

This form is specifically designed to be printed and completed offline.

Please complete this form in block capitals using black ink to facilitate scanning.

You are advised to read the accompanying guidance notes and per-question help text.

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

Application for Planning Permission

Town and Country Planning Act 1990 (as amended)

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:



www.bristol.gov.uk/planning

Development Management, City Hall, PO Box 3399, Bristol BS1 9NE



Publication on Local 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.

1. Applicant Name and Address										
Title:	Mr	First name:	Julien							
Last name:	Potez									
Company (optional):	Picture	esque Livin	g							
Unit:		House number:		House suffix:						
House name:										
Address 1:	c/o age	nt								
Address 2:										
Address 3:										
Town:										
County:										
Country:										
Postcode:										

z. Agent Name and Address											
Title:	Mr	First name:	John								
Last name:	Rooney	Rooney									
Company (optional):	Stokes M	Stokes Morgan Planning									
Unit:		House House suffix:									
House name:	1 The Lo	1 The Lodge									
Address 1:	Spillman	Spillmans Court									
Address 2:	Middle S	pillmans									
Address 3:											
Town:	Stroud										
County:											
Country:											
Postcode:	GL5 3RL	J									

3. Description of the Proposal	
Please describe the proposed development, including any change of	use:
Change of use from a dwellinghouse used by a s Class C3a) to a small dwellinghouse in multiple occureinstatement of front boundary wall and front poutrigger, and the erection a part single, part two-storefuse/recycling storage, and installation of additional	upation (Use Class C4), including parapet wall, demolition of rear rey rear extension, and cycle and
Has the building, work or change of use already started?	Yes No
If Yes, please state the date when building, work or use were started (DD/MM/YYYY):	(date must be pre-application submission)
Has the building, work or change of use been completed?	Yes No
If Yes, please state the date when the building, work or change of use was completed (DD/MM/YYYY):	(date must be pre-application submission)
Reference number of permission in principle being relied on (technical details consent applications only):	
Is the proposal for public service infrastructure development (within the meaning of article 2 of S.I. 2015/595 as amended by article 3 of S.I. 746/2021)?	Yes No
A. Site Address Details Please provide the full postal address of the application site. Unit: House number: 14 House suffix: House number: 14 House suffix: House name: Address 1: Marlborough Street Address 3: Town: Bristol County: Postcode (optional): BS5 6RH Description of location or a grid reference. (must be completed if postcode is not known): Easting: Northing: Description:	Has assistance or prior advice been sought from the local authority about this application? 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: Reference: Date (DD/MM/YYYY): (must be pre-application submission) Details of pre-application advice received?

6. Pedestrian and Vehicle Access, Road	ls and Righ	ts of Way	7. Waste Sto	rage and Collection		
Is a new or altered vehicle access proposed to or from the public highway?	Yes	No	Do the plans inc	corporate areas to store ection of waste?	X Yes	No
Is a new or altered pedestrian access proposed to or from			If Yes, please pro	ovide details:		
the public highway?	Yes	No	In front gar	den		
Are there any new public roads to be provided within the site?	Yes	⋈ No				
Are there any new public rights of way to be provided within or adjacent to the site?	Yes	⊠ No				
Do the proposals require any diversions /extinguishments and/or creation of rights of way?	Yes	No	Have arrangeme for the separate collection of rec	storage and	Yes	□ No
If you answered Yes to any of the above que		e show	If Yes, please pr	•		
details on your plans/drawings and state the (s)/drawings(s)	e reference o	tne plan	In front gar	den		
8. Authority Employee / Member It is an important principle of decision-makin means related, by birth or otherwise, closely conclude that there was bias on the part of the state of the	enough that	a fair-minde	ed and informed o	bserver, having considered		
Do any of the following statements apply to			Yes No	With respect to the author (a) a member of staff (b) an elected member (c) related to a member of (d) related to an elected me	staff	
If Yes, please provide details of their name, r	ole and how	you are rela	ted to them.			

	Existing (where applicable)			Proposed		Not app l icable	Don't Know
Walls	Rende	er		render		П	
Roof	clay	tiles		clay tiles			
Windows	up\	/c		upvc		П	
Doors	up	vc		ирус		П	
Boundary treatments (e.g. fences, walls)	Rende	er		Render		П	
Vehicle access and hard-standing						×	
Lighting						×	
Others (please specify)						X	
)/design and access stateme	ent? X Yes		No
	erences for the	eplan(s)/drawing(s)/design	n and access	statement:			
0. Vehicle Parkin	ng						
-		e existing and proposed n Total		n-site parking spaces: proposed (including	Difference		
Type of Vehic	cle	Existing	Tota	spaces retained)	in spaces		
Cars Light goods veh public carrier vel	icles/ hicles						
Motorcycle	s						
Disability space	ces						
Cycle space	S			4	+4		
Other (e.g. Bu	ıs)						

Other (e.g. Bus)

11. Foul Sewage	12. Assessment of Flood Risk
Please state how foul sewage is to be disposed of:	Is the site within an area at risk of flooding? (Refer to the Environment Agency's Flood Map showing flood zones 2 and 3 and
Mains sewer Cess pit	consult Environment Agency standing advice and your local planning authority requirements for information as necessary.)
Septic tank Other	☐ Yes No
Package treatment plant	If Yes, you will need to submit a Flood Risk Assessment to consider the risk to the proposed site.
Are you proposing to connect to the existing drainage system? Yes No	Is your proposal within 20 metres of a watercourse (e.g. river, stream or beck)? Yes No
If Yes, please include the details of the existing system on the application drawings and state references for the plan(s)/drawing(s):	Will the proposal increase the flood risk elsewhere?
plants), drawnig(s).	How will surface water be disposed of?
	Sustainable drainage system Existing watercourse
	Soakaway Pond/lake
	Main sewer
13. Biodiversity and Geological Conservation	14. Existing Use
To assist in answering the following questions refer to the guidance	Please describe the current use of the site:
notes for further information on when there is a reasonable likelihood that any important biodiversity or geological conservation features may be present or nearby and whether they	c3 dwelling
are likely to be affected by your proposals.	
Having referred to the guidance notes, is there a reasonable likelihood of the following being affected adversely or conserved and enhanced within the application site, or on land adjacent to or	Is the site currently vacant? Yes No
near the application site? a) Protected and priority species:	If Yes, please describe the last use of the site:
Yes, on the development site	
Yes, on land adjacent to or near the proposed development	
X №	When did this use end (if known)?
b) Designated sites, important habitats or other biodiversity features:	DD/MM/YYYY (date where known may be approximate)
Yes, on the development site	Does the proposal involve any of the following? If yes, you will need to submit an appropriate contamination
Yes, on land adjacent to or near the proposed development	assessment with your application.
No N	Land which is known to be contaminated? Yes Xo
c) Features of geological conservation importance: Yes, on the development site	Land where contamination is suspected for all or part of the site? Yes No
Yes, on land adjacent to or near the proposed development	A proposed use that would be particularly vulnerable
No No	to the presence of contamination?
15. Trees and Hedges	16. Trade Effluent
Are there trees or hedges on the proposed development site? Yes No	Does the proposal involve the need to dispose of trade effluents or waste? Yes No
And/or: Are there trees or hedges on land adjacent to the proposed development site that could influence the development or might be important as part	If Yes, please describe the nature, volume and means of disposal of trade effluents or waste
of the local landscape character?	
If Yes to either or both of the above, you <u>may</u> need to provide a full Tree Survey, at the discretion of your local planning authority. If a Tree Survey is required, this and the accompanying plan should be submitted alongside your application. Your local planning authority should make clear on its website what the survey should	
contain, in accordance with the current 'BS5837: Trees in relation to	

