Kirklees COUNCIL

Planning

PO Box 893, Civic Centre 3, Huddersfield, HD1 2JR Tel: 01484 414746 Email: planning.contactcentre@kirklees.gov.uk

PLAN NO.	16/61/91325/E		
DATE LODGED	26.4.16		
RECEIPT NO.		FEE RECEIVED	
CASH	CHEQUE	OTHER	
KIRKLEES COUNCIL - RESPONDING TO THE RECESSION VALIDATION CHECKLIST: SUPPLY 1 COPY (PLUS THE ORIGINAL)			

Application for approval of reserved matters following outline approval.

Town and Country Planning (Development Management Procedure) (England) Order 2015

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

Title:	MR
First name:	STEVEN
Last name:	KELWORTHY
Company (optional):	
Unit:	
House number:	21
House suffix:	
House name:	
Address 1:	FAR BANK
Address 2:	SHELLEY
Address 3:	
Town:	HUDDERSFIELD
County:	W/YORKSHIRE
Country:	
Postcode:	HD8 8HS

2. Agent Name and Address

Title:	MR
First name:	JOHN
Last name:	ELLIOTT
Company (optional):	JOHN ELLIOTT SURVEYORS
Unit:	
House number:	20
House suffix:	
House name:	
Address 1:	PICKLES LANE
Address 2:	SKELMANTHORPE
Address 3:	
Town:	HUDDERSFIELD
County:	W/YORKSHIRE
Country:	
Postcode:	HD8 9EJ

3. Site Address Details

Please provide the full postal address of the application site.

Unit: | House number: 21 | House suffix:

House name:

Address 1: FAR BANK

Address 2: SHELLEY

Address 3:

Town: HUDDERSFIELD

County: W/ YORKSHIRE

Postcode (optional): HD8 8HS

Description of location or a grid reference.
(must be completed if postcode is not known):

Easting: | Northing:

Description:

4. Pre-application Advice

Has assistance or prior advice been sought from the local authority about this application? ☑ Yes ☐ No

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: KATIE WILSON

Reference:

Date (DD/MM/YYYY): 22/04/2016
(must be pre-application submission)

Details of pre-application advice received?

appears to best way forward would be application for approval of reserved matters

5. Development Description

Please indicate which reserved matter(s) you require to be determined under this application:

☑ Access ☑ Appearance ☑ Landscaping ☑ Layout ☑ Scale

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

Variation of condition 5 (sight lines) on previous permission 2014/70/93167/E
Outline application for residential development 2013/60/94083/E

Reference number: 2014/70/93167/E Date of decision: 20/04/2015 (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.

Details of access, layout, scale, appearance + landscaping (condition 1)

Has the development already started? ☐ Yes ☑ No

If Yes, please state when the development was started (DD/MM/YYYY): (date must be pre-application submission)

Has the work been completed? ☐ Yes ☑ No

If Yes, please state when the development was completed (DD/MM/YYYY): (date must be pre-application submission)

6. Authority Employee / Member

With respect to the Authority, I am: (a) a member of staff
(b) an elected member
(c) related to a member of staff
(d) related to an elected member

Do any of these statements apply to you? ☐ Yes ☑ No

If Yes, please provide details of the name, relationship and role

7. Supporting Information

Please provide the following information:

List of all relevant drawings, including reference numbers, that were approved as part of the original decision:

Drawing	Reference Number
Indicative Plan	
location Plan	

List of drawing numbers submitted with this application for approval:

Drawing Number
16/D/24/1
" /2
" /3

Reasons for any changes to the original drawings (if applicable):

N/A

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 correct fee: ☑

The original and 3 copies of other plans and drawings or information necessary to describe the subject of the application: ☑

The original and 3 copies of such plans and drawings as are necessary to deal with the matters reserved in the outline planning permission. ☑

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:

Date (DD/MM/YYYY):

22/04/2016 (date cannot be pre-application)

10. Applicant Contact Details

Telephone numbers

Country code:	National number:	Extension number:

Country code: | Mobile number (optional):

Country code: | Fax number (optional):

Email address (optional):

11. Agent Contact Details

Telephone numbers

Country code:	National number:	Extension number:
01454	864622	

Country code: | Mobile number (optional):

Country code: | Fax number (optional): 864622

Email address (optional): johngeelliott@sky.com

12. 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? *(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: