

Application for removal or variation of a condition following grant of planning permission. Town and Country Planning Act 1990. Planning (Listed Buildings and Conservation Areas) Act 1990

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.

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:



The Market Hall Market Place Whitehaven Cumbria CA28 7JG Telephone 0300 373 3730 cumberland.gov.uk

Publication of applications on 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.

If printed, please complete using block capitals and black ink.

It is important that you read the accompanying guidance notes and help text as incorrect completion will delay the processing of your

application.

Applicant Name and Address		
Title:	MR First name: MARC	
Last name:	ALMOND	
Company (optional):		
Unit:	House number: 2 House suffix:	
House name:		
Address 1:	CHURCH WALK	
Address 2:		
Address 3:		
Town:	MILLOM	
County:	CUMBRIA	
Country:	KAR ENGLAND	
Postcode:	LA 18 5 BZ	

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

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Please provi Unit: [House name: [Address 1: [Address 2: [Address 3: [Town: [Postcode (optional): [Description	Address Details ide the full postal address of the application site. House number: 2 House suffix: CHURCH WALK CUMBRIA LAIB SAZ of location or a grid reference. mpleted if postcode is not known): Northing:	4. Pre-application Advice 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?			
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: RAISE THE ROOF HEIGHT, ERECT 3-STOREY SIDE AND REAR EXTENSION, TWO STOREY REAR EXTENSION AND PROVIDE A FIRST FLOOR REAR FACING TERRACE Reference number: 4 23 2120 DF Date of decision (DD/MM/YYYY): 10 08 2023 (date must be pre-application submission)					
	the condition number(s) to which this application relate				
1.		6.			
2.		7.			
3.		8.			
4.		9.			
5.		10.			
Has the deve	elopment 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?					
	If Yes, please state when the development was completed (DD/MM/YYYY): (date must be pre-application submission)				
A 103, piease					
6. Condition(s) - Removal Please state why you wish the condition(s) to be removed or changed: IN VIEW OF THE HIGH WINDS EXPERIENCED AT PHIS LOCATION, (I) STRUCTURAL REINFORCEMENT OF THE LOUVRED BARRIER & (2) REPLACING EXTERNAL PLASTER RENDER WITH TIMBER CLADDING. EDEN INSULATION, TIMBER FRAME MANUFACTURERS IN APPLERY, ALSO ADVISE THEY DO NOT DIFFER A RENDERED FINISH DUE TO THE MOVEMENT IN HIGH WINDS. If you wish the existing condition to be changed, please state how you wish the condition to be varied: D THE LOUVRED BARRIER AND PERGOLA TO BE RAISED SLIGHTLY AND THE TWO STOREY REAR EXTENSION TO BE MOVED OUT TO SIT ON THE SAME BUILD LINE AS THE NEIGHBOURS 2-STOREY					
BUILD LINE @ THE EXTERNAL FINISH TO BE TIMBER CLADDING, SUCH AS WESTERN RED CEDAR OR SIBERIAN LARCH OR SIMILAR SPECIES THAT WEATHER TO A SILVERY FINISH.					

7. 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 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 a gricultural holding** NOTE: You should sign Certificate B, C or D, as appropriate, if you are the sole owner of the land or building to which the application relates but the land is, or is part of, an agricultural holding. * "owner" is a person with a freehold interest or leasehold interest with at least 7 years left to run. ** "agricultur." reference to the definition of "agricultural tenant" in section 65(8) of the Act. Signed - App Or signed - Agent: Date (DD/MM/YYYY): 03 2025 Town and Country Planning (Development Management Procedure) (England) Order 2015 Certificate under Article 14 I certify/ The applicant certifies that I have/the applicant has given the requisite notice to everyone else (as listed below) 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 or building to which this application relates. * "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 Name of Owner / Agricultural Tenant Address Date Notice Served Signed - Applicant: Or signed - Agent: Date (DD/MM/YYYY):

8. Planning Application Requirements - Checklist Please read the following checklist to make sure you have sent all th information required will result in your application being deemed in the Local Planning Authority (LPA) has been submitted.	ne information in support of your proposal. Failure to submit all availd. It will not be considered valid until all information required by				
The original and 3 copies* of a completed and dated application form:	The original and 3 copies* of the completed, dated Ownership Certificate (A, B, C or D – as applicable)				
The original and 3 copies* of other plans and drawings or information necessary to describe the subject of the application:	and Article 14 Certificate (Agricultural Holdings):				
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.					
Page Page	y facts stated are true and accurate and any opinions given are the				
10. Applicant contact betails	11. Agent Contact Details				
Country code: National number: Country code: Mobile number (optional): Country code: Mobile number (optional): Email address (optional):	Telephone numbers Country code: National number: Country code: Mobile number (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? Yes No Other fit life and appointment to carry					
out a site visit, whom should they contact? (Please select only one) Agent Applicant Under (If different from the agent/applicant's details)					
If Other has been selected, please provide: Contact name:	Telephone number:				
Emall address:					