	Propos	sed	Hous	ina					Existi	na l	Hous	ina			
Market	Not		Numl		Bedr	ooms	Total	Market	Not	9	Numl		Bedr	ooms	Tota
Housing	known	1	2	3	4+	Unknown		Housing	known	1	2	3	4+	Unknown	-
Houses			-				d	Houses	X			1			1
Flats/maisonettes			1				ъ	Flats/maisonettes							16
Sheltered housing							E .	Sheltered housing							C
Bedsit/studios							d	Bedsit/studios							d
Cluster flats							ε	Cluster flats							е
Other							Ť	Other							Ť
	70	To	tals (a	+ <i>b</i> +	c+d	+e+f)=	A		572	То	tals (d	ı+b+	c+d	+e+f	1
Social, Affordable	Not		Numl	oer of	Bedr	ooms	Total	Social, Affordable	Not		Numl	oer of	Bedr	ooms	Total
or Intermediate Rent	Not known	1	2	3	4+	Unknown		or Intermediate Rent	Not known	1	2	3	4+	Unknown	
Houses	1 🗖		+-	_			a	Houses	+					-	à
Flats/maisonettes	1 -			ř			Ь	Flats/maisonettes						3	Ь
Sheltered housing	1 -		+				è	Sheltered housing							ć
Bedsit/studios	+ -	<	1				d	Bedsit/studios	+ -					57.	d
Cluster flats			1					Cluster flats	1 -						ë
Other	1 -		+			r.	7	Other	+ -						- 1
Other		To	tals (a	+ h +	C+0	 +e+f)=	8	Other	<u> </u>	To	tals (c	1 + h +	c+d	+ e + f) =	G
	_	-							_						
Affordable Home Ownership	Not known	1	Numl 2	per or	Bear 4+	Unknown	Total	Affordable Home Ownership	Not known	1	Numl 2	ger of	-	Unknown	Tota
Houses			1				a	Houses		-					ct
Flats/maisonettes			1				Ь	Flats/maisonettes							Ь
Sheltered housing			1			. Sa	č	Sheltered housing							č
Bedsit/studios						ā,	d	Bedsit/studios							d
Cluster flats			1				ė	Cluster flats							ě
Other	1 -		-			2	1	Other	1 -					-	1
		To	tals (a	+ <i>b</i> +	c + d	+e+f=	E			То	tals (d	ı+b+	- c + d	+e+f=	Н
	1		Numl				Total		T No.					ooms	Tota
Starter Homes	Not known	1	2	3	4+	Unknown	-	Starter Homes	Not known	1	2	3		Unknown	-
Houses						(5)	ä	Houses							a
Flats/maisonettes							b	Flats/maisonettes							· b
Bedsit/studios							ë	Bedsit/studios							č
Other							d	Other							d
			To	tals (a+b	+c+d)=	D				To	tals (a+b	+c+d)=	1
Self Build and Custom Build	Not known	1	Numl 2	per of	Bedr 4+	ooms Unknown	Total	Self Build and Custom Build	Not known	1	Numl 2	per of		ooms Unknown	Tota
Houses		-	<u> </u>				α	Houses			<u> </u>	_			0
Flats/maisonettes							В	Flats/maisonettes							Б
Bedsit/studios	1 -		1	:		2.	c	Bedsit/studios							- 2
Other	1 -		+				d	Other							d
o tile.			To	tals (a+b	+c+d)=	E	- Cuici	 		To	tals (a+b	+ c + d) =	J
												,		,	
Total proposed res	idential	unit	s (A	+ B +	C + D) + E) =	0	Total existing r	esidentia	al un	its	(F+G	+ <i>H</i> +	(1+J)=	1

18. All Types of Development: Non-residential Floorspace													
Does you	Does your proposal involve the loss, gain or change of use of non-residential floorspace?												
✓ Yes	No												
If you ha	If you have answered Yes to the question above please add details in the following table: Existing gross Gross internal floorspace Total gross internal Net additional gross												
Us	se class/type of use	Not applica bl e	Existing gross internal floorspace (square metres) (a)	to be lost by change of use or demolition	Total gross internal floorspace proposed (including change of use) (square metres)	Net additional gross internal floorspace following development (square metres) $(d = c - a)$							
B2	General industrial		(4)	(0)	19	(2 - 2)							
B8	Storage or distribution												
C1	Hotels and halls of residence												
C2	Residential institutions												
C2A	Secure Residential institutions												
C4	Homes in Multiple Occupation		0	0	94	94							
E(a)	Display/Sale of goods other than hot food												
E(b)	Sale of food and drink for consumption mostly on the premises												
E(c)(i)	Financial services												
E(c)(ii)	Professional services												
E(c)(iii)	Other appropriate services in a commercial, business or service locality												
E(d)	Indoor sport, recreation, or fitness - Excluding motorised vehicles, firearms, swimming, and skating												
E(e)	Medical or health services - Except premises attached to the residence of the provider												
E(f)	Creche, day nursery or day centre - Except where including a residential use												
E(g)(i)	Offices - Except where not suitable in a residential area												
E(g)(ii)	Research and development - Except where not suitable in a residential area												
E(g)(iii)	Industrial processes - Except where not suitable in a residential area												
F1	Learning and non- residential institutions												
F2	Local community uses (essential shops, meeting places, sport, and recreation)												
OTHER													
Please Specify													
	Total		0	0	94	94							

18. All Types of Development: Non-residential Floorspace (continued)												
				(e.g. For the dis	play/sale of goo	ods under U	se Class E(a), the sale of e	ssential goods under Use				
Class F2, or as part of any other use) Yes No												
	If you have answered Yes to the question above please add details in the following table:											
ii you na	ave answered	res to the q	uestio	Existing	Tradable floo		Total tradable floor are	a Net additional tradable				
U	Jse class/type	of use	Not applicable		lost by change of use or demolition proposed (including change of			floor area following development (square metres) (h = g - e)				
E(a)	Display/Sa other tha	le of goods n hot food										
F2	(essential sh places, s	munity uses ops, meeting port, and eation)										
OTHER	1											
Please Specify												
		otal										
Does th	e proposal inc	clude loss or	gain o	of rooms for hote	ls, residential in	stitutions, c	or hostels?					
Yes	☐ Yes X No											
If you ha	If you have answered Yes to the question above please add details in the following table:											
Use class	Type of use	Not applicable	Existi	ng rooms to be I of use or dem			ns proposed (including nanges of use)	Net additional rooms				
C1	Hotels											
C2	Residential Institutions											
C2A	Secure Residential Institutions											
OTHER												
Please Specify												
						-	<u> </u>					
19. Er	nployment	:										
Please	complete the	following in	forma	tion regarding e	mployees:							
				Full-time	Part	-time		tal full-time quivalent				
l <u> </u>	xisting emplo	-		0	()		0				
Pr	oposed empl	oyees		0)		0				
\equiv												
l	ours of Ope n, please state	_	of ope	ning (e.g. 15:30)	for each non-re	sidential use	e proposed:					
	Use Monday to Friday Saturday Sunday and Bank Holidays Not known											
	n/a						bank Hondays					
[
\equiv												
21. Si	21. Site Area											
Pleases	Please state the site area in hectares (ha) 0.02											

22. Industrial or Commercial Processes and Machinery											
Please describe the activities and processes which would be carried out on the site and the end products including plant, ventilation or air conditioning. Please include the type of machinery which may be installed on site:											
Is the proposal a waste management development? Yes X No											
If the answer is Yes, please complete the following	owing	table:									
	Not applicable	including engir allowance for	acity of the void in neering surcharge cover or restoratio d waste or litres if	and making on material (no or throughput in tonnes						
Inert landfill											
Non-hazardous landfill											
Hazardous landfill											
Energy from waste incineration											
Other incineration											
Landfill gas generation plant											
Pyrolysis/gasification	\exists										
Metal recycling site											
Transfer stations											
Material recovery/recycling facilities (MRFs)											
Household civic amenity sites											
Open windrow composting											
In-vessel composting											
Anaerobic digestion											
Any combined mechanical, biological and/ or thermal treatment (MBT)											
Sewage treatment works											
Other treatment											
Recycling facilities construction, demolition and excavation waste											
Storage of waste											
Other waste management											
Other developments											
Please provide the maximum annual operati	ional t	hroughput of th	e following waste	streams:							
Municipal											
Construction, demolition and e		tion									
Commercial and industr	rial										
Hazardous		tala Caratha a sta Car	har bafaan		a contract de la descripción de Managora de						
If this is a landfill application you will need to planning authority should make clear what	o prov inform	nation it requires	on its website.	ir applicatio	n can be determined. Your waste						
23. Hazardous Substances											
Does the proposal involve the use or storage the following materials in the quantities stat			⋈ No	Not ap	plicable						
If Yes, please provide the amount of each su			_		•						
Acrylonitrile (tonnes)	hylene oxide (to	onnes)		Phosgene (tonnes)							
Ammonia (tonnes)	Hydro	ogen cyanide (to	onnes)		Sulphur dioxide (tonnes)						
Bromine (tonnes)		iquid oxygen (to	onnes)		Flour (tonnes)						
Chlorine (tonnes)	quid p	etroleum gas (to	onnes)	Re	fined white sugar (tonnes)						
Other:			Other:								
Amount (tonnes):			Amount (ton	nes):							

24. Biodiversity Net Gain	
Do you believe that, if the development is granted planning permission, the Biodiversity Gain Condition (as set out i Paragraph 13 of Schedule 7A of the Town and Country Planning Act 1990) would apply?	n
Yes No	
If No, please provide reasons, with reference to which exemptions or transitional arrangements you believe apply:	
Change of use and an extension less than 25sqm - exempt from BNG	
If Yes, please provide the information requested in all the questions below:	
	Date (DD/MM/YYYY):
Please provide the date the pre-development biodiversity value of onsite habitat(s) have been calculated: (this should be one of the following dates: the date of this application; or an earlier proposed date)	
Please provide the pre-development biodiversity value of onsite habitats on this date:	
If a date earlier than the date of the submission of the planning application has been specified above, please provided date has been used:	e reasons why this
Please state the publication date of the biodiversity metric tool(s) used to calculate the onsite biodiversity value(s) provided above.	Date (DD/MM/YYYY):

24. Biodiversity Net Gain (continued)	
Has there been any loss (or degradation) of any onsite habitat(s), resulting from activities carried out before the date	the
pre-development biodiversity value of onsite habitat(s) was calculated and either:	
 on or after 30 January 2020 which were not in accordance with a planning permission; or on or after 25 August 2023 which were in accordance with a planning permission? 	
Yes No	
If yes, please provide details including: the date immediately before this activity was carried out; the onsite biodivers	sity value on this date;
and any supporting evidence (or reference to relevant document containing these details).	
	Date (DD/MM/YYYY):
If yes, please state the publication date of the biodiversity metric tool(s) used to calculate any onsite biodiversity	Date (DD/WW/1111).
value(s) provided above.	
Does the application site have irreplaceable habitat(s) (corresponding to the descriptions in The Biodiversity Gain Rec	quiromonts
(Irreplaceable Habitat) Regulations 2024) which exist on land to which this application relates on the date the pre-de	-
biodiversity value of onsite habitat(s) was calculated?	телеринент
Yes No	
If yes, please provide a description of these and any further details (for example reference to relevant document):	
I/We confirm this application is accompanied by the following:	
i. The completed biodiversity metric tool(s) showing the calculation of the pre-development biodiversity values	, and on the dates,
detailed above including, if applicable, those related to any loss (or degradation) of any onsite habitat(s) ii. Plan(s), showing onsite habitat(s) existing on the date the pre-development biodiversity value of onsite habitat	at(s) was calculated:
and	
iii. If applicable, plan(s) showing onsite irreplaceable habitat(s) existing on the date the pre-development biodiv	ersity value of onsite
habitat(s) was calculated.	
Please provide details (for example reference to relevant document):	
Note: Plans must be drawn to an identified scale, and show the direction of North.	

25. Ownership Certificates and Agricultural Land Declaration

One Certificate A, B, C, or D, must be completed with this application form **CERTIFICATE OF OWNERSHIP - CERTIFICATE A**

Town and Country Planning (Development Management Procedure) (England) Order 2015 Certificate under Article 14

I certify/The applicant certifies that on the day 21 days before the date of this application nobody except myself/ the applicant was the owner* of any part of the land or building to which the application relates, and that none of the land to which the application relates is, or

is part of, an agricultural holding**		
NOTE: You should sign Certificate B, C application relates but the land is, or is	or D, as appropriate, if you are the sole owner of the la part of, an agricultural holding.	and or building to which the
* "owner" is a person with a freehold intere ** "agricultural holding" has the meaning	st or leasehold interest with at least 7 years left to run. given by reference to the definition of "agricultural tenant" in	section 65(8) of the Act.
Signed - Applicant:	Or signed - Agent:	Date (DD/MM/YYYY):
		07/02/2025
21 days before the date of this application application relates. * "owner" is a person with a freehold intere	ve/the applicant has given the requisite notice to everyor on, was the owner* and/or agricultural tenant** of any p ast or leasehold interest with at least 7 years left to run. oven in section 65(8) of the Town and Country Planning Act 1	part of the land or building to which this
Name of Owner / Agricultural Tenant	Address	Date Notice Served

