



County of Herefordshire District Council Planning Services PO Box 230 Blueschool House Blueschool Street Hereford HR1 2ZB

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. Appli	cant Name and Address	2. Agent Name and Address	
Title:	Meengs First name:	Title: First name:	
Last name	DAVIES	Last name:	
Company (optional):		Company (optional): JOHN PHIPPS	
Unit:	House House suffix:	Unit: House number: House suffix:	
House name:		House name: BANK LOSE	
Address 1		Address 1: COLDWELLS ROAD	
Address 2		Address 2:	
Address 3		Address 3:	
Tovan:		Town: HEREFORD	
County:		County:	
Country:		Country:	
Postcode		Postcode: HEI ILH.	

3. Site A	ddress Details	4. Pre-application Advice			
·	vide the full postal address of the application site. House House	Has assistance or prior advice been sought from the local authority about this application?			
Unit:	number: suffix:	If Yes, please complete the following information about the advice			
House name:	LAND ADJACENT TO	you were given. (This will help the authority to deal with this			
Address 1:	THE CLOVERS	application more efficiently). Please tick if the full contact details are not			
Address 2:	BISHOPSTONE	known, and then complete as much as possible:			
Address 3:		Officer name:			
Town:					
County:	HEREFORDSHIRE	Reference:			
Postcode	HR4 7HX	· []			
(optional):	n of location or a grid reference.	Date (DD/MM/YYYY): (must be pre-application submission)			
(must be co	ompleted if postcode is not known):	Details of pre-application advice received?			
Easting:	Northing:				
Descriptio	on:	n 			
5. Devel	opment Description				
Please indic	cate which reserved matter(s) you require to be determi	ned under this application:			
Access		ndscaping Cale			
Please prov	vide a description of the approved development as sho	wn on the decision letter:			
SITIE	e for proposed dwel	LING			
Reference i	number: 163811 Date of decision	(date must be pre-application submission) (DD/MM/YYYY)			
		vabinission, (pb///urd 1111)			
was an env	vironment impact assessment application and, if so, con	are seeking consent. Please state if the outline planning application firm that an environmental statement was submitted to the planning			
	at that time.	10774cF 0484cf			
720	POSED ERECTION OF C	conage e caese			
(De	toils supplied).				
Has the de	evelopment already started?	Yes No			
If Yes, plea	ase state when the development was started (DD/MM/Y	YYY): (date must be pre-application submission)			
Has the work been completed?					
	If You places state when the development was completed (DD/MM/VVV). (date must be pre-application				
" Tes, prea	and state when the development was completed (DD/Wil	submission)			
	ority Employee / Member				
With respec	ct to the Authority, I am: (a) a member of staff (b) an elected member	Do any of these statements apply to you? Yes No			
	(c) related to a member of staf				
	(d) related to an elected memi	her			
	• •	W-t-1			
	ise provide details of the name, relationship and role				
If Yes, pleas	se provide details of the name, relationship and role				
	ise provide details of the name, relationship and role				

st of all relevant drawings, including reference numbers, th the original decision:	nat were approved as part	List of drawing numbers submitted wi this application for approval:
Drawing	Reference Number	Drawing Number
PROSED COTTAGE DESIGN,		1000:50
Topo suevey		
asons for any changes to the original drawings (if applicab	ole):	
	,	
Planning Application Requirements - Checklistase read the following checklist to make sure you have sen ormation required will result in your application being deer	nt all the information in support med invalid. It will not be consi	dered valid until all information required l
Local Planning Authority has been submitted. e original and 3 copies of a npleted and dated application form:	The correct fe	e: [462
e original and 3 copies of other plans d drawings or information necessary to scribe the subject of the application:	as are necessa	nd 3 copies of such plans and drawings my to deal with the matters reserved planning permission.
Declaration The hereby apply for planning permission/consent as described.	ped in this form and the accomp	panying plans/drawings and additional
ormation. I/we confirm that, to the best of my/our knowled nuine opinions of the person(s) giving them.	ige, any facts stated are true and	d accurate and any opinions given are the
gned - Applicant:	Or signed - Agent:	

\$Date: 2012-07-17 #\$ \$Revision: 4636 \$

10. Applicant Contact Details	11. Agent Contact Details		
Telephone numbers	Telephone numbers		
Country code: National number: Extension number:	Country code: National number: Extension number: 01432 276434		
Country code: Mobile number (optional):	Country code: Mobile number (optional):		
	07836 340996.		
Country code: Fax number (optional):	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 of 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:		
Contact name:	relephone number.		
Email address:			