

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

HEREFORDSHIRE COUNCIL
PLANNING SERVICES
DEVELOPMENT CONTROL

0 3 SEP 2012

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: MA First name: (AN	Title: M.C. First name: PAUL
Last name: JoSEPH	Last name: SM (TH
Company (optional):	Company (optional): PAUL SUITH ASSOCIATES
Unit: House number: House suffix:	Unit: House number: 12 House suffix:
House name: Co ACTENIT	House name:
Address 1:	Address 1: CASTLE STREET
Address 2:	Address 2:
Address 3:	Address 3:
Town:	Town: HERE FORD
County:	County: MEREFORDSHAE
Country:	Country:
Postcode:	Postcode: KRIZNL

3. Site Address Details	4. Pre-application Advice
Pleasè provide the full postal address of the application site.	Has assistance or prior advice been sought from the local
Unit: House number: House suffix:	authority about this application?
House THE GOOD UFE	If Yes, please complete the following information about the advice
Address 1: SHELWICK	you were given. (This will help the authority to deal with this application more efficiently).
Address 2:	Please tick if the full contact details are not known, and then complete as much as possible:
Address 3:	Officer name:
	MR MARK TANSLEY
Town: ITOREFORD.	Reference:
County:	
Postcode (optional): HR 1 3AS	Date (DD/MM/YYYY): (must be pre-application submission)
Description of location or a grid reference. (must be completed if postcode is not known):	Details of pre-application advice received?
Easting: Northing:	MEDICATION STOOLS I NELUDE DEATES
Description:	of easing vegention.
5. Description Of Your Proposal	
	own on the decision letter, including the application reference number
and date of decision in the sections below:	
SITING OF TEMPORARY LIVING	ACCOMMODATION TOP
AGRICULTURAL WORKER	
Potovonce number DMS 1117()F	(Date must be pre-application
Reference number: Date of decision	n: 20-7-2012 (Date must be pre-application submission) (DD/MM/YYYY)
Please state the condition number(s) to which this application rela	ates:
1. CONDITION S: DETAILS OF HAND SOFT CANDSCAPING	6.
2.	7. HEREFORDSHIRE COUNCIL PLANNING SERVICES
3.	8. DEVELOPMENT CONTROL
4.	9.
5.	10. Ackigi reserves File:
Has the development already started?	Yes No
	(date must be pre-application
If Yes, please state when the development started (DD/MM/YYYY)	Subillission)
Has the development been completed?	Yes No
if Yes, please state when the development was completed (DD/M	MM/YYYY): (date must be pre-application submission)
6. Discharge Of Condition	
Please provide a full description and/or list of the materials/details	s that are being submitted for approval:
DEMICO F CAMP COM CAMP OF CAMPE	
שבויונגן טר וויים איים שבויון טרישטטו	
7. Part Discharge Of Condition(s)	
	☐ Yes ☐ No
Are you seeking to discharge only part of a condition?  If Yes, please indicate which part of the condition your application	
in respendent military part of the condition your application	

8. Planning Application Requirements - Checklist  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 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: £85			
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:	_		
Bu			
Date (DD/MM/YYYY):  27-8-12 (date cannot 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:  National number:  D 1432 340 768			
Country code: Mobile number (optional):  Country code: Mobile number (optional):  0788 432 7842			
Country code: Fax number (optional):  Country code: Fax number (optional):			
Email address (optional):  Email address (optional):			
Mip@ par Suitt planing. co. ut			
12. Site Visit  Can the site be seen from a public road, public footpath, bridleway or other public land? Yes			
If the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (Please select only one)  Applicant  Other (if different from to agent/applicant's detail			
If Other has been selected, please provide:			
Contact name: Telephone number:			
Email address:			

PLANNING SERVICES
DEVELOPMENT CONTROL

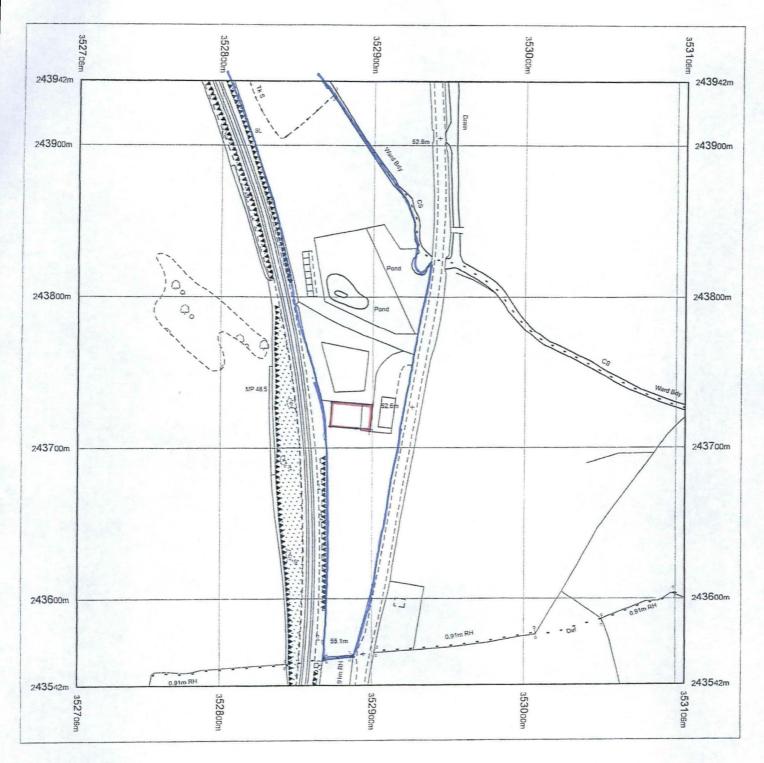
0 3 SEP 2012

To:





## OS Sitemap®



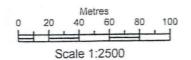
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Further information can be found on the OS Sitemap Information leaflet or the Ordnance Survey web site: www.ordnancesurvey.co.uk