Signed - Applicant:	Or signed - Agent:	Date (DD/MM/YYYY):

25. Ownership Certificates and Agricultural Land Declaration (continued) **CERTIFICATE OF OWNERSHIP - CERTIFICATE C** Town and Country Planning (Development Management Procedure) (England) Order 2015 Certificate under Article 14 I certify/ The applicant certifies that: Neither Certificate A or B can be issued for this application All reasonable steps have been taken to find out the names and addresses of the other owners* and/or agricultural tenants** of the land or building, or of a part of it, but I have/ the applicant has been unable to do so. * "owner" is a person with a freehold interest or leasehold interest with at least 7 years left to run. ** "agricultural tenant" has the meaning given in section 65(8) of the Town and Country Planning Act 1990 The steps taken were: Name of Owner / Agricultural Tenant **Date Notice Served** Address Notice of the application has been published in the following newspaper On the following date (which must not be earlier (circulating in the area where the land is situated): than 21 days before the date of the application): Signed - Applicant: Or signed - Agent: Date (DD/MM/YYYY): **CERTIFICATE OF OWNERSHIP - CERTIFICATE D** Town and Country Planning (Development Management Procedure) (England) Order 2015 Certificate under Article 14 I certify/ The applicant certifies that: Certificate A cannot be issued for this application All reasonable steps have been taken to find out the names and addresses of everyone else who, on the day 21 days before the date of this application, was the owner* and/or agricultural tenant** of any part of the land to which this application relates, but I have/ the applicant has been unable to do so. owner" is a person with a freehold interest or leasehold interest with at least 7 years left to run. The steps taken were:

"agricultural tenant" has the meaning given in section 65(8) of the Town and Country Planning Act 1990

lotice of the application has been published in the following newspaper circulating in the area where the land is situated):		On the following date (which than 21 days before the date	must not be earlier of the application):	
iigned - Applicant:	Or signed - Agent:		Date (DD/MM/YYYY):	
	A			

26. Planning	J Application Requiremen	its - Checklisi	t					
information requ	following checklist to make sure uired will result in your application ng Authority (LPA) has been sub	on being deeme	ll the i ed inva	information in suppo alid. It will not be co	ort of your nsidered v	proposal. Failure to s ralid until all informat	submit all ion required	by
The original and 3 copies* of a completed and dated application form:		X	The correct fee:				X	
The original and 3 copies* of the plan which identifies the land to which the application relates drawn to an identified scale and showing the direction of North:			\sim	The original and 3 copies* of a design and access statement, if required (see help text and guidance notes for details):				
			X	The original and 3 copies* of a fire statement, if required (see help text and guidance notes for details):				
The original and 3 copies* of other plans and drawings or information necessary to describe the subject of the application.		X	The original and 3 copies* of the completed, dated Ownership				×	
total of four cop LPAs may also ac You can check y	ition specifies that the applicant ies), unless the application is sub ccept supporting documents in our LPA's website for informatio ught from one of the Planning P	omitted electron electronic forma n or contact the	ically it by p ir plan	or, the LPA indicate ost (for example, on ining department to	that a sma a CD, DVI discuss th	aller number of copies O or USB memory stick nese options.	s is required. k).	
information. I/w	ly for planning permission/cons e confirm that, to the best of my as of the person(s) giving them.	ent as described /our knowledge Or signed - Ag	, any f	s form and the accor facts stated are true	and accur	plans/drawings and ate and any opinions Date (DD/MM/YYYY): 07/02/2025	additional given are the (date canno pre-applica	ot be
28. Applicant Telephone num Country code: Country code: Country code: Email address (country code:	National number: Mobile number (optional): Fax number (optional): optional):	Extension		Country code: M	lational nu Mobile nun Tax numbe		Extens	
If the planning a out a site visit, w If Other has been Contact name:	een from a public road, public fouthority needs to make an appo whom should they contact? (Pleas n selected, please provide:	intment to carry	,	other public land? Agent Telephone number	Yes Appli		different from plicant's deta	
Email address:								