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Copeland Borough Council The Copeland Centre, Catherine Street, Whitehaven, Cumbria CA28 7SJ tel: 0845 054 8600 fax: 01946 59 83 03 email: info@copeland.gov.uk web: www.copeland.gov.uk

Application for approval of reserved matters following outline approval.

Article 5, Town and Country Planning (Development Management Procedure) (England) Order 2010

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. Applic	ant Name and Address	2. Agent Name and	2. Agent Name and Addr	
Title:	MR First name: MARK	Title:	First n	
Last name:	KEENAN	Last name:		
Company (optional):		Company (optional):		
Unit:			louse umber	
House name:		House name:		
Address 1:	CALOBECK ROAD	Address 1:		
Address 2:		Address 2:		
Address 3:		Address 3:		
Town:	WHITEHAVEA	Town:		
County:	CUMBRIA	County:		
Country:	UK .	Country:		
Postcode:	C18 6×Q	Postcode:		

Title:	First name:	
Last name:		
Company (optional):		
Unit:	House number:	House suffix:
House name:		
Address 1:		
Address 2:		
Address 3:		
Town:		
County:		
Country:		
Postcode:		

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 number: PLOT 15 House suffix:	authority about this application? Yes V 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: RUSPER ORIVE	application more efficiently). Please tick if the full contact details are not				
Address 2: Mool Row	known, and then complete as much as possible:				
Address 3:	Officer name:				
Town: WHITEHAVEN	Reference:				
County: CUMBRIA	Reference:				
Postcode (optional): CA24 3TN	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:	Details of pre-application advice/received				
Description:					
5. Development Description					
Please indicate which reserved matter(s) you require to be determine	and under this application:				
Access Appearance Land					
Please provide a description of the approved development as shown					
OUTLINE APPLICATION FOR THE ERECTION OF 26 DWELLINGS.					
€ NOT HAD SIGHT OF OUTLINE APPLICATION €					
Reference number: 4-16/2206/001 Date of decision:	28 08 2a7 (date must be pre-application submission) (DD/MM/YYYY)				
Please provide a description of the reserved matters for which you are seeking consent. Please state if the outline planning application was an environment impact assessment application and, if so, confirm that an environmental statement was submitted to the planning authority at that time.					
NO ENVIRONMENT IMPACT ASSESSMENT APPLIC	ATION				
W NOT HAD SIGHT OF OUTLINE APPLICATION &					
Has the development already started?					
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)					
C. Buch a day Proplem - 188 - 15 -					
6. Authority Employee / Member With respect to the Authority, I am: (a) a member of staff Do any of these statements apply to you? Yes No					
(b) an elected member	22 2.1, 0. mars amanda appr, 12 / 2-1				
(c) related to a member of staff					
(d) related to an elected member	er				
If Yes, please provide details of the name, relationship and role					

ist of all relevant drawings, including reference num of the original decision:	nbers, that were approved as part	List of drawing numbers submitted with this application for approval:
Drawing	Reference Number	Drawing Number
DEVELOPMENT PLAN	88845-10A	B8845 - 10A
		0010
leasons for any changes to the original drawings (if	applicable):	
NOT APPLICABLE		
. Planning Application Requirements - C lease read the following checklist to make sure you need to be a completed will result in your application be a coal Planning Authority has been submitted	have sent all the information in suppo-	ort of your proposal. Failure to submit all nsidered valid until all information required by
lease read the following checklist to make sure you	have sent all the information in suppo-	nsidered valid until all information required by
lease read the following checklist to make sure you iformation required will result in your application be Local Planning Authority has been submitted. The original and 3 copies of a	have sent all the information in suppo eing deemed invalid. It will not be cor The correct The original as are neces	nsidered valid until all information required by
lease read the following checklist to make sure you information required will result in your application be Local Planning Authority 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 escribe the subject of the application: The original and 3 copies of other plans and drawings or information necessary to escribe the subject of the application:	have sent all the information in support eing deemed invalid. It will not be considered in the correct The original as are necessin the outliness described in this form and the accordance in the accordance.	I and 3 copies of such plans and drawings ssary to deal with the matters reserved ne planning permission.
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10. Applicant Contact Details	11. Agent Contact Details					
Telephone numbers	Telephone numbers					
Country code: National number: Extension number: Country code: Mobile number (optional):	Country code: National number: Country code: Mobile number (optional):					
Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional):	Country code: Fax number (optional): Email address (optional):					
12. Site Visit						
Can the site be seen from a public road, public footpath, bridleway or other public land?						
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:					
Email address:						