

Application for Approval of Details Reserved by Condition

Town and Country Planning Act 1990 (as amended); Planning (Listed Buildings and Conservation Areas) Act 1990 (as amended)

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.

Site Location

Disclaimer: We can only make recommendations based on the answers given in the questions.

If you cannot provide a postcode, the description of site location must be completed. Please provide the most accurate site description you can, to help locate the site - for example "field to the North of the Post Office".

Number

Suffix

Property Name

Address Line 1

Address Line 2

Address Line 3

Town/city

Postcode

Description of site location must be completed if postcode is not known:

Easting (x)

Northing (y)

Description

Applicant Details

Name/Company

Title

First name

Surname

Company Name

Address

Address line 1

Address line 2

Address line 3

Town/City

County

Country

Postcode

Are you an agent acting on behalf of the applicant?

Yes

No

Contact Details

Primary number

Secondary number

Fax number

Email address

Agent Details

Name/Company

Title

First name

Surname

Company Name

Address

Address line 1

Address line 2

Address line 3

Town/City

County

Country

Postcode

Contact Details

Primary number

***** REDACTED *****

Secondary number

Fax number

Email address

***** REDACTED *****

Description of the Proposal

Please provide a description of the approved development as shown on the decision letter

(1) Conversion of the existing health facilities (use class D1) to a mixed-use development providing 71 no. residential apartments (use class C3) and 500 sqm of D1 (Health) floorspace. (2) Restoration, alteration, extensions and demolition (mainly of later additions) to the existing buildings, new build and provision of a lower ground floor basement (car parking, plant and servicing) and associated landscaping. (3) Listed building consent for the refurbishment and restoration of Shaftesbury House (Grade II listed), conversion of existing health facilities (use class D1) to residential apartments (use class C3) and all ancillary and associated works

Listed Building Consent for (1) Conversion of the existing health facilities (use class D1) to a mixed-use development providing 71 no. residential apartments (use class C3) and 500 sqm of D1 (Health) floorspace. (2) Restoration, alteration, extensions and demolition (mainly of later additions) to the existing buildings, new build and provision of a lower ground floor basement (car parking, plant and servicing) and associated landscaping. (3) Listed building consent for the refurbishment and restoration of Shaftesbury House (Grade II listed), conversion of existing health facilities (use class D1) to residential apartments (use class C3) and all ancillary and associated works

Reference number

18/3950/FUL

Date of decision (date must be pre-application submission)

15/07/2019

Please state the condition number(s) to which this application relates

Condition number(s)

DV18A - Refuse arrangements

Has the development already started?

Yes

No

If Yes, please state when the development was started (date must be pre-application submission)

25/01/2021

Has the development been completed?

Yes

No

Part Discharge of Conditions

Are you seeking to discharge only part of a condition?

Yes

No

Discharge of Conditions

Please provide a full description and/or list of the materials/details that are being submitted for approval

Please refer to accompanying cover note P20103-FCH-XX-XX-CO-A-0001 which outline the strategy for refuse collections and drawing P20103-FCH-XX-XX-DR-A-3406 which indicates the proposed locations and layout of bins stores.

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?

The agent

The applicant

Other person

If Other has been selected, please provide contact details:

Title

**** REDACTED ****

First name

**** REDACTED ****

Surname

**** REDACTED ****

Phone Number

**** REDACTED ****

Email

**** REDACTED ****

Pre-application Advice

Has assistance or prior advice been sought from the local authority about this application?

Yes

No

Declaration

I/We hereby apply for Approval of details reserved by a condition (discharge) as described in the questions answered, details provided, 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.

I/We also accept that, in accordance with the Planning Portal's terms and conditions:

- Once submitted, this information will be made available to the Local Planning Authority and, once validated by them, be published as part of a public register and on the authority's website;
- Our system will automatically generate and send you emails in regard to the submission of this application.

I / We agree to the outlined declaration

Signed

Falconer Chester Hall

Date

27/03/2024