APPLICATION NO.	
DATE LODGED	
RECEIPT NO.	FEE RECEIVED
CARD	OTHER
KIRKLEES COUNCIL VALIDATION CHECKLIST	SUPPLY 1 COPY (PLUS THE ORIGINAL)

PLANNING - PO Box B93, Civic Centre 3, Huddersfield, HD1 2JR **Tel:** 01484 414746 **E-mail :** dc.admin@kirklees.gov.uk

Application for approval of details reserved by condition.
Town and Country Planning Act 1990
Planning (Listed Buildings and Conservation Areas) Act 1990

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.

1. Applicant Name, Address and Contact Details

Title:	Mr	First Name:	Nick	Surname:	Saunders
Company name:					
Street address:	N/A				
			Telephone number:		
			Mobile number:		
Town/City:			Fax number:		
Country:			Email address:		
Postcode:					

Are you an agent acting on behalf of the applicant? (•) Yes ( ) No

2. Agent Name, Address and Contact Details

Title:	Mr	First Name:	Glen	Surname:	Reid
Company name:	Ellis Healey Architecture				
Street address:	Unit 01/04 Tower Works				
	Globe Road		Telephone number:		01133453090
			Mobile number:		
Town/City:	Leeds		Fax number:		
Country:			Email address:		
Postcode:	LS11 5QG		glen@ellishealey.com		

3. Site Address Details

Full postal address of the site (including full postcode where available)

House: | Suffix:

House name:

Street address: LAND ADJACENT 49

HELME LANE

MELTHAM

Town/City: HOLMFIRTH

Postcode: HD9 5PF

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

Easting: 409596

Northing: 411154

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):

Officer name:

Title: | First name: | Surname:

Reference:

Date (DD/MM/YYYY): (Must be pre-application submission)

Details of the pre-application advice received:

N/A: Direct contact between planning officer and client.

5. Description of the Proposal

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

ERECTION OF 1 PAIR OF SEMI-DETACHED DWELLINGS

Application reference number: 2014/62/92112/W | Date of decision: 10/03/2015

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

3. Construction materials - i.e. natural stone and roof tiles - currently available for inspection on site. Not practical to deliver sample at local authority office.

8 / 9 / Preliminary Risk Assessment (Phase I Desk Study Report) enclosed with application.

13. '1805 - SK - 01 Remedial Drainage Works' drawing submitted.

Has the development already started? ( ) Yes (•) No

6. Discharge of Condition(s)

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

- 18 - SK - 01 Remedial Drainage Works
- Preliminary Risk Assessment (Phase I Desk Study Report)

7. Part Discharge of Condition(s)

Are you seeking to discharge only part of a condition? ○ Yes ◉ No

8. 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)

○ The agent ◉ The applicant ○ Other person

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. ☑ Date 28/02/2018