes No | | | | | |
| If Yes, please provide details: If Yes, please provide details: | | | | | | |
| ii 100, prodeo pro rido decanio. | If Yes, please provide details: | | | | | |
| PLEASE SEE PLANNING STATEMENT | If Yes, please provide details: | | | | | |
| | If Yes, please provide details: | | | | | |

| Please provide the following information: List of all relevant drawings, including reference numbers, tha of the original decision: | at were approved as part | List of drawing numbers submit this application for approval: | tted with |
|--|--------------------------------------|--|-------------|
| Drawing | Reference Number | Drawing Number | |
| PLEASE SEE DECISION NOTICE AT APPENDIX 2 OF PLANNING STATEMENT | | | |
| | | | |
| | | | |
| Reasons for any changes to the original drawings (if applicable | e). | | |
| | | | |
| Planning Application Requirements - Checklis Please read the following checklist to make sure you have sent | | rt of your proposal. Failure to submi | it all |
| information required will result in your application being deen the Local Planning Authority has been submitted. | ned invalid. It will not be con | sidered valid until all information re | quired by |
| A completed and dated application form with 4 copies: | | | \boxtimes |
| 4 copies of the plan which identifies the land to which | · | sign and access statement: | \bowtie |
| the application relates drawn to an identified scale and showing the direction of North: | Article 7 Certification | ompleted, dated ate (Agricultural Holdings): | □ N/A |
| 4 copies of other plans and drawings or information necessary to describe the subject of the application: | 4 copies of the c Ownership Certi | ompleted, dated ficate (A, B, C, or D - as applicable): | □ N/A |
| 10. Declaration | | | |
| I/we hereby apply for planning permission/consent as describe information. | ed in this form and the accom | npanying plans/drawings and addition | onal |
| Signed - Applicant: | Or signed - Agent: | | |
| Date (DD/MM/YYYY): | | | |
| 17/07/2023 (date cannot be pre-application | on) | | |

| 11. Applicant Contact Details | 12. Agent Contact Details | | | | |
|---|--|--|--|--|--|
| Telephone numbers | Telephone numbers | | | | |
| | Extension number: | | | | |
| Country code: Fax number (optional): | Country code: Fax number (optional): | | | | |
| Email address (optional): | Email address (optional): | | | | |
| C/O AGENT | | | | | |
| 13. 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 out a site visit, whom should they contact? (Please select of | to carry Other (if different from the agent/applicant's details) | | | | |
| If Other has been selected, please provide: | 3 11 | | | | |
| Contact name: | Telephone number: | | | | |
| | | | | | |
| Email address: | | | | | |