

Proud of our past. Energised for our future.

Copeland Borough Council The Copeland Centre. Catherine Street, Whitehaven, Cumbria CA28 7SJ

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Application for approval of details reserved by condition.

Town and Country Planning Act 1990

Planning (Listed Buildings and Conservation Areas) Act 1990

You can complete and submit this form electronically via the Planning Portal by visiting www.planningportal.gov.uk/apply

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.

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	First name:	IAN	2 2	Title:		First name:		
Last name:	LAUGHLIN			Last name:					
Company (optional):			-83	1	Company (optional):				
Unit:		House number:	29	House suffix:	Unit:		House number:		House suffix:
House name:					House name:				
Address 1:	HILLCE	ZEST A	USNU	e	Address 1:				
Address 2:					Address 2:				
Address 3:			V. *		Address 3:				
Town:	WHITE	EHAVEN	J		Town:				
County:	CUM.	BRIA			County:				
Country:	U.K.			100 %	Country:	5	ğ «	9 0 8 9 9 8	
Postcode:	CA28	GST			Postcode:				24

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 authority about this application?							
Unit: House House suffix:	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								
Address 1: INKERMAN TERRACE	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: WHITEHAVEN	Reference:							
County: CUMBRIA								
Postcode (optional): The control of	Date (DD/MM/YYYY): (must be pre-application submission)							
(must be completed if postcode is not known):	Details of pre-application advice received?							
Easting: Northing:								
Description: SMALL FLELD BELOW BUNGALOW								
(ROCKSTONE LETREAT).								
Clausione 2017.								
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:								
RELOCATION AND IMPROVEMENT OF EXISTING FIELD ACCESS								
(Date must be are application								
Reference number: 42020480F1 Date of decision: 27/03/2020 (Date must be pre-application submission) (DD/MM/YYYY)								
Please state the condition number(s) to which this application relate	S: MEASURES TO PREVIOUS WATER							
1.	6. DISCHARGING ONTO OFF THE HIGHWAY							
2.	7.							
3. ACCESS GATE	8.							
4.	9.							
5.	10.							
Has the development already started?	Yes No							
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 th	nat are being submitted for approval:							
3-CONCRETE PUNDATION, BLOCK WALL WITH ARTT	PBS							
6-STEEL ACO CHANNEL SYSTEM TO ADJACENT SOALAWAY WITHIN SITE PERIMETER.								
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:								
in respondent management part of the contained your application in								

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: The original and 3 copies* of other plans and drawings or information 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):									
09 12 2022 (date cannot be pre-application)									
(date earnier 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: Extension number:								
	National number.								
Country code: Mobile number (optional)	Country code: Mobile number (optional):								
Country code:	Country code: Fax number (optional):								
Email address (optional):	Email address (optional):								
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								
If Other has been selected, please provide:									
Contact name:	Telephone number:								
	l I								

Email address